

DATA NOTES FOR *IDEA*, PART C

These data notes contain information on the ways in which states collected and reported data differently from the OSEP data formats and instructions. In addition, the notes provide explanation of significant changes in the data from the previous year. The data covered in these data notes are:

- **2006 Child Count**
- **2005 Settings**
- **2006 Settings**
- **2005-06 Exiting**

2006 Part C Child Count Data

Alabama

There was an increase in the number of Hispanic children ages 0-2. The change was attributed to the overall growth in the Hispanic population over the past few years. As cited in Alabama's State Performance Report, there have been increased public awareness activities targeting this population, as well as, a Hispanic 1-800 Child Find line established to accommodate incoming referrals and inquiries.

American Samoa

There was a decrease in the total number of children served. The decrease was due to in April 2006 American Samoa provided staff training on a new Assessment tool, the *Assessment, Evaluation and Programming System* (AEPS) and redefined their eligibility criteria. American Samoa's eligibility criterion includes premature babies. As a result of the AEPS training, the ability to properly reevaluate eligibility at the annual evaluation has greatly improved. Children that are found to be developmentally age appropriate at the annual evaluation are now exited from the program. This change has caused an increase in the number of children exited from the program and is a contributing factor in the decreased Child Count. The AEPS training has improved the overall ability of staff to determine eligibility.

Arizona

The state had a total of 227 unknown ethnicity data for the Child Count table. Using the unknown ethnicity formula, they assigned to: American Indian or Alaska Native total = 17: birth to 1 = 0; 1 to 2 = 3; 2 to 3 = 14. Asian or Pacific Islander total = 4: birth to 1 = 0; 1 to 2 = 4; 2 to 3 = 0. Black (Not Hispanic) total = 10: birth to 1 = 4; 1 to 2 = 5; 2 to 3 = 1. Hispanic total = 86: birth to 1 = 12; 1 to 2 = 24; 2 to 3 = 50. White (Not Hispanic) total = 110: birth to 1 = 9; 1 to 2 = 32; 2 to 3 = 69. Grand total = 227: Birth to 1 = 25; 1 to 2 = 68; 2 to 3 = 134.

The state resubmitted a revised Child Count for 2006. The original December 1 2006 Child Count was lower than expected when compared to other child data that was being regularly collected and reviewed throughout the year. A thorough review of the data preparation process, along with a review of the OSEP criteria for identifying active IFSPs, revealed that a number of records were being excluded from the Child Count. The exclusions were related to reliance on initial, rather than current IFSP dates, and exclusion of records that lacked Settings data.

There was an increase in the total number of children, American Indian/Alaska Native, Black, Hispanic, and White children ages 0-2. These changes are attributed to the continued significant increase in the 0-5 population growth. It is also associated with targeted Child Find/Public Awareness efforts to the health, and medical field, as well as efforts to identify programs that serve underserved populations.

Arkansas

There was an increase in the total number of children served ages 0-2. This increase was due to the improvement and verification methods used to allow the state's two data systems (SEAS and DDS Mainframe) to capture all possible eligible children.

There was an increase in the number of Black, Hispanic, and White children served ages 0-2. This increase was directly related to the increase of the number of children reported; also due to public awareness methods.

California

Although California serves the at-risk population, California's data do not distinguish them from other Early Start children. Some children enter the program as at-risk (e.g., referral soon after birth), and then manifest developmental delays. The updated information may not be present for several months (up to a year) after the delay has been identified. Other children enter Early Start with one or more developmental delays and also have risk factors identified to facilitate provision of appropriate secondary and tertiary prevention.

In 2002, California conducted an analysis following a 1998 cohort to identify what portion of regional center Early Start consumers become eligible for California's services based on diagnosed developmental disability by school age. Although these analyses did not factor in deaths or differences by age and/or ethnicity, they provide the best estimate of "solely at-risk" (8 percent). In 2006, California replicated the 2002 analyses to determine whether the proportions had changed with time; these analyses reaffirmed the 8 percent estimator for at risk only.

Ethnicity is estimated for 5,046 children (14.69 percent of total) in accordance with instructions provided, although this method is known to overestimate those then classed as Hispanic vs. other ethnic groups. The estimated ethnicity was 1,211 *Age 0* (19.04 percent), 1,688 *Age 1* (14.78 percent) and 2,147 *Age 2* (12.96 percent). These same percentages apply to estimated ethnicity for the *At-Risk* Infants and Toddlers.

There was a decrease in the number of American Indian/Alaska Native children served. The change was commensurate with California's general population race/ethnicity changes.

Colorado

There was an increase in the number of Hispanic children served ages 0-2. The change was attributed to the state making efforts have been made to increase training on data collection to local data managers which has resulted in much more accurate and complete data.

Connecticut

There was a decrease in the number of American Indian/Alaska Native children served. The entire birth data for American Indian/Alaska Native in CT is approximately 164, 3% of those should be about 15. We cannot explain for certain why the number dropped from 13 to 3 and will explore the issue within the discussion in our APR.

Delaware

Race/Ethnicity was estimated for 24 children. Of these children, 1 was added to the Asian or Pacific Islander category, 6 were added to the Black (Not Hispanic) category, 3 were added to the Hispanic category, and 14 were added to the White (Not Hispanic) category

Hawaii

There was an increase in the number of American Indian/Alaska Native children served. This population was small numerically at 12, but because of the already small number of children in this ethnicity category from last year, 13, the percentage calculated was quite high, 92.31%. This change in population is most likely the result of military families transferred to Hawaii.

There was an increase in the number of Black (Not Hispanic) and Hispanic children served. These changes are most likely the result of military families transferred to Hawaii.

There was an increase in the *At-Risk* number of children served. The Healthy Start Home visiting program is responsible for serving the *at risk* population in Hawaii. They have seen an increase in the number of children served because of the implementation of a new, more intensive service delivery component, Enhanced Healthy Start. These services are for those families needing more intensive support because of involvement with Child Welfare Services and are consistent with IDEA 2004 and CAPTA regulations.

Idaho

There was a decrease in the number of Hispanic children served ages 0-2. The decrease is based on two factors. The state is a predominately agricultural state which is heavily dependent on a Hispanic subpopulation as a principle source for field/shed labor. This labor force is by necessity a highly transient nonresident subpopulation which earns it's living by "following the crops" around the country (hence the term "migrant" labor). It is also attributed to the fact that the year round Hispanic residents (non-migrant, predominately Mexican) frequently travel to Mexico for extended periods of time during the months of December, January, and February to visit friends and family during the cold winter months. It is impossible to predict or anticipate numbers that do so.

Illinois

There were 189 students with missing race data. The state allocated the distribution as follows:

▪ 2006	▪ Total	▪ Under 1	▪ 1 to 2	▪ 2 to 3
▪ White	▪ 105	▪ 18	▪ 31	▪ 56
▪ Black/AA	▪ 32	▪ 8	▪ 10	▪ 14
▪ Asian/PI	▪ 5	▪ 1	▪ 2	▪ 2
▪ Hispanic	▪ 46	▪ 9	▪ 14	▪ 24
▪ Total	▪ 189	▪ 36	▪ 56	▪ 97

There was a decrease in the number of American Indian/Alaska Native children served *ages 0-2*. The number of American Indians/Alaska Native children in the state is extremely small. The number of children represented just 0.26% of all cases but, that meant they were over represented compared to the population as a whole. For the second year in a row we found that this caseload is concentrated in on the north side of Chicago and the majority is also coded as Hispanic. This may be accurate but, after we questioned the service coordination agency for the area last year they looked into it and the numbers fell.

There was an increase in the number of Hispanic children served *ages 0-2*. The number of children coded as Hispanic has continued to grow in the state and the program has continued to try to reach out to them. It is unclear how much of the increase can be attributed to population growth and how much to outreach.

Indiana

There was a decrease in the number of *at-risk* children served. The drop reflects a change in the state's policy, to remove the at-risk category. The 234 reported represents the number of children left to have their IFSPs reviewed and then be moved to another eligibility category.

There was a decrease in the number of White children served ages 0-2. The state cannot provide a specific explanation for the change, but will monitor these children to try and identify any potential changes or trends.

There was an increase in the number of Asian/Pacific Islander children served ages 0-2. The change was attributed to the state experiencing a growth in the number of infants and a child adopted from overseas. While the current State census data has not shown significant changes, it is anticipated that changes to the State's demographics will appear over time.

Iowa

There was an increase in the total number of children served; and the number of American Indian/Alaska Native, Black, Hispanic, and White children served ages 0-2. These changes are a result of the improved child find actions and increase in the number of service coordinators.

Kansas

There was an increase in the number of Hispanic children served ages 0-2. The increase was attributed to the hiring of Spanish speaking staff in some networks with their primary responsibility being child find. The Hispanic population has also doubled at one armed services location due to relocation of a very large infantry division.

Kentucky

Kentucky's report by ethnicity includes 295 children for whom ethnicity was not known and is estimated based on the known ethnicity of the remaining 3491 children. Based on the known distribution, 2 children are estimated to be American Indian/Alaska Native, 4 Asian or Pacific Islander, 30 Black/African American, 13 Hispanic/Latino, and 246 White/Caucasian.

There are 9 children for whom gender was not known and was estimated based on known distribution, resulting in 6 estimated to be male and 3 estimated to be female.

A recent study conducted by the Louisville Metro Office for International Affairs (OIA) suggested that the Hispanic population in that area was growing faster than the national rate. Further, the study showed that Louisville's foreign-born population grew by 93% and the number of "English as a Second Language" students grew by 122%. Spanish was the top "Limited English Proficiency" language spoken; about 40% of all LEP immigrants spoke Spanish. The POE in this district also focused additional attention on the Hispanic population by hiring Hispanic Initial Service Coordinators and increasing child find activities in this area.

The Louisville/Jefferson County area is the most highly populated area in our state so the increase in this area would likely account for a significant portion of the overall increase. Additionally, the influx of the Hispanic community represented in the Louisville/Jefferson County area is representative of what is happening throughout our state. As such, we have a newly updated

Spanish Language version of our basic services and our Points of Entry staff has been utilizing them frequently to target the Hispanic population.

With regard to the increase in services to the Black community, the Newborn Screening Registry in our state indicates that the birth rate among Blacks has increased somewhat from 2004 to 2005, responding to a significant drop from 2003. Based on preliminary figures, it appears that the birth trend in the Black community has continued its rise into 2006.

All of our Points of Entry were instructed to make every effort to increase child find activities, however, they were not instructed to target the Black community. As such, we assert that the slight increase in Black births coupled with overall increases in child find is the likely reason for the difference in the percentages.

Louisiana

In 2005, a broad eligibility criterion for developmental delay was in place. In 2006, a more rigorous criterion was implemented resulting in a decrease in the total number of children served in the state. This decrease is reflected in the subsequent Child Count tables for ethnicity and gender.

Maryland

There was an increase in the number of Hispanic children served. The increase was due to a combination of changing demographics and sustained efforts to target outreach to underserved and special populations. Five jurisdictions reported serving five or more Hispanic children in 2006 and the increases in those jurisdictions accounted for 85% of the overall increase of 59 Hispanic children.

There was an increase in the number of Asian/Pacific Islander children served. The increase was attributed to a combination of changing demographics and sustained efforts to target outreach to underserved and special populations. Over 65% (54) of the increased number of Asian children served were reported by Montgomery County, which serves the largest number of Part C eligible children in the State and may have the highest percentages of Asian children in the State population at this time. Three other jurisdictions reported increases of 10, 8, and 5, and these increases are consistent with percentages in the overall population.

Massachusetts

The increase in the number of American Indian/Alaskan and Black children is due to program efforts in reporting data more accurately. EI program staffs are completing questions, with fewer missing and unknown data than in the past, with a 19.2% increase in completed race information on children served occurring between 2005 and 2006.

Michigan

The state had 133 children with a multi-ethnic race/ethnic categorization. Those children were spread across the five reportable ethnic categories according to the WESTAT criteria: 1 to Native American; 2 to Asian; 19 to Black; 8 to Hispanic; and 103 to White.

Minnesota

There was an increase in the *total number of children* served ages 0-2. The state has put significant resources and emphasis on identifying and serving young children, particularly under age 1, in the reporting period. As part of MN's State Improvement Grant (SIG), they have contracted with PACER who developed and disseminated outreach materials that are targeted for specific racial/cultural groups – Black, American Indian, Hispanic, Somali, Hmong and Russian.

There was an increase in the number of American Indian/Alaska Native children served ages 0-2. The state has put significant resources and emphasis on identifying and serving young children, particularly under age 1, in the reporting period. Targeted outreach to American Indian communities and service providers has resulted in a greater number of children served. As part of MN's State Improvement Grant (SIG), they have contracted with PACER who developed and disseminated outreach materials that are targeted for specific racial/cultural groups – Black, American Indian, Hispanic, Somali, Hmong and Russian.

There was an increase in the number of Black children served ages 0-2. The state has put significant resources and emphasis on identifying and serving young children, particularly under age 1, in the reporting period. Targeted outreach to Black and African American communities, including recent immigrants, and service providers has resulted in a greater number of children served. As part of MN's State Improvement Grant (SIG), they have contracted with PACER who developed and disseminated outreach materials that are targeted for specific racial/cultural groups – Black, American Indian, Hispanic, Somali, Hmong and Russian.

There was an increase in the number of Hispanic children served ages 0-2. The state has put significant resources and emphasis on identifying and serving young children, particularly under age 1, in the reporting period. Targeted outreach to Hispanic communities, including recent immigrants, and service providers has resulted in a greater number of children served. As part of MN's State Improvement Grant (SIG), they have contracted with PACER who developed and disseminated outreach materials that are targeted for specific racial/cultural groups – Black, American Indian, Hispanic, Somali, Hmong and Russian.

Missouri

The increase in the number of Hispanic children was related to the growing Hispanic population in Missouri.

Nebraska

There was an increase in the number of Hispanic children served. The increase was due to the state currently experiencing an influx of Hispanic immigrants in the state.

Nevada

Nevada Birth to Three Population Estimates

American Indian or Alaska Native	1,331	1.2%
Asian or Pacific Islander	8,014	7.0%
Black (Not Hispanic)	9,069	8.0%
Hispanic	43,358	38.1%
White (Not Hispanic)	51,933	45.7%
Total	113,705	

Data Source: Nevada State Demographer.

There was an increase in the number of Asian/Pacific Islander children served ages 0-2. In comparing Nevada's Birth to Three Population percentages to the number of children with an active IFSP on December 1, 2006, Nevada is under serving the Asian/Pacific Islander population. The Nevada State Demographer's statistics indicate that Nevada Early Intervention distribution of race/ethnicity should be approximately 7.0% of the Asian/Pacific Islander Population and on December 1, 2006 Nevada was only serving 6.0%, an increase is a move in the right direction.

There was a decrease in the number of Black children served ages 0-2. The state is aware of this decrease, but the numbers are in line with where they should be for the Black children served in Nevada. In comparing Nevada's Birth to Three Population percentages to the number of children with an active IFSP on December 1, 2006, Nevada is right in line with the Black population. The Nevada State Demographer's statistics indicate that Nevada Early Intervention distribution of race/ethnicity should be approximately 8.0% of the Black (Not Hispanic) Population and on December 1, 2006 Nevada was serving 8.0%.

New Hampshire

There was an increase in the total number of children, Hispanic children, and White children served ages 0-2. These changes are due to the state experiencing significant growth (25%) of eligible children in their Family Centered Early Supports and Services across all of our programs.

New Jersey

The increase in the number of Hispanic infants and toddlers served was due to changing demographics. There were an increased number of infants and toddlers served statewide and sustained efforts to target public awareness activities to underserved populations.

New Mexico

There was a decrease in the number of American Indian/Alaska Native children served ages 0-2. The state does not know why there was a decrease in the number of Native American children served in this age group. The overall number of Native American children served has not decreased, but has remained consistent over time.

New York

There was an increase in the number of Black children served ages 0-2. There was a decrease in the number of White children served ages 0-2. These changes were a result of the overall decline in the number of EI children aged 0-2. This decline is due to the state's new transition timeline requirements and also due to the state electing to change the previous count date of December 1 to October 1, in order to gain additional time needed to receive municipality data, produce the required tables, and obtain necessary internal approvals for the February data submissions to OSEP/Westat. Since a large portion (between 50 and 65%) of EI children is white, most of this decline was in the "White" race category.

These changes are also due to the improvement in New York City's methodology for determining race. The distribution by race/ethnicity is improving as New York City incorporates the use of mother's race as reported in birth certificate data, as proxy for the child's race/ethnicity. As a result the number of statewide children with unknown race declined from 10,348 in 2005 to 8,416 in 2006. A more refined methodology using more accurate ratios to distribute/allocate children in the unknown race/ethnicity categories was used, resulting in a shift to the Black race category from the White race category.

North Carolina

The eligibility criteria for the North Carolina's Part C program, as approved by OSEP, changed on July 1, 2006. Previously a broad eligibility definition had been in place, which included the provision of services to at-risk infant and toddlers. Under the new eligibility definition, at-risk children referred after July 1, 2006 will not be served. Section C reflects those at-risk children referred prior to July 1, 2006, who continued to receive services until they exit the program.

There was a decrease in the number of Asian/Pacific Islander children served ages 0-2. The decrease in the number of Asian/Pacific Islander children receiving services is most likely

explained by random fluctuations associated with categories with small numbers. Additionally, the reorganization of the North Carolina's Part C program in 2004 decreased the number of agencies responsible for completing the Infant Toddler Data form, which may have increased the consistency in data reporting.

There was an increase in the number of Hispanic children served ages 0-2. The Hispanic population in North Carolina is growing quite rapidly. According to the US Census estimates, from 2000 to 2005 the population of Hispanic children 0 to 2 years old increased by 59%. The increase of the number of Hispanic children receiving services is a reflection of this trend. Additionally, the reorganization of the North Carolina's Part C program in 2004 decreased the number of agencies responsible for completing the Infant Toddler Data form, which may have increased the consistency in data reporting.

There was a decrease in the number of *at-risk* children served. The decrease was attributed to the revision of North Carolina's eligibility definition for Part C. North Carolina previously had a broad eligibility definition which included the provision of services to children who were at-risk and to children with atypical development. Under the new definition, these two eligibility categories are no longer present in the eligibility definition for NC. This policy change has contributed to the changes in the numbers of children served.

Ohio

There were 863 (or 7.15%) of children receiving Part C services on December 1, 2006 for whom 'Race' was "Unknown." The distribution of these children by age category was as follows: birth to 1 = 141, 1 to 2 = 320, and 2 to 3 = 402.

There were 3 (or < 0.1%) of children receiving Part C services on December 1, 2006 for whom 'Gender' was "Unknown."

There was an increase in the number of American Indian/Alaska Native children served. The state has recently completed a transition to a new Data System which is utilized for all data collection purposes related to the Child Count Table. The new Data System has numerous improvements, many related to the data reported on the Child Count Table. The new Data System does not allow for children to be identified as "Unknown" in terms of race. Previously it would proportionally distribute children with "Unknown" races. Using this prescribed method of distribution, in the past the American Indian/Alaska Native race grouping would receive minimal increases from the "Unknown" race children due to the small proportion of children with known races served in this race grouping.

It is believed that the more accurate data being collected has resulted in the state being able to more accurately identify the population of children/families we serve, and the new Data System has allowed them to gather demographics without the need to place children in 'proportionally representative' categories.

Oregon

There was an increase in the number of American Indian/Alaska Native children served. The increase came from two counties. The data coordinator for one county reported the following: "For the Dec 2005 SECC which covered the 2004-05 time periods, we had issues with the transfer of data because we were not using EC Data (a data reporting system) & there probably were 0 Native Americans. Also, there had been a problem with parents saying the child was white & not informing us that the child was actually full or part Native American. Since Dec 2005 our staff has been trained to do a better job at soliciting the ethnicity." The increase in the other

county could be due to the hiring of a new EI coordinator out at one of Reservations within this county, who has made improvements to the program, including, increasing child find activities. In addition, this service area hired a new person to coordinate and enter all data for this region. This individual is very detail oriented. Finally, the increase could be due to the overall increase of ethnic diversity in Oregon. According to US Census estimates, the majority (single race) population in Oregon (white) dropped from 89.2% in 2000 to 87.8% in 2003.

There was an increase in the number of Asian/Pacific Islander children served. : The most significant increase in children identified as Asian/Pacific Islander was reported by one large county. They reported 38 children as Asian/Pacific Islander, and only 21 in 2005-2006. This county is one of the fastest growing counties in Oregon according to the 2006 Oregon Population Report. It had the highest increase in population within the state between 2000 and 2006. They also had the highest increase in children between the ages of birth – 17. Program Personnel also indicate that there is a large increase in the number of out of the country adoptions, with Asian/Pacific Islanders representing the largest numbers. It is plausible that this may have an impact on identification of special needs because some developmental milestones can be delayed as a result of the transition from one home/culture to another. The two other large metropolitan areas also saw small increases in the numbers of Asian/Pacific Islanders, they had a combined increase of 12 children over 05-06. Finally, the increase could be due to the overall increase of ethnic diversity in Oregon. According to US Census estimates, the majority (single race) population in Oregon (white) dropped from 89.2% in 2000 to 87.8% in 2003.

Pennsylvania

There was an increase in the number of Hispanic children served ages 0-2. The change was attributed to a few Pennsylvania communities where there has been an increase in the Hispanic population. The early intervention programs in these communities are aware of the increase in the population and have promoted good child find activities that have increased awareness of early intervention to this population group.

Rhode Island

In the Rhode Island statewide database system, 10.03% (150 infants/toddlers) of the overall 12/1/06 count fell outside of the noted categories for table 1. The percentages of the categories in table 1 were determined and the 10.03% (150 infants/toddlers) were proportionally distributed among the categories in table 1. The students were distributed as follows: American Indian or Alaska Native .40%, Asian or Pacific Islander 2.47%, Black (Not Hispanic) 5.01%, Hispanic 18.98%, White (Not Hispanic) 73.13%.

Tennessee

There was an increase in the number of Hispanic children served. The change was attributed to a marked increase in overall population growth for Hispanic families. Upon review of 618 Child County data by the nine Tennessee Early Intervention System (TEIS) Districts, the data manager determined the significant change for an increase in Hispanic children served originated from two Districts, East Tennessee and Memphis Delta. East Tennessee District is comprised of 16 counties. Changes in numbers of Hispanic children served occurred in eight of the 16 counties with no change meeting significant change criteria. Memphis Delta is comprised of four counties with changes in numbers of Hispanic children served occurring in one of the four counties. The explanation for an increase in Hispanic children served in the Memphis Delta District is due to a collaborative increase in public awareness and child find activities within the District targeted towards finding children in this population.

Texas

The increase in the number of children served who is Asian/Pacific Islander appears to be due to increases in the number of children served in some urban areas of the state, particularly communities in and around Dallas, Austin and Houston. This is a result of population growth in those areas and outreach efforts.

Utah

Forty infants and toddlers on this count had ethnicity of 'other' entered into Baby and Toddler On-line Tracking System (BTOTS). These are predominantly of mixed race/ethnicity. They were randomly distributed among the race/ethnic groups declared by the family (BTOTS includes detail on 'other' race/ethnic group). This method resulted in a distribution of the 40 infants and toddlers to the following race/ethnicity categories: American Indian or Alaska Native (3); Asian/Pacific Islander (3); Black (5); Hispanic (12); White, not Hispanic (17). One infant with 'unknown' race/ethnicity in BTOTS was listed here as White.

There was an increase in the number of Hispanic children served ages 0-2. The increase reflects the demographics of the Utah population. Hispanics are the predominant ethnic minority in Utah, and the Hispanic population is rapidly increasing. Population estimates by race/ethnicity are available for 2004 and 2005, but not for 2006 (<http://ibis/health.utah.gov>). State population estimates show that Hispanics comprised 14.8% of the Utah population under age 5 in 2005. The number of Hispanic children under age 5 in Utah's population increased by 2% from 2004-2005. The Utah Part C Child Count numbers show an increase in enrollment of Hispanic infants and toddlers from 13.8% ages 0-2 enrolled on December 1, 2005 (371 of 2682 enrolled) to 15.8% Hispanic on December 1, 2006 (436 of 2767). This increase is consistent with trends in population data, and demonstrates effective Child Find to all segments of Utah's population.

Washington

The following data should be included in the Computed Total on Page 1 for Washington State: Other: 0, Multi Racial: 380, Does Not Wish to Provide: 224 Sub-total: 604

The increase in the number of Black infants and toddlers, and their families, served is due to increased Child Find activities.

West Virginia

There were 113 children listed as "Multi-Racial." Using 96% White, 3% Black, and 1% Hispanic, these children were categorized as 109 White, 3 Black, and 1 Hispanic.

For the At-Risk Section, 18 children were listed as "Multi-Racial." Using 96% White, 3% Black, and 1% Hispanic, 17 children were categorized as white and 1 as black.

There was an increase in the number of Black children served ages 0-2. The change was due to the fact that the minority population is very low as a percentage of the whole population.

There increase was an increase in the number of children determined to be *at-risk*. This change was mainly reported in the southern part of the state, where demographic risk factors are higher (poverty, educational level, maternal age, prenatal risk factors, maternal marital status, etc.).

Wisconsin

There was a decrease in the number of American Indian/Alaska Native children ages 0-2. The decrease could not be attributed to a single county or region. The state will monitor this over the next reporting period along with the Great Lakes Inter-Tribal Council who provides outreach to

Native American families and works with counties to ensure integration of Native American infants and toddlers into county birth to 3 programs.

There was a decrease in the number of Asian/Pacific Islander children ages 0-2. Previous Child Count and calendar year data indicated an increase in the number of children served who are Asian/Pacific Islander. An analysis of the Child Count data shows that the number of children served in 2006 who are Asian/Pacific Islander increased statewide, but decreased in the state's largest urban county. The state will monitor this area over the next reporting period to see if this is a one time change or a possible trend.

There was a decrease in the number of Black children ages 0-2. Previous years indicated an increase in the number of children served who are Black. Previous Child Count and calendar year data shows that the number of children served in 2006 who are Black increased statewide, but decreased in the state's largest urban county. The state will monitor this area over the next reporting period to see if this is a one time change or a possible trend.

Wyoming

There was an increase in the total number of children served. This increase is largely focused in communities experiencing growth due to energy industry initiatives.

The increase in White children served is a reflection of the statewide increase, both approaching 12 percent.

The state has demonstrated modest population increases over the past several years. Several communities located in regions of extensive energy industry development have shown higher population increases than the average across the state. These communities also have well established Child Development Centers and these Center's are accommodating a greater number of children in these areas.

Over the past several years, the State agency for Part C programs has provided funding for improved technology that has led to more accurate reporting. At the same time, the audit processes have improved and the State Agency has increased its training programs for Child Development staff. This has also led to improved accuracy and timeliness in reports to the State.

2006-07 Part C Non-Child Count Data

IDEA Part C Settings

Alabama

The *other Settings* category includes hospitals, residential facilities, programs designed for children with developmental disabilities, and service provider locations.

There was an increase in the number of services in *other Settings*. This increase may be partially due to a change in data collection methods. In the past, Alabama has reported on seven Settings as required by OSEP. Currently, those Settings have been combined to report on only three setting categories. Therefore, data collection in these 2005 setting categories: *service provider location, programs for children with developmental disabilities, hospitals, and residential facilities* are now being reported under the *other Settings* category as currently required.

Also, as described in the recently submitted Alabama Part C Annual Performance Report, while Alabama did not experience the degree of devastation that other southern states experienced

during the 2005 hurricane season, there were additional challenges that impacted where services were delivered in our state and the ability of providers to deliver services in natural environments.

American Samoa

The decrease in the number of services provided in all Settings was due to a decrease in the total number of children served. In April 2006, American Samoa provided staff training on a new Assessment tool, *Assessment, Evaluation and Programming System (AEPS)*. One of the many improvements as a result of this training was the overall ability of staff to determine needed services.

The decrease in the number of services provided in the *home* setting was due to a decrease in the total number of children served. The decrease in the Child Count and the decrease in services provided in the home both equal 17.

There was an increase in the number of services provided in *other* Settings. The increase was attributed to the change in Settings categories. In 2005, the breakdown for Settings was 52 services provided in the *home* and 35 services provided in a *service provider location* with a total of 87. In 2006 the breakdown for Settings was 35 services provided in the *home*, 7 services provided in a *community-based* setting and 28 services provided in the *other* Settings category with a total of 70. The *other* Settings category in 2006 is comparable to the *service provider location* in the 2005 report. Other Settings in 2006 consist of the developmental services provided at the service provider location. Due to a continuing focus on increasing the delivery of services in natural environments American Samoa has discontinued the delivery of developmental services in the service provider location and services have been moved to the home or community.

The *other* Settings category consists of developmental services provided at the service provider location. Due to a continuing focus on increasing the delivery of services in natural environments American Samoa has discontinued the delivery of developmental services in the service provider location and services have been moved to the *home* or *community*.

Arizona

There was an increase in the number of children served in total Settings. This is attributed to the significant increase in the state's Child Count resulting from the review of the data preparation process.

There was an increase in the number of children served in the *home*. The increase was due to the continued emphasis on the state's policy to provide services in the natural environment.

Arkansas

There was an increase in the number of services provided in total Settings. The increase is consistent with an increase in the number of children served.

The other Settings category includes service providers and centers for children w/developmental disabilities.

California

There was a decrease in the number of services provided in the *home*. The decrease was attributed to the changes in instructions, which included guidance for tie breaking between locations to count the child in the natural environment in cases of two equal Settings (previously half of such groups were counted in each setting).

The *other Settings* category include residential facility, hospital inpatient, service provider location, programs designed for children with developmental disabilities or delays (including reverse mainstream programs) and other (e.g., homeless).

Ethnicity is estimated for 5,046 children (14.69 percent of total) in accordance with instructions provided. The estimated ethnicity was 1,211 *Age 0* (19.04 percent), 1,688 *Age 1* (14.78 percent) and 2,147 *Age 2* (12.96 percent). Similarly, ethnicity was estimated for 4,258 of *home* (14.72 percent of all served at *home*), 111 of *community-based setting* (15.40 percent of all served in a *community-based setting*) and 677 served in some *other setting* (14.42 percent of all served in a setting not at *home* or *community-based*).

Colorado

The state had 42 children receiving services in Settings other than *home*. Unfortunately, the state also had 346 children reported with an unknown location status and these were recorded in the other category along with the 42 children above. They are implementing a new data system which should be up and running within the next two months which will resolve the issue of not identifying a location, so this should not happen again.

Connecticut

The other Settings category includes hospitals, residential Settings, Special Program offices, and mother's office.

Delaware

The *other Settings* category includes programs for children with developmental delay or disabilities, Hospitals (Inpatient), residential facilities, service provider locations, and other setting (coded in Delaware as a Prescribed Pediatric Extended Care facility for medically fragile children).

Florida

Florida collects two race categories that are not matched in OSEP's race categories. OTHER is defined as a parent-defined race identification that is not among the choices presented. UNKNOWN is defined as an unknown race. This value is allowed in data entry so that the burden of data collection is not enforced by stoppage of all data entry for the child. For 2006, 2249 children (19.6%) were identified as either OTHER or UNKNOWN race. These children were proportioned into OSEP race categories per OSEP instructions. Of the 2249, 370 were between 0-1 (12.2 % of total other/unknown), 649 between 1 and 2 (30.6 % of total other/unknown), and 1230 between 2-3 (57.2% of total other/unknown), In contrast, the percentages per age category omitting all other/unknown kids was 11.1% for age 0-1, 31.0% for 1-2, and 57.9% for 2-3).

For age category of 0-1, 370 children were of other/unknown race categories (*Home*=91 kids, 24.6%; *Community*=5 kids, 1.4%, *Other* = 274 kids, 57.1%).

For age category of 0-1, 370 children were of known race categories (*Home*=426 kids, 41.5%; *Community*=2 kids, 0.2%, *Other* = 598 kids, 58.3%).

Combined, age category 0-1 had 1396 children (*Home*=517 kids, 37.0%; *Community*=26 kids, 1.9%, *Other* = 853 kids, 61.1%).

For age category of 1-2, 649 children were of other/unknown race categories (*Home*=261 kids, 40.2%; *Community*=24 kids, 3.7%, *Other* = 364 kids, 56.1%).

For age category of 1-2, 2859 children were of known race categories (*Home*=1224 kids, 42.8%; *Community*=145 kids, 5.1%, *Other* = 1490 kids, 52.1%).

Combined, age category 1-2 had 3508 children (*Home*=1485 kids, 42.3%; *Community*=169 kids, 4.8%, *Other* = 1854 kids, 52.9%).

For age category of 2-3, 1230 children were of other/unknown race categories (*Home*=490 kids, 39.8%; *Community*=93 kids, 7.6%, *Other* = 647 kids, 52.6%).

For age category of 2-3, 1230 children were of known race categories (*Home*=2395 kids, 44.9%; *Community*=461 kids, 8.6%, *Other* = 2478 kids, 46.5%).

Combined, age category 2-3 had 6564 children (*Home*=2885 kids, 44.0%; *Community*=554 kids, 8.4%, *Other* = 3125 kids, 47.6%).

Hawaii

There was an increase in the number of children receiving services in the *home* environment. The change was due to the increased compliance of Early Intervention Programs Statewide to serve children in their natural environments which includes the *home* and *community-based* Settings.

Illinois

There were 189 students with missing race data. The state allocated the distribution as follows:

2006	Total	Under 1	1 to 2	2 to 3
White	105	18	31	56
Black/AA	32	8	10	14
Asian/PI	5	1	2	2
Hispanic	46	9	14	24
Total	189	36	56	97

The *other Settings* category included restaurants, churches, parks, and community centers.

Iowa

There was an increase in the total number of children served in the *home* and *community-based Settings*. These changes are attributed to the over increase in the number of children served. They are also a result of the improved child find actions and increase in the number of service coordinators.

Kansas

The *other Settings* category includes program for developmental delay, service provider location, early education care, and early intervention play group

Kentucky

In previous years, Kentucky determined setting only by paid claims and could only tell whether services were delivered in the home/community or in the office/center locations. Community locations could not be separated from home locations. In October, 2006 Kentucky began collecting more detailed information at every six-month IFSP review. Service coordinators were asked to report where the majority of services for the plan period were provided.

Since this data collection only began in October, 2006, not all children served on the December 1 Child Count had reported Settings data. These have been estimated using the known distribution of those for whom data had already been provided. This amounted to a sizeable number: 1,476 total children, 260 birth to one, 485 one to two years, and 731 two to three years. These were estimated as 1275 in the *home setting*, 191 in the *community setting*, and 10 in *other Settings*. Ethnicity also had some unknown data. These were estimated using the known racial distributions of each Settings category. An additional 175 children, 143 in the *home setting*, 32 in the *community setting*, and none in *other Settings* were estimated on ethnicity in this manner. Because of this estimation, ethnicity counts do slightly differ from those reported in the Table 1 Child Count. This is due to the interaction of the estimation of unknown setting and unknown ethnicity.

The *other Settings* category includes EI center/class for children with disabilities, hospital/clinic, or residential facility.

Louisiana

In 2006, there was an additional decrease in the number of children identified following a full year of the more rigorous criteria, but 99% of those children are served in natural environments.

Massachusetts

The *other Settings* category includes center individual services - services provided to children at an EI program and Child group services where all participants are EI enrolled clients.

The increase in the percentage of children receiving services in *other Settings* is due to a continued shift in service delivery in response to staff shortages. A shortage of occupational, physical, and speech therapists over the past few years has resulted in EI programs contracting out services to other organizations such as rehabilitative facilities which traditionally only provide office-based services. EI programs are also maximizing the availability of staff by developing group services provided at a center, in effect, replacing some of the home visits that would have occurred for these children.

Michigan

Due to the late announcement of new Setting codes, Michigan collected December 1, 2006 data using the old code structure. They used the following crosswalk: old *home* -> new *home*, old *classroom with typically developing children*, restaurants, and play groups -> new *community based*; old *service provider location, program for children with developmental delay* and *hospital* -> new *other*.

Minnesota

The *other Settings* category includes program designed for children with developmental delays, hospital, residential facility, service provider location, and any other setting not otherwise specifically defined.

Missouri

The *other Settings* category included children served in: programs for children with developmental delays, hospitals, residential facilities, and service provider locations.

Montana

The *other Settings* category includes Early Head Start; Hospital; DEAP office (Child and Family provider agency); ECI office (Child and Family provider agency); CDC office (Child and Family provider agency); speech clinics; and PT clinics

There was an increase in the number of services provided in *total Settings* and the *home*. The state has put significant resources and emphasis on identifying and serving young children, age birth to three. Which has resulted in an 11% increase in the 2006 Child Count, this is also reflected in the increase of *total Settings*.

Nebraska

There was an increase in the number of children served in the *home*. This change is partly due to the increase in our birth to 2 populations.

Nevada

The *other Settings* category included programs designed for children with developmental delays/disabilities, residential facility and service provider location.

New Hampshire

There was an increase in the number of services provided in *total Settings* and the *home*. These changes are due to the state experiencing significant growth (25%) of eligible children in their Family Centered Early Supports and Services across all of our programs.

New Mexico

The other Settings category includes program designed for children with developmental delay, residential facility and service provider location.

New York

The *other Settings* category include groups with <50% typically developing children, hospital (inpatient), provider location, and residential.

North Carolina

The *other Settings* include Center Based Early Intervention, Children's Developmental Services Agency, Inpatient Hospital, outpatient service facilities, and residential facilities.

Ohio

The *other Settings* category includes clinics, early intervention centers, Hospitals (Inpatient and Outpatient), and residential Facilities.

There were also 91 (or 0.78%) of the children receiving Part C services on December 1, 2006 for whom the *other setting* was not specified. In addition, there were 2 (or <0.1%) children receiving Part C services on December 1, 2006 for whom the primary service location/setting was unknown.

The 863 (or 7.37%) of children receiving Part C services on December 1, 2006 for whom 'Race' was "Unknown" were distributed across Settings as follows: *Community Based* = 21, *Home* = 719, *Other* = 116.

Oregon

The *other Settings* category includes early Intervention program designed for children with developmental delays or disabilities (361); Hospital (inpatient) (1); service provider location (19); other setting (2) – One county in the state erroneously reported two (2) children in this category. When the state followed-up with the program, program staff indicated that one child was in the *Home*, and one child was in a *Community Based Setting*.

Pennsylvania

The *other Settings* category includes approved private schools, center based EI programs, hospital, outpatient facility and residential setting.

Puerto Rico

There was an increase in the number of services provided in the *home*. The change was attributed to an increase in the total amount of infants and toddlers served. OSEP requires that all children are served in natural environments, except those children where the multidisciplinary team understands that it is not appropriate. In addition, Public Awareness materials specify that early intervention services are provided in natural environments.

The *other Settings* category includes children receiving services in programs for children with developmental delay or disability, hospitals, residential facilities or service provider locations were categorized as other Settings. In the past, these services were detached individually.

Rhode Island

In the Rhode Island statewide database system, 10.03% (150 infants/toddlers) of the overall 12/1/06 count fell outside of the noted categories for table 1. The percentages of the categories in table 1 were determined and the 10.03% (150 infants/toddlers) were proportionally distributed among the categories in table 1. The students were distributed as follows: American Indian or Alaska Native .40%, Asian or Pacific Islander 2.47%, Black (Not Hispanic) 5.01%, Hispanic 18.98%, White (Not Hispanic) 73.13%.

The *other Settings* category includes, but is not limited to, services provided in a hospital, residential facility, clinic, and Early Intervention center/class for children with disabilities.

Tennessee

The *other Settings* category includes programs for designed for children with developmental delay or disabilities, Hospitals, residential facilities, and service provider locations.

Texas

Texas continued to use the Settings categories from 2005, but cross walked those to the current Settings categories. Program for children with delays, hospital, residential facility, service provider location were used to report the new *other setting*. Program for typically developing children cross walked to the *community-based* setting. Through a validation process in which more detail was obtained for the previous *other setting*, instances were put in either the *community-based* or new *other setting* as appropriate.

Utah

The *other Settings* category includes programs for children with developmental delays, hospitals, service provider locations, and Department of Child and Family Services office.

Virginia

The *other Settings* category includes hospitals, residential facilities and service provider locations.

Washington

The increase in the number of infants and toddlers, and their families, served in the home and community-based Settings is due to increased natural environments activities. (See APR for details of activities.)

The decrease in the number of infants and toddlers, and their families, served in the other Settings is due to increased natural environments activities. The change in the definition of other Settings for 2005-2006 also attributed to the changes.

The increase in the number of Black infants and toddlers, and their families, served is due to increased Child Find activities. (See APR for details of activities.)

West Virginia

113 children were listed as "Multi-Racial." Using 96% White, 3% Black, and 1% Hispanic, these children were categorized as 109 White, 3 Black, and 1 Hispanic.

The *other Settings* category includes service provider locations and a Women's Correctional Facility in Greenbrier County, where their mothers are incarcerated, but are allowed to keep their young infants with them.

2005-06 Part C Non-Child Count Data

IDEA Part C Settings

Alabama

There were increases in the number of services provided in *programs for children with development delays, programs for typically developing children and service provider locations*. These changes were due to two factors. The first factor was that the state's Child Count increased by 215 children in the last year. The second factor was the impact of last year's hurricane season. Families' natural environments were disrupted (as well as service providers). It was important to continue to provide services, thus the increase in *service provider location and programs for children with developmental delay*.

Alaska

Twenty children of unknown ethnicity were served. They were distributed proportionally into existing ethnic groups as follows: 11 White, 6 Alaska native, 1 Asian, 1 Black, 1 Hispanic.

American Samoa

There was an increase in the number of services provided in *total Settings* and the *home*. The significant increase in the Settings data for American Samoa is due to continuing efforts over the past 2 years to rebuild the entire early intervention program. On-going improvements continue in all areas and have improved their Child Find abilities, referral and intake process, service coordination and service delivery. A particular focus area has been to increase the delivery of services in natural environments. In addition, they are continuing to refine a new database management system and data collection practices. All of these improvements combined have resulted in a significant increase in both the number of children served, number of services provided and services provided in natural environments.

Arkansas

There was an increase in the number of services provided in the *programs for developmental delay*. There was a decrease in the number of services provided in the *program for typical developing children*. These changes were due to the Part C Program Manager, Program Coordinator, training staff, data manager were provided technical assistance and training to clarify information regarding Settings. The providers, thereafter, re-looked at the composition of children within this group and made adjustments.

There was an increase in the number of services provided in *service provider locations*. This change was due to the increase of Early Intervention Providers who enrolled as new providers during the open enrollment period in 2006.

There was a decrease in the number of services provided in *other Settings*. The decrease was due to the Part C Service Coordinators correctly reporting the Settings of where services took place. Training and clarification was given to providers who needed it; as a result services were properly reported in the various Settings.

Arizona

There was a total of 182 unknown ethnicity data. Using the unknown ethnicity formula the state assigned the following: American Indian or Alaska Native total = 14: birth to 1 = 1; 1 to 2 = 4; 2 to 3 = 9. Asian or Pacific Islander total = 3: birth to 1 = 1; 1 to 2 = 0; 2 to 3 = 2. Black (not Hispanic) total = 7: birth to 1 = 0; 1 to 2 = 0; 2 to 3 = 7. Hispanic total = 68: birth to 1 = 0; 1 to 2 = 20; 2 to 3 = 48. White (not Hispanic) total = 90: birth to 1 = 16; 1 to 2 = 33; 2 to 3 = 41. Grand total = 182: Birth to 1 = 18; 1 to 2 = 57 and 2 to 3 = 107.

The *other Settings* category includes Parks, libraries and community centers.

The increase in children served primarily in *other Settings* reflects the state's continued emphasis on serving children and families in natural environments, where they live and play in their communities. The state defined other Settings as community-based Settings where children without disabilities typically are found.

The decline in children identified as served primarily in *programs for typical developing children* may reflect service coordinators' confusion over the distinction between community Settings and *program for typical developing children*. When service coordinators described (in an associated text filed) the *other setting* where services were provided, they sometimes identified child care centers, preschools, Early Head Start, or other program that could also have been considered as a *program for typical developing children*. The data report system looked at and counted the primary setting field, and did not look at or count the contents of the associated text field.

Arkansas

The *other Settings* category includes child health management services.

California

There was an increase in the number of services provided in *total Settings*. The changes in California's Child Count showed a caseload growth rate of 12.12 percent and thus the matching Settings counts showed comparable growth of 12.12 percent.

There was an increase in the number of services provided in *programs for developmental delay, hospital, and residential facilities*. There was a decrease in the number of services provided in *service provider locations*. These changes are attributable to California utilizing a different data source and methodology based on clarification of OSEP's expectations and identification of a data source with better face validity. The data used comes from Early Start Reports' primary location data element, which uses the data definitions and guidance as provided. The eight locations service coordinators choose from are 1) early intervention program; 2) family child care; 3) home; 4) hospital, inpatient; 5) outpatient service facility; 6) regular nursery/child care; 7) residential facility; and 8) other setting.

In CA, the focus on service delivery is in meeting the families' and children's needs. Thus, for only 19,842 (60.38%) of children is there a single location reported, including every OSEP category. The rest are reported with two or more equally primary locations of services; all categories except "other setting" are reported as one of two or one of three primary locations.

If there are three locations (e.g., program, child care and home) one-third of the total with the three locations are counted in each category. For four locations, one-fourth is counted in each category. Such flexibility in meeting families' and children's needs is consonant with programmatic intent, represents 'best practice' and is consistent with services in a natural environment as much as is appropriate. Thus it is not unusual for service providers, whether working out of a program or their own location, to flex the location of services based on changes in family schedules or other family or child needs (e.g., child's progress, parent work hours, siblings' services' schedules, family health) monthly, weekly, daily or even ad hoc so there is no single primary location of services.

The *other Settings* category includes the homeless and service location variables.

Ethnicity was estimated for: *Program designed for children with developmental delay or disabilities*; 976 *Program designed for typically developing children* 55; *Home* 3,173; *Hospital (inpatient)* 0; *Residential Facility* 16; *Service Provider Location* 395; *Other* 1

Connecticut

The *other Settings* category includes the Department of Children and Families office during supervised visits.

Connecticut estimated the race/ethnicity for 88 children who had an unknown race/ethnicity or multiple race/ethnicities.

There was an increase in the number of services provided in *programs for typical developing children*. The increase was due to data errors in 2004 from one community. These data errors have now been corrected. The state also attributed the change to being a data artifact since the denominator of 166 in 2004 is relatively small.

Despite the increase in services provided in *programs for typical developing children*, there seems to be increasingly difficult for families to find/afford child care because of the increasing demand and decreasing supply of sites and the decrease in the Child Care Assistance Program funding (federal cuts) for families.

Delaware

The *other Settings* category includes medically fragile children served in a Prescribed Pediatric Extended Care facility (PPEC).

There was a decrease in the number of children served in *programs for developmental delay* and *service provider location*. The state has made progress in increasing capacity in natural environments.

Florida

The *other Settings* category includes children that have no primary setting and public Settings. Children indicated as having "no setting" includes those who may be receiving only service coordination due to a variety of reasons: choosing to use their commercial insurance or Medicaid Freedom of Choice rights to pursue therapy services in a clinical setting rather than receive

services as identified by the IFSP team in a natural environment, or there are no immediate ongoing service needs identified, but the family prefers to remain open and receive service coordination/transition planning and/or developmental surveillance/ follow up at a future point in time.

EIP Location	OSEP Setting
1 - Home	3-Home
2 - DEI Clinic	n/a - not counted in OSEP
3 - Hospital(Inpatient)	4-Hospital-Inpatient
4 - School (Public School Site)	6-Service Provider Location
5 - Child Care Facility	2-Program designed for Typical Children
6 - Other Location	7-Other Setting (Must Specify)
7 - outpatient Clinic	6-Service Provider Location
8 - residential Facility	5-Residential Facility
9 - EI Classroom	1-Program Designed for DD Children
A - Community Agency	6-Service Provider Location
C - County Public health Unit	6-Service Provider Location
D - CMS Clinic	6-Service Provider Location
F - Family Day Care	2-Program designed for Typical Children
P-Public Place	7 Other Setting
N= No Setting	7 Other Setting

There was a decrease in number of services provided in *programs for developmental delay*. There was an increase in number of services provided in *programs for typical developing children* and the *home*. These changes were due to the implementation in July 2004 of a new service model which emphasized providing services in the natural environment. Service providers are now less likely to provide services in *programs for developmental delay*. In addition, the state has experienced an overall decrease in the number of children enrolled.

There was a decrease in number of services provided in *other Settings*. The decrease was a result of technical assistance to local programs that emphasized the importance of accurately recording the service setting. Many children whose service Settings were previously reported as *other setting* are more accurately reported in other more specific Settings categories such as *home* and *service provider location*. In addition, the state had a decrease in the number of children with no service setting identified, which according to Westat instructions are calculated in this category. This decrease is due to implementation of a data integrity query done quarterly.

Georgia

The *other Settings* category includes early intervention offices.

Hawaii

There was an increase in the number of children receiving services in a program for developmental delays. The overall number increase for children in this category was numerically small at 33 as has been the total number from year to year. The high percentage change in this area was mostly because of mathematics however, the slight increase was due to efforts to accommodate the needs of families where providing services in a natural environment was not appropriate.

There was an increase in the number of children receiving services in a *program for typically developing children*. There was a decrease in the number of children receiving services in *service provider locations*. These changes are due to a heightened emphasis by the Hawaii Early Intervention system toward providing services in a child's natural environment and moving away from center-based services.

Idaho

The *other Settings* category includes child protective services offices.

There was an increase in the number of services provided in *all Settings* and the *home setting*. Idaho is the third fastest growing state in the nation. This number is a reflection of increased Infant Toddler Program enrollment over and above enrollment of the previous year.

There was a decrease in the number of services provided in *programs for typically developing children*. There was an increase in the number of services provided in *service provider locations*. A number of factors contribute to this change. Despite concerted recruitment efforts, there are instances of significant provider shortages in certain Disciplines throughout the state. This condition, coupled with the fact that in many cases

Illinois

There was a decrease in the number of services provided in *programs for developmental delay and service provider locations*. There was an increase in the number of services provided in the *home*. These changes are attributed to the state making a concerted effort to reinforce state and federal rules regarding the delivery of services in natural Settings. This has included clarifying memos to both Service Coordinators and to providers as well as both incentives and penalties in its performance contracting system. These efforts have helped increase the percentage of children served predominately in natural Settings. At least some impact of these efforts can be seen across all ages and race/ethnicity groups.

There were 210 students with missing race data. The state allocated the distribution as follows:

▪ 2006	▪ Total	▪ Under 1	▪ 1 to 2	▪ 2 to 3
▪ White	▪ 117	▪ 16	▪ 36	▪ 65
▪ Black/AA	▪ 40	▪ 8	▪ 13	▪ 19
▪ Asian/PI	▪ 6	▪ 1	▪ 2	▪ 3
▪ AI/AN	▪ 1	▪ 0	▪ 0	▪ 0
▪ Hispanic	▪ 47	▪ 7	▪ 15	▪ 25

Indiana

The *other Settings* category includes Churches, Community Centers and restaurants.

There was a decrease in the number of children served in the *service provider location* category. There was an increase in the *other Settings* category. These changes were attributed to the state focusing some of their provider education efforts around services in natural environment, which led to providers exploring other location Settings for services.

Kansas

There was a decrease in the number of services provided in *programs for developmental delay* and in *programs for typical developing children*. These changes are attributed to two of the thirty-six networks. These networks recognized that they had reported the 2004 data in the incorrect categories and adjusted in the 2005 report.

Kentucky

The *other Settings* category includes Community Centers or other community locations (YMCA, Boys and Girls Clubs, libraries, parks, restaurants, etc.).

There was a decrease in the number of services provided in the *home* and *service provider locations*. These were due to a change in the way detailed information was collected between the two years. Until December, 2005 the state did not collect detailed information on Settings, but kept records on whether services were delivered in the home/community, or office/center. Beginning in December, 2005 service coordinators began to report whether the majority of services were provided in a variety of setting locations. Thus, the current years data is not collected nor reported as in years past for the state. In addition, since data collection only began in December, 2005 and only at the next six-month review, some of the children did not have the information reported because they were entering transition rather than a six-month review. That for whom setting was unknown has been estimated using the percentage distribution in each of the Settings for the known children.

Louisiana

In 2003, the Part C Program in Louisiana moved to a new lead agency and incorporated a renewed focus on *home* and *community-based* Settings for service delivery in natural environments. This focus is reflected by 2004 data showing 96% of children in *programs for typically developing children* or at *home*. In part of 2005, a more rigorous eligibility criteria was implemented resulting in fewer enrolled children, but with an increase to 98% of children served in Settings for *typically developing children* or at *home*.

Maryland

The *other Settings* category includes Libraries, Parks, Parent's Place of Employment, and other community Settings.

The increase in the number of children being served in *programs for typically developing children* is due to State and local efforts to increase the participation of eligible children in inclusive community-based Settings.

Massachusetts

The *other Settings* category includes parent groups.

The increase in the number of children receiving services in *programs designed for children with developmental delay or disabilities* is due to early intervention programs contracting out for services that are only provided within an office setting. Increased difficulty for early intervention programs in hiring occupational, physical and speech therapists over the past few years has resulted in a shortage of these Disciplines. Programs have contracted out these services to other organizations such as rehabilitative facilities which traditionally only provide office-based services. In August 2005, due to early intervention programs billing for these services as home visits, clarification was given to programs to bill for these services as office-based visits and not home visits.

The increase in the percentage of children receiving service in *programs designed for typically developing children* is due to a shift in service delivery in response to staff shortages. In order to maximize the availability of staff, programs are developing additional group services that focus on specific developmental issues. These groups serve to replace some of the home visits that would have occurred for these children.

Michigan

The *other Settings* category includes playgroups and restaurants.

There was an increase in the number of services provided in *programs for typical developing children*. There was a decrease in the number of services provided in *service provider locations*. These changes were due to an increased focus and technical assistance provided on the requirement of natural environment.

Minnesota

There was a decrease in the number of services provided in *programs for children with developmental delay*. The change was attributed to work being done with district staff to increase the use of natural environments when providing early intervention services to infants and toddlers and their families. Targeted technical assistance has been provided to those districts with data demonstrating high use of non-natural environments.

There was a decrease in the number of services provided in *programs for typical developing children*. The decrease was a result of the increase in the percent of children served in the birth to age 1 cohort and these children are less likely to be in childcare and are served in their home.

Missouri

Overall there was a decrease of 2% in the Child Count. Although the decrease in the *programs designed for typically developing children* was disproportionate to the change in Child Count, the average decrease in natural environments (*programs for designed for typically developing children* and *home Settings*) is proportionate to the overall decrease in Child Count.

The *other Settings* category includes children who were not receiving services other than service coordination.

Montana

The *other Settings* category includes day care; Early Head Start; Gateway Treatment Facility (families reside there while the parents are receiving treatment for addiction.)

The *residential facility* is a Children's Receiving Home where children reside when they have been removed from the family home. If Child Protective Services is unable to find a foster home or kinship home, children can and do reside there for a longer time than is optimal."

Montana attributes the increase in the number of children receiving services in the setting of *service provider's location* to the shortage of Speech Pathologists and Occupational Therapists in the state and to families who travel into the city to receive these services. Also they attribute the increase to families choosing to have services delivered in the provider's location rather than their home.

Nebraska

The increase in the *home* setting can be attributed to our increased focus on Least Restrictive Environments through the Coaching model, which trains parents to work with their local schools to provide services to their children out of the home rather than at a center based setting.

There was a decrease in the number of children served in a *program for developmental delay*. The change was attributed to the decline of support services in a segregated setting may be based on

the extensive training and technical assistance provided across the state to schools, services coordinators and families on providing support services in *home* and inclusive Settings.

There was a decrease in the number of children served in a *program for typically developing children*. The change was attributed to the decline in support services provided in inclusive Settings may be the impact of a larger percentage of families choosing support services in their *home*. Also since the table only allows for one setting to be chosen, school districts may be choosing *home* more frequently when a family is getting support in both *home* and inclusive child care programs.

The *other Settings* are a selection for school district to select if the child does not attend any of the Settings listed in Table 2.

Nevada

There was a decrease in the number of services provided in *programs for developmental delay*. There was an increase in the number of services provided in the *home* setting. These changes were due to the fact that the state has been moving toward providing the majority of services for all children within the natural environment. Early intervention programs have developed partnerships with a variety of community programs to provide natural learning opportunities for infants and toddlers. Unless there is an appropriate justification the majority of all services are provided either in the home or a community setting.

New Hampshire

The *other Settings* category includes playgrounds, community playgroups, malls, etc.

New Jersey

The increase in the *program for typically developing children* reflects the ongoing emphasis on the state's policy and procedures to provide services in natural environments. The state has enacted improvement activities and encouragement to increase the delivery of services in community Settings.

There was an increase in the number of children served in *residential facilities*. The increase is attributed to changes in population identified and referred from year to year.

New Mexico

The state's IDEA Part C program continues to encourage services to be provided in natural environments. This is reflected in the 2005 Settings data by significant decreases in the number of children whose primary service location is a *program for children with a developmental delay* or a *hospital setting* and an increase in the number of children whose primary location for services is the *home* or a *program for typically developing children*. The state is encouraging services in natural environments by offering a much higher reimbursement rate for services provided in the *home* or community. This is a strong incentive to provide services in Settings that are natural environments. In addition, the Family Infant Toddler Program provides regular training sessions on Natural Environments through the University of New Mexico Center for Development and Disability Early Childhood Training Network, and the Family Infant Toddler Program has published a technical assistance document on natural environments.

The large percentage increase in the number of children whose primary location is a *service provider location* is a data anomaly due to a single New Mexico provider incorrectly coding setting data. The provider in question has continued to be worked with through the provision of technical assistance. In addition, the provider in question (who currently has a separate data

system) will be required to use the Family Infant Toddler Program's new online data and billing system this coming January, 2008. This will result in more consistent data from this agency.

New York

The *other Settings* include child care centers and community recreation sites.

The data does not include 1,064 children enrolled in the NY Early Intervention Program on Dec. 1 who were over the age of three.

There was a decrease in the number of services provided in *programs for typical developing children*. The state saw a decrease in the number of Early Intervention (EI) children served in *programs for typically developing children* of 25 children (-13.51%) from 185 in 2004 to 160 in 2005. Considering the magnitude of all children served in 2005 (32,558) this decline is not significant. For comparison purposes, the number of EI children served in the *home* increased by 746 (2.63%) from 28,334 in 2004 to 29,080 in 2005.

There was a decrease in the number of services provided in *service provider locations*. This decline is likely the result of the state's continuing efforts to serve EI children in natural Settings when appropriate. The data is consistent with the state's indicator 2 from the 2005-06 Annual Performance Report, which indicates that 89.81% of the state's EI children received their services in natural environments as of December 1, 2005.

North Carolina

There was an increase in the number of services provided in *total setting*. The change was due to the state's dramatic increase in the number of infants and toddlers referred to its early intervention program. This increase in referrals has led to an increase in the number of infants and toddlers enrolled in the program.

There were decreases in the number of services provided in *programs for developmental delay* and *service provider locations*. There was an increase in the number of services provided in the *home* setting. These changes are due to the state's emphasis on providing services in a child's natural environment.

There was a decrease in the number of services provided in *programs for typically developing children*. The decrease was a result of more accurate data, due to local lead agency direct responsibility for data, and a new data system.

North Dakota

The *other Settings* category includes a parent's place of employment and Tribal Early childhood offices.

Oklahoma

The *other Settings* category includes Parks/Playgrounds, Libraries, Parent's work, and others

Oregon

There was an increase in the number of children served in total Settings. This change was due to an overall increase in the number of children receiving Part C services in Oregon. The increase can be attributed to the overall population increase in Oregon and the focus on child find through Oregon's Special Education System Performance Review and Improvement (SPR&I) system of accountability. The SPR&I system focuses on procedural compliance and key performance indicators identified through federal and state regulations and previous state accountability

findings. Early intervention programs with annual identification rates below the state target for birth to age three receiving Part C services are required to gather and analyze additional data and develop and implement improvement plans for ensuring that all infants and toddlers with disabilities are identified. This type of reporting and improvement planning was implemented with all programs in 2003.

There was a decrease in the number of children served in *program for developmental delay*. The decrease can be attributed to Oregon's child find efforts and work on increasing Settings in Natural Environment.

There was an increase in the number of children served in the *home*. The increase can be attributed to Oregon's child find efforts and work on increasing Settings in Natural Environment.

The *other Settings* category includes two children received services in a parent – toddler group; one child was receiving services at a conference room in an “interagency type building” off site; one child was incorrectly coded as *other setting* and actually received services in the *home*.

Pennsylvania

There was an increase in the number of services provided in *programs for typical developing children*. The increase was attributed to a couple of factors. The first is that over the years, Pennsylvania has been very successful in serving infants and toddlers in their natural environments, with 98% of services being provided in the child's home. However, Pennsylvania continues to strive to have children and their families receive their services in a variety of communities setting, particularly those designed for children who are typically developing.

There was an increase in the number of services provided in *programs for development delay*. The increase was isolated to one county program that had a shortage in a specific therapy and therefore began providing some service outside the home. The state has worked with this county to address the issue

The *other Settings* category includes services that were provided to the families, such as counseling and was not direct service to the child

Puerto Rico

There was an increase in total number of children receiving Part C services. There has been a steady increase in the total number of children served for the past two years, at present representing 2.6% of the estimated population of 0-2 years for year 2005 (149,873). The steady increase has been due to an increase in Child Find efforts. Puerto Rico has been meeting with physicians and hospitals to try and find children that need Part C services. Each Pediatric Center also has a Public Awareness Plan to increase referral to the Early Intervention System. Public Awareness materials specify that services are rendered in natural environments.

The increase in the total number of children served in Settings with *typically developing children* may be explained in part to collaborative agreements with EHS/HS and child care centers to serve children integrated with their daily routines.

The increase in the number of services provided in a *home setting* is based on two factors. The first factor is the increase in the total amount of infants and toddlers served in Part C. The second factor is OSEP's requirement that all children are served in natural environments, except for those children where the multidisciplinary team understand this is not appropriate, where a written justification must be provided.

The decrease of the number of services provided in *service provider location* is attributed to OSEP's requirement that all children are served in natural environments, except for those children where the multidisciplinary team understand this is not appropriate, where a written justification must be provided.

Rhode Island

The *other Settings* category includes Clinics, School Departments and other professional offices.

In the Rhode Island statewide database system, 9.15% (135 infants/toddlers) of the overall December 1, 2005 count fell outside of the noted categories. The percentages of the categories were determined and the 9.15% (135 infants/toddlers) were proportionally distributed among the categories.

There was an increase in the number of services provided in *total Settings, programs for children with developmental delays* and *home Settings*. These changes were due to an increase in the number of children served and improvements made to the Early Intervention Management System (EIMIS).

Rhode Island's Early Intervention Program changed Lead Agencies in January 2005. The RI Department of Human Services has reviewed the EIMIS data collection process and has implemented new data collection policies and EIMIS improvements which enhanced the reporting capabilities. The EIMIS System was developed by the Department of Health and was transferred to DHS. DHS updated the system to a higher version of Microsoft Access and added new data elements as required by the SPP. All drop downs lists were reviewed and updated to match federal wording and federal definitions (Location, Race and Discharge). Definitions and policies surrounding data entry were then distributed to all providers. These policies also are inline with new certification standards that went into effect January 1, 2006

South Dakota

The *other Settings* category includes BIA buildings and the Department of Social Services.

When the 2005 Settings data was compared with the 2005 Child Count data a data entry error was discovered. One child's age had been misrepresented. The state has since resubmitted their 2005 Child Count data.

Tennessee

There was a decrease in the number of services provided in the *program for developmental delay* setting. There was an increase in the number of services provided in the *program typically developing children* setting. These changes were due to data entry errors. During a re-review of the Settings data the state discovered that a number of providers were continuing to identify the primary setting as *programs for children with developmental delay* when, in fact, they should have been reported in either *program designed for typically developing children* or *service provider location*. Follow-up with the programs resulted in a cleaning of these data, which resulted in these year-to-year changes.

There was an increase in the number of services provided in the *home* setting. A review of the data revealed that the increase was due to the impact of a State-wide initiative to decrease transportation reimbursement to families accessing early intervention services outside of the home environment. This initiative has resulted in an increase of families desiring services to be provided in their home.

Texas

The *other Settings* category includes Parks, Schools, Community Centers and playgrounds/Gymnasiums

The decrease in the number of children with *other setting* and the corresponding increase in children whose primary setting is a *program for typically developing children* is a clarification with one local provider about what constitutes *other setting*.

There was a decrease in the number of services provided in *programs for developmental delay* and an increase in the number of services provided in *service provider locations*. These changes are very small, the result of changes of less than 20 children and less than .3% of the overall total, and appear to be normal year-to-year fluctuations.

Utah

There was a decrease in the number of services provided in *programs for typical developing children*. The Data manager trained program managers and data staff on the Settings definitions. Some Settings that were previously counted as *programs for typical developing children* should have been counted in other categories. The change is most likely associated with a better understanding of the Settings definitions and a shift toward more children with home as the primary setting.

There was an increase in the number of services provided in the *home*. The change is attributed to an increased emphasis on providing services in the child's natural environment and better documentation of service Settings.

There was a decrease in the number of services provided in *service provider locations*. The decrease was due to a shift towards more children with *home* as the primary setting. It was also attributed to a better understanding of Settings definitions by the program managers and data staff. In previous years, some providers were confused about the difference between *program for children with developmental delays* and *service provider location*. Providers were trained on the definitions and the data are more accurate in 2005.

The *other Settings* category includes children only receiving service coordination, the sheriff's office and the Division of Child and Family Services office.

The changes may also be related to the way in which the state collected the data. In 2005, they were able to collect the data using BTOTS, their new statewide data system. Since they were in the process of installing the system during the reporting period, the data manager worked closely with the EI providers to verify that the data were complete and accurate. The new system has also established an automated way of determining the primary setting, where previously it was tabulated by hand and compiled on spread sheets.

Virginia

The *other Settings* category includes Babysitters, Day Cares, Family's work, Park, Relatives Home and YMCA.

Virginia estimated the race for 200 children, their primary service Settings were: *Developmental Delay Program*: 2, *Typical Program*: 1, *Home*: 195, *Service Provider*: 1 and *Other Setting*: 1. Virginia follows the procedures for estimating race/ethnicity are posted online at <https://www.ideadata.org/docs/PartCRaceEthnicity.doc>

Washington

The increase in the number of services provided in *total Settings, programs for developmental delays, programs for typically developing children* and services provided in the *home* appear to be the result of the Washington Infant Toddler Early Intervention Program's (ITEIP's) continued growth in the number of children served.

The *other Settings* category includes eight (8) communities that are determined by family. The providers appear to have misused this category. ITEIP has been working to assure that the correct definitions are used. This has been corrected through training and changes in the data management system.

Report by Race/Ethnicity: Total Other + Multi-Racial + Not Provided = 5411. Program designed for children with developmental delays or disabilities - 4-Other, 83-Multi-Racial, 42-Not provided Total=1292. Program designed for typically designed for typically developing children - 1-Other, 26-Multi-Racial, 20-Not provided Total=47 3. Home - 0-Other, 123-Multi-Racial, 52-Not provided Total=175 4. Hospital (Inpatient) - 0-Other, 0-Multi-Racial, 1-Not provided Total=1 5. Residential Facility - 0-Other, 1-Multi-Racial, 0-Not provided Total=1 6. Service Provider Location - 5-Other, 114-Multi-Racial, 69-Not provided Total=188 7. Other Setting - zero count

West Virginia

The *residential facility* setting is used primarily for children who are staying with their mother in a Women's Correctional Facility in Greenbrier County. This is considered to be the child's natural environment.

Wisconsin

The state's information systems department uses the *other Settings* category, but they do not provide the specific Settings in this category.

There was a decrease in the number of children served in a *program for developmental delay*. The state attributes the decrease to more accurate statewide reporting of Settings. The State provided clarification of Settings categories and provided statewide technical assistance to improve the use of a correct Settings category.

There was an increase in the number of children served in a *program for typical developing children*. The state attributes the increase to both the states and counties' ongoing commitment to serving children in natural environments as well as the emphasis placed on inclusion during the monitoring and quality improvement process.

There was an increase in number of children served in a *service provider location*. There was a decrease in the number of children served in the *other setting* category. These changes were due to the state clarifying the reporting of children participating in a *service provider location*. Previously children receiving services in a *service provider location* were recorded as receiving services in *other Settings*.

Wyoming

The increase in the number of children served in the *home* is largely explained by the increase in Child Count and decreased *service provider location* setting.

There was a decrease in the number of children served in the *service provider location*. This change was attributed to improved staffing at several centers. At the same time, improved data integrity training efforts resulted in improved setting designations.

The decrease in *program for developmental delay* represent a small segment of the Settings reported and improved diagnostics, in part, led to this reduction.

IDEA Part C Exiting, 2005-06

Alabama

The state had 108 more children exit the Part C system during this reporting period, which would naturally create an increase in some of the exit categories.

There were increases in the *exited Part C without a referral* and *Part B eligibility not determined* category. These increases were attributed to two factors. The first is that the transition training (conducted by state EI staff and the 619 coordinator) has been reduced. The reduction in transition training was due to the State Department of Education (SDE) attempting to narrow down their data to target specific areas where transition is an issue.

The second factor is that there have been changes based on Preschools, regarding what referral forms are to be used by EI providers. This resulted in some confusion on the local level. The referral forms were changed to provide more general information on the preschool child. It has also been included in the SDE's new data system and will provide better document of the transition process.

There were increases in the *attempt to contact unsuccessful attempts* category. The increase was due to the impact of the hurricane season. People were without homes, power, phone lines, etc. which resulted in providers being unable to locate the children.

There was a decrease in the number of children that *moved out of state*. The decrease was attributed to the fact that fewer people moved out of the state because of the hurricane devastation. The surrounding states were greatly impacted by the hurricanes more so than Alabama.

There was an increase in the number of Asian/Pacific Islanders that exited Part C. The increase was attributed to the continual growth over the last three (3) years. The growth also correlates with the Census data.

American Samoa

The significant increases in the total Exiting data are due to efforts over the past 2 years to rebuild the entire early intervention program from the ground up. These efforts include the implementation of a database management system which allows for more reliable tracking of data such as changes of address, phone number and living situation. There were also major improvements in service coordination and service delivery which ensures that children are assessed and evaluated appropriately. Major improvements were also made in transition services to ensure that children remain in the program as long as they need to and transition to Part B and other services if necessary.

During the report year Dec 2004 – Dec 2005, the new data system was in the implementation phase and they were just beginning to enter all of their paper records. At this time they were also in the process of redefining the eligibility criteria. As part of this process they re-evaluated all of the children and found many children no longer in need of services.

Arizona

The state had a total of 119 unknown ethnicity data. Using the unknown ethnicity formula, they assigned: Section A.2. Total = 94; American Indian or Alaska Native = 6; Asian or Pacific Islander = 2; Black (Not Hispanic) = 4; Hispanic = 33; White (Not Hispanic) = 49. Section A.4. Total = 4; Hispanic = 2; White (Not Hispanic) = 2. Section A. 5. Total = 1; White (Not Hispanic) = 1. Section A.6 = 1; Hispanic =1. Section A.7. Total = 7; Hispanic = 2; White (Not Hispanic) = 5. Section A. 8. Total = 2; Hispanic = 1; White (Not Hispanic) = 1. Section A.9. Total = 10; American Indian or Alaska Native = 1; Black (Not Hispanic) = 1; Hispanic = 4; White (Not Hispanic) = 4. Grand Total = 119; American Indian or Alaska Native total = 7; Asian or Pacific Islander = 2; Black (Not Hispanic) = 5; Hispanic = 43 and White (Not Hispanic) = 62.

There was an increase in the number of children that *completed an IFSP prior to maximum age, exited to other programs, Part B eligibility not determined, unsuccessful attempts to contact, American Indian/Alaska Native, and Asian/Pacific Islander children that exited Part C.* There was a decrease in the number of children that were *Part B eligible* and number of Black children that exited Part C. These changes reflect the overall trend in the state's Child Count. In addition, targeted monitoring and technical assistance efforts continue to result in improved reporting of this data by providers.

Arkansas

There was an increase in the total number of children that Exiting Part C. The changes were due to the Part C Program Manager, Program Coordinator, training staff, and data manager providing technical assistance and training to clarify information regarding exit/transition procedures. Providers thereafter, reported provided accurate data in a timely manner, as verified by the Data Manager.

There was an increase in the number of children that were *Part B eligible*. The increase was due to the Part C Program Manager, Program Coordinator, training staff, data manager providing technical assistance and training to clarify information regarding exit/transition procedures and policies. It was also due to better data collection and verification methods regarding the proper data entry exit codes to use.

There was an increase in the number of children that *exited to other programs*. The increase was due to the Part C Program Manager, Program Coordinator, training staff, data manager providing technical assistance and training to clarify information regarding exit/transition procedures and policies. It was also due to the increased availability of ABC programs being available in Arkansas.

There was an increase in the number of children that *exited with no referral*. The increase was due to the Program Manager, Program Coordinator, training staff, data manager providing technical assistance and training to clarify information regarding exit/transition procedures and policies. It was also due to parents frequently moving and children completing the program and testing out and no longer eligible for early intervention services.

There was an increase in the number of children that were *withdrawn by a parent*. The increase was due to the Program Manager, Program Coordinator, training staff, data manager providing technical assistance and training to clarify information regarding exit/transition procedures and policies. It was also due to frequently moving.

There was an increase in the number of children with *unsuccessful attempts to contact*. This increase was due to the number of families moving and not changing their addresses; as well as, many parents are working during business hours and not returning calls.

There was an increase in the number of Asian/Pacific Islander children that exited Part C. The increase was due to the Program Manager, Program Coordinator, training staff, data manager providing technical assistance and training to clarify information regarding exit/transition procedures and policies. The increase was also due to more Asian/Pacific Islanders being in the program receiving services and most were Part B eligible. Others included some being withdrawn by parent, unable to contact parent, moved, deceased, not eligible for Part B and completion of their IFSP at maximum age 3.

California

California's 2005 Child Count grew by 12.12 percent compared to 2004; thus similar increases in numbers of children Exiting, like exit to Part B, would be expected.

All changes from last year are attributable to the substantial changes in definitions for each category compared to past years as follows:

There was an increase in the number of children that were *Part B eligible*. These are children that are eligible for Part B, not just being referred, but reported as receiving IEP services (Part B eligible is now solely those for whom Part B files report as actively receiving IEP services).

There was an increase in the number of children with *Part B eligibility not determined*. There was a decrease in the number of children that were *withdrawn by a parent*. These decreases are due to the fact that *Part B eligibility not determined* includes children that have not yet reported as receiving Part B services, including families refusing transition or withdrawing, etc. at age of transition, except for deaths.

There was a decrease in the number of children with *unsuccessful attempts to contact*. This category is now limited to exits of those younger than transition age.

There was a decrease in the number of children that *exited to other programs*. The category now includes those transition age children who did not appear as entering Part B and who received referral information with their letters informing them that they were not eligible for Lanterman Services through the regional centers.

Ethnicity was estimated for: Completion of IFSP prior to reaching maximum age for Part C 648 Part B Eligible 0, Not eligible for Part B, exit to other programs 747, Not eligible for Part B, exit with no referrals 0, Part B eligibility not determined 988, Deceased 47, Moved out of state 91, Withdrawal by parent (or guardian) 370, Attempt to contact unsuccessful 272

Connecticut

Connecticut estimated the race/ethnicity for 113 children who had an unknown race/ethnicity or multiple race/ethnicities

There was a decrease in the number of children that *moved out of state*. The decreases are due to families moving in and out of the state for economic reasons.

There was an increase in the number of children that had *unsuccessful attempts to contact*. The increased occurred for two reasons. The first reason is because there was an increase in the

number of children for this reporting period. Another reason for the change was a fiscal exigency in 2003. The state implemented a family cost participation system and changed to a system of payment to providers that does not reimburse early intervention programs children in which no services are provided in a month. In addition, if families are being billed a fee for services, they are billed if all the visits in the month were not cancelled 24 hours or more before the visit.

Delaware

Race/Ethnicity was prorated for 40 children who could not be identified with a single race. These children were coded as Unknown/Other in Delaware’s database.

Of these children, 1 was added to the Asian or Pacific Islander, 11 were added to Black (Not Hispanic), 4 were added to Hispanic, and 24 were added to White (non Hispanic). This prorating was based on percentages reflected in the race/ethnicity breakdowns in Table 1.

There was an increase in the number of children that *completed an IFSP prior to max age*. This increase was attributed to training and technical assistance regarding children *completing services prior to maximum age*. Technical assistance was included in the review of eligibility criteria for Delaware.

There was an increase in the category of *exit to other programs* and a decrease in the category of *Part B eligibility not determined*. These changes were attributed to an increase in tracking and monitoring for those children potentially eligible for Part B services. For those children not potentially eligible for Part B services, referrals to other programs are completed.

Florida

Continued progress is being made to align Florida’s Exit codes with OSEP Exit codes. They are seriously considering changing our exit date period to match our fiscal year (07/01-06/30).

Florida Part C Program’s Crosswalk to OSEP Exit Codes for 2005

Code	Definition	Start Date	End Date	OSEP Exit Codes
4-Discharged	No further ES follow-up due to completion of all IFSP goals	7/1/2000		1 - Completion of IFSP Prior to Max Age
A-Transferred to LEA 3-5 Program	Part C Eligible child is transitioning to an LEA-funded 3-5 program.	7/1/2000		2 - Part B Eligible
*P-Transfer to PKEI	terminated; use 6 instead	7/1/2000	6/30/2005	3 - Not Eligible for Part B, Exit to Other Programs
6-Discharged to Other Services/Provider	Child not eligible for Part B at age 3, but eligible for services with other programs.	7/1/2000		3 - Not Eligible for Part B, Exit to Other Programs
*E-Transfer to First/Even Start	terminated; use 6 instead	7/1/2000	6/30/2005	3 - Not Eligible for Part B, Exit to Other Programs
*H-Transfer to Headstart	terminated; use 6 instead	7/1/2000	6/30/2005	3 - Not Eligible for Part B, Exit to Other Programs

Code	Definition	Start Date	End Date	OSEP Exit Codes
*S-Transfer to Healthy Start	terminated; use 6 instead	7/1/2000	6/30/2005	3 - Not Eligible for Part B, Exit to Other Programs
7-Discharged (no services available)	Child not eligible for Part B at age 3, no service providers available	7/1/2000		4 - Not Eligible for Part B, Exit with no Referrals
N-Not Eligible for EIP services	Child is determined to NOT meet Part C/DEI Eligibility Criteria at initial evaluation or based on review of relevant collateral information.	7/1/2000		4 - Not Eligible for Part B, Exit with no Referrals
*3-One Time Eval	terminated, use a more descriptive code	7/1/2000	6/30/2005	5 - Part B Eligibility Not Determined
2-Expired	Child died (should be date of expiration)	7/1/2000		6 - Deceased
9-Withdrawal by parent after IFSP	Withdrawal by parent after IFSP because the family does not wish to receive ES services of any kind.	7/1/2005		8 Withdrawal by Parent
1 Attempts to contact unsuccessful	Child/family cannot be located and at least 3 attempts to contact have been documented	7/1/2000		9 Attempts to Contact Unsuccessful
x-Administrative Close (no services in past year)				9 Attempts to Contact Unsuccessful

There was a decrease in total number of children that exited Part C. The decrease is consistent with the overall four year trend of the decreasing number of children served in Florida.

There was an increase in number of children that *exited to other programs*. The increase was a result of technical assistance to local programs and revision of disposition codes to better align with Westat exit categories.

There was a decrease in number of children that *exited with no referral*. The decrease was due to technical assistance to local programs about the requirement to transition all children, not just children transitioning to Part B. This resulted in service coordinators making more referrals to other agencies. In addition, state experienced an overall decrease in the number of children Exiting.

There was a decrease in number of children with *Part B eligibility not determined, deceased, and withdrawn by a parent*. The change was due to the state experiencing an overall decrease in the number of children Exiting.

There was a decrease in number of children with *unsuccessful attempts to contact*. The change was due to the decrease in overall children Exiting, it is hypothesized that a decrease is due to decreased service coordination caseload size.

There was a decrease in number of Black and Hispanic children that exited Part C. The change was due to the fact that the state experienced an overall decrease in the number of children exiting.

Georgia

There was an increase in the number of children that *completed an IFSP prior to maximum age*. One factor that may have influenced this is that for the reporting period there were a higher percentage of children who reached their outcomes on the IFSP.

There was an increase in the number of children that *exited to other programs*. This increase may be attributed to the fact that the state has many options for services to young children. They explore with families all the options that are available to them, and some are not ready to have their children enter the Part B system.

Guam

There was an increase in *total number of children that exited Part C*. The significant change resulted from the increase in number of children that exited due to *completion of IFSP prior to maximum age of three years*. The number for *completion of IFSP prior to maximum age* doubled from 11 in the year 2004 to 21 in year 2005. Based on the 21 cases mentioned in the above category, the IFSP team determined the child to be in need of early intervention during the Initial Assessment and IFSP. However, during the Annual Assessment and IFSP evaluation review meeting, the early intervention team determined the above children to be functioning age appropriate and not in need of continued services, therefore terminating the IFSP with the program. Based on program procedures for the annual Assessment, a child may be screened out from the program at 2 years old if results from the Assessment of the child and evaluation of the IFSP indicate services are no longer needed.

Hawaii

There was a decrease in the number of children that *completed an IFSP prior to max age*. This percentage decrease was slight but was due to a decrease in the overall number of families enrolled in the Healthy Start Home Visiting Program from 2004 to 2005. Healthy Start serves the environmentally at-risk population in Hawaii.

There was an increase in the number children *Part B eligible*. This increase represents a number of families enrolled in the Healthy Start Program that chose to go on to Part B services. This is the result of Healthy Start Program's increased retention rate and retaining more families until the child's third birthday.

There was an increase in the number of children that *exited to other programs and exited with no referral*. These increases are the result of many children in Part C having only speech delays. While eligible for Department of Education (DOE) Part B services, some are interested in a program where their child will be with typically developing children so that they will have appropriate role models. Since the majority of 619 programs serve only children with disabilities, some families choose not to enter the Part B system.

There was an increase in the number of children that *moved out of state*. This increase was due to the State of Hawaii Department of Health serving both civilian and military populations. There is a significant military population in Hawaii and with the ongoing war effort in Iraq and Afghanistan, military families have been entering and leaving Hawaii more frequently than in previous years as military Personnel are transitioned to other U.S. military bases.

There was a decrease in the number of children that were *withdrawn by a parent*. This decrease was due to the Healthy Start Home Visiting Program increase in family retention.

Idaho

There was an increase in the number of children that *moved out of state*. The increase was due to Idaho being the third fastest growing state in the nation. This number is a reflection of increased Infant Toddler Program enrollment (and therefore Exiting for all reasons) over and above enrollment and Exiting of the previous year. The change also reflects the increased migrant population moving into (and out of) the state.

There was a decrease in the number of Black children that exited Part C. As of September 1, 2004 (the latest data available from Idaho Vital Statistics), blacks represented only 0.73% of the total state population. The December 1, 2005 Child Count of total black children enrolled enrollment was 13, 0.69% of total Child Count which is reflective of total state black population. The number who exited from the program from December 1, 2004 to November 30, 2005 was indeed 3. Three black children exited, which represent 0.19% of the total exited population of 1,574. No explanation is possible as to why this is the case.

There was an increase in the number of Hispanic children that exited Part C. Idaho is the third fastest growing state in the nation. This number is a reflection of increased Infant Toddler Program enrollment (and therefore Exiting for all reasons) over and above enrollment and Exiting of the previous year. The numbers also reflect the increased migrant population moving into (and out of) the state.

There was an increase in the number of White children that exited Part C. Idaho is the third fastest growing state in the nation. This number is a reflection of increased Infant Toddler Program enrollment (and therefore Exiting for all reasons) over and above enrollment and Exiting of the previous year.

There was an increase in the *total number of children Exiting Part C, completed an IFSP prior to maximum age, exited to other programs, exited without referral and Part B eligibility was not determined*. These changes are attributed to Idaho being the third fastest growing state in the nation. This number is a reflection of increased Infant Toddler Program enrollment (and therefore Exiting for all reasons) over and above enrollment and Exiting of the previous year.

Illinois

There was an increase in the number of children that were *withdrawn by a parent* (15%) *and the attempts to contact were unsuccessful* (22%). The growth was attributed to the increase in terminations overall. In addition, the increase is also related to the increase of 19% of Hispanic children in the caseload. Hispanic families are more likely to be closed for family reasons than other groups.

The state has taken a series of steps to improve transition. The most important of these is a data sharing agreement with the Illinois State Board of Education. The EI program forwards child find information on all children who turn 27-months of age in a month or whom start service after that age each month. The EI program geocodes the appropriate school district prior to sending the data. The program also forwards the termination code we record when the case closes and a grid of children by school district by age to help districts plan. All of this is sent monthly.

There was an increase in the number of children with *Part B eligibility not determined*. The increase was due to a change made to improve the transition process. The program added termination sub-codes to indicate if the reason eligibility was not determined was due to the service coordination agency, the LEA or the family. The program had long resisted this change for fear it would reduce the pressure on the Service Coordinators and others once there was a way to assign responsibility elsewhere. The state felt that they needed to learn more about what was preventing determinations. However, as soon as the new codes were introduced the proportion of cases where eligibility was not determined jumped sharply. The proportion of cases where eligibility was not determined is as follows: Statewide 76.4% of cases were coded as delayed for a family related reasons, 5.2% were due to LEA delay, and 23.9% because of the service coordination agency.

Indiana

There was a decrease in the number of children that were *Part B eligible*. There was an increase in the number of children with *Part B eligibility not determined*. The state is currently not able to identify the factor(s) that may be affecting these data elements and are working with Part B to determine contributing influences.

There was an increase in the number of children that *exited with no referral* and were *withdrawn by a parent*. The changes are due to the increased parent education components of the Part C program. Parents are Exiting feeling competent and comfortable in addressing their child's needs on their own.

There was a decrease in the number of children that *deceased*. While the state acknowledges limited control over this data element, they continue to pursue NICU outreach methods that they feel have been successful.

There was an increase in the number of Hispanic children that exited Part C. The change can be attributed to the increase that occurred on the Child Count. The state continues to serve higher numbers of Hispanic children; hence the increase in exit numbers.

Iowa

There was an increase in the number of children that *exited to other programs and exited with no referrals*. These changes are attributed to the state has increasing its Child Count for five consecutive years. In 2004, guidance was provided to local programs on eligibility criteria, with special emphasis on known conditions. Children with known conditions are less likely to go on to Part B programs and more likely to exit to other services. The changes were also a result of increases in targeted child find efforts, which lead to an increase in eligible children.

Kansas

There was an increase in the total number of children that exited Part C. The change can be attributed to the 10% increase in the number of children served in 2005.

There was an increase in the number of children that *completed an IFSP prior to maximum age*. The change can be attributed to the 10% increase in the number of children served in 2005. Another reason is that three networks with the most significant change reported provision of services to a high number of children with Torticollis.

There was an increase in the number of children that were *Part B eligible*. The change can be attributed to the 10% increase in the number of children served in 2005. Another reason for the

change is the development, with the Kansas State Department of Education, of a data transfer system to track transition data and accuracy of same.

There was an increase in the number of children that *exited without a referral*. This increase was due to a change in lead/fiscal agency in a large network and also a change in the coordinator and direct services staff. As a result they have had significant difficulty in tracking data from previous lead agency.

There was a decrease in the number of children that *moved out of state*. This was due to a significant decrease noted in networks that served children of families in the armed services. As a family member is deployed, the remaining family members are choosing to stay in their current location.

There was an increase in the number of children *withdrawn by a parent*. This was due to network reports that due to the increased undocumented population in Kansas, families enter services then leave without notice. They count these children in this category because they don't know if they have moved or not, but they can't find them.

There was a decrease in the number of children that had *unsuccessful attempts to contact*. This was attributed to some networks having assigned staff to "track" and assist families from entry through transition. Some annual category selection movement between *withdrawn* and *contact unsuccessful* is also possible.

There was an increase in the number of Asian/Pacific Islanders that exited Part C.

This was due to the population of Asian/Pacific Islanders served increased by 27%. The highest concentration of increase was in 2-3 age group and some were also migrants.

There was an increase in the number of Black children that exited Part C.

This was due to the population of Black children served increased by 9%. The highest increase was in the 2-3 year old age group.

There was an increase in the number of Hispanic children that exited Part C.

The population of Hispanic children served increased by 7.5%. The highest increase was in the 2-3 year old age group and some were also migrants.

Kentucky

There was a decrease in the number of children that completed an IFSP prior to maximum age and Part B eligible. There was an increase in the number of children with Part B eligibility not determined, moved out of state, and withdrawn by a parent. The state is currently investigating these changes. In addition, they are looking at children *withdrawn by parent* through a system of performance contracting implemented in FY08.

There was an increase in the number of Asian/Pacific Islander children that exited Part C. There was a decrease in the number of Black children that exited Part C. These changes are due to better collection on actual ethnicity information as opposed to reliance on estimates of ethnicity based on the distribution of known ethnicity accounts for these small, albeit significant differences.

Louisiana

With the move of the Part C program to a new lead agency in 2003, the numbers from 2004 and 2005 reflect the first 2 years of a new program model with increased availability of services to children in the state in each year. The percentages of children Exiting in each category remain constant for each year. For example, Part B eligible in 2004 was 647 or 30% and Part B eligible in 2005 was 1368 or 34%. This also holds true for change by race/ethnicity. For example, the number of African American children Exiting in 2004 was 43% and in 2005 was 40%.

Maryland

The Maryland State Department of Education, Division Special Education/Early Intervention Services was granted permission by the Office of Special Education Programs to change its Section 618 data collection date from 12/1 to the last Friday in October of each year. As required by the Maryland's Bridge to Excellence in Public Schools Act, this change in date permits the Child Count collection to align with the dates of other State enrollment counts. The data table is based on 10/28/05.

There were increases in the number of children who are *not Part B Eligible, exit to other programs* and *not Part B Eligible, exit with no referrals*. There was a decrease in the number of children *Part B Eligibility, Not Determined*. These changes are related to local efforts to improve the exchange of information about Part B eligibility determination between local Part C and Part B staff. Currently local Part C staff obtains the results of Part B eligibility determination from Part B staff and enter the results into the Part C database.

There was an increase in the number of children whose *parents have withdrawn from the program*. This increase is attributed primarily to data reported by three jurisdictions. MSDE tracks changes in local data from year to year to determine if there is an ongoing issue, and follows up with local programs to discuss significant changes.

There was an increase in the number of *unsuccessful attempts to contact* families whose children have been referred to the local early intervention system. This increase is primarily attributable to data reported by one jurisdiction. MSDE tracks changes in local data from year to year to determine if there is an ongoing issue, and follows up with local programs to discuss significant changes.

Massachusetts

The decrease in the percentages of children *not eligible for Part B due to exit with no referrals and Part B eligibility not determined* is due to increased data verification measures taken to ensure documentation completion of transition data. Focused Monitoring efforts during fiscal year 2005 and 2006 includes "grading" EI programs on the documentation of recommended outgoing referrals to the parents by program staff at the time of discharge. This, along with additional training and individual communications with programs during fiscal year 2006 regarding the Commonwealth's focused monitoring indicators has increased the data quality of transition information.

The increase in the percentage of children that *moved out of state* is due to the fact that Massachusetts included this as a reason for discharge on each child's discharge form effective during fiscal year 2005. It has generally taken about a year for programs to fully reorient themselves to data collection changes.

Michigan

There was an increase in the number of children that *completed an IFSP prior to maximum age*. The increase was attributed to the focus of the technical assistance being towards measuring child outcomes/progress and discharging children accordingly.

There was an increase in the number of children that *exited without referral*. The increase was attributed to the focus of the technical assistance being towards measuring child outcomes/progress and discharging children accordingly. As a result they did not need referral because they met their goals.

There was an increase in the number of children with *Part B eligibility not determined*. The change was due to a combination of factors, mainly an increase in families under economic stress leading to an increase in mobility

There was an increase in the number of children that *moved out of state*. The increase was due to the economic situation in the state, which has caused many families to leave.

There was an increase in the number of children that were *withdrawn by a parent*. The increases were due to the fluctuation in the number of parents that often feel that they have met their goals and often leave.

There was a decrease in the number of children that had *unsuccessful attempts to contact*. The change was due to an increased focus on improving data collection.

There was an increase in the number of Asian/Pacific Islander and Hispanic children that exited Part C. These changes were due to an increase in the population for these race/ethnicity categories in the southeastern part of the state.

Minnesota

There was an increase in the total number of children that exited Part C. This increase corresponds to an overall increase in the number of children served under Part C.

There was a decrease in the number of children that *completed an IFSP prior to maximum age*. This is a direct result of significant training and technical assistance to improve accuracy in data reporting. Children whose parents voluntarily withdrew from services in the past were incorrectly included in this category.

There was an increase in the number of children that were *Part B eligible*. This corresponds both to an increase in the number of children served ages 2-3 and an improvement in the overall accuracy of the data as a result of significant training and technical assistance to local programs.

There was a decrease in the number of children with *Part B eligibility not determined*. This decrease is the direct result to better understanding at the state level in which children should, and should not, be reported in this category.

There was an increase in the number of children that were *withdrawn by a parent*. This is a direct result of significant training and technical assistance to improve accuracy in data reporting. Children whose parents voluntarily withdrew from services in the past were incorrectly reported as having *completed an IFSP prior to maximum age*.

There was an increase in the number of American Indian/Alaska Native, Asian/Pacific Islander, and White children that exited Part C. There was a corresponding increase

There was a decrease in the number of Black children that exited Part C. There is nothing in the data to explain the decrease in the number of Black children Exiting Part C. The state will monitor this to determine whether this is a one-time data anomaly or indicative of a trend.

Missouri

There was a decrease in the number of children that moved out of state. The state cannot provide an explanation for this change because they do not collect data pertaining to the reasons families move out of state.

There was an increase in the number of black children that exited Part C. The increase was due to a steady increase in the number of children reported as Exiting Part C over the past 3-4 years. Since Child Count numbers have remained relatively stable for the past three years, the increase is most likely due to the data systems that have been in place statewide since 2003 which are collecting more accurate and more complete data.

Montana

Montana attributes the increased number of children *moving out of State* as a result of the low economy in Montana, families can earn a better income out of state.

Montana attributes the increased number of children being *withdrawn by parent* is a result of the number of children served in the foster care system. The child is removed from biological parents and the foster family determines they do not want Part C services.

Montana attributes the increased total number of children Exiting services to the increase number of children in the number of children being identified between the ages of 24-36 months. The state has also had an increase in the number of referrals of children being born in NIC units. Previous NIC referrals were re-evaluated and found no longer eligible for Part C services.

Montana attributes the increased number of children *Exiting Part C prior to maximum age* to an increase in the number of children who no longer qualified for Part C services due to Montana's narrow definition for eligibility after the completion of the IFSP. The criteria to be used in determining a child's eligibility as a result of developmental delay includes: A minimum of 50% delay in any one of the developmental areas or a 25% delay in two or more of the developmental areas. Informed clinical opinion must be used in determining eligibility for services under Part C if there are no standardized measures, or the standardized measures and procedures available are not appropriate for a given age or developmental level. OSEP has approved our definition.

Montana attributes the increase of American Indian/Alaska Native Exiting services to the increase number of children in the number of children being identified between the ages of 24-36 months. The state has also had an increase in the number of referrals of children being born in NIC units. Previous NIC referrals were re-evaluated and found no longer eligible for Part C services.

Montana attributes the increase of *White* children Exiting services to the increase number of *White* children being served in Part C services. There number of *White* children increased by 7% in the Child Count and there was an 11% in the number that exited Part C.

Nebraska

There was a decrease in the number of children with *Part B, eligibility not determined* and an increase in the number of children that were *Part B eligible*. These changes were attributed to an effort during the past year by the Nebraska Department of Education to work with local administrators to correctly identify children as *Part B eligible*.

There was an increase in the number of children that *completed an IFSP prior to max age*. The change was attributed to the fact that during the past year, a higher percentage of infants and toddlers reached the functional outcomes of their IFSP.

There was a decrease in the number of children that *moved out of state*. The decline may be part of state's campaign to boost its economy by encouraging families to remain in the state.

There was an increase in the number of children that were *withdrawn by a parent*. The increase was due to a clarification on how to track these children was provided to school districts and implemented to the system for accurate recording.

Nevada

There was an increase in the number of children that *exited Part C with no referral*. The increase was attributed to the fact that the state has a highly transient and mobile population. They also have a higher percentage of families that are not choosing to access school district services.

There was an increase in the number of children that *moved out of the state*. The increase was due to the state's highly transient and mobile population. They have a lot of seasonal employment. Families not only move in and out of the state but frequently move within the state. These numbers are not unreasonable for Nevada and indicate the nature of the population. As the numbers served go up, so do the numbers of children that move. Many times these children end up coming back and they have children whose record is opened and closed several times over the course of 3 years.

There was an increase in the number of children that were *withdrawn by a parent*. The increase was attributed to the fact that the social service referrals have tripled, but many of these families are not interested in engaging in services. The state also has families that are just not ready for early intervention.

There was a decrease in the number of children that *completed an IFSP prior to maximum age*. The state discovered through data audits/data verification that the early intervention programs were incorrectly coding children Exiting the system in this category during 2004-2005. Technical assistance was provided to the early intervention programs and data audits/data verification in this field continues to ensure correct coding in this field.

There was an increase in the *total number of children that exited Part C*. The state attributes the change to the increased state funding in the Biennium 2004-2005. This has helped to increase the unduplicated total number of children who received Part C services. For the reporting period of July 1, 2002 through June 30, 2003, which is State Fiscal Year 2003 (SFY03) Nevada served 1,799 children (unduplicated count); in SFY06 (July 1, 2005 through June 30, 2006) Nevada served 2,515 children (unduplicated count) which is an increase of 39.8% children served over the last 3 years. The growth in children receiving services naturally increased the number of children Exiting Part C services.

There was an increase in the number of Black, Hispanic, and White children that exited Part C. The state attributes the increase in the total number of children Exiting Part C in 2005-2006 to the increased state funding in the Biennium 2004-2005 which helped to increase the unduplicated total number of children who received Part C services. For the reporting period of July 1, 2002 through June 30, 2003, which is State Fiscal Year 2003 (SFY03) Nevada served 1,799 children (unduplicated count); in SFY06 (July 1, 2005 through June 30, 2006) Nevada served 2,515 children (unduplicated count) which is an increase of 39.8% children served over the last 3 years. The growth in children receiving services naturally increased the number of children Exiting Part C services.

There was an increase in the number of children with *unsuccessful attempts to contact*. The change was due to the increased state funding received in the Biennium 2004-2005, which increased the total number of children being served. It was also attributed to the state's high transient rate.

New Hampshire

There was an increase in the number of children with *unsuccessful attempts to contact*. The change was attributed to an increase in the number of parents being forced to refer their children due to CAPTA requirements but do not wish to follow up. Some families are court ordered to receive services, but many are not and simply 'disappear'. There are also an increased number of families who are non-English speaking who are referred by well-meaning social workers and physicians. The families have difficulty expressing themselves and either do not want the services as they do not agree that their child has developmental delays, or do not understand what the services are about and consequently are not available for services. Another reason is that there is an increase in the number of families experiencing poverty in regions served by 10 of 18 programs which has led to families losing phone services or needing to change residences quickly and without notice and are therefore unavailable to receive services.

New Mexico

There has been a significant increase of twenty-nine (29) percent in the number of children Exiting the New Mexico IDEA Part C program from 2004 to 2005. This increase can be attributed to a number of factors, including an increase in the overall number of children served and the provision of statewide transition planning initiatives. However, the difference in each exit category or reason for leaving the program is not significant. When each separate reason for leaving is compared to the other reasons for leaving in each year, they are different by only about a 2% margin, either higher or lower. The one exception to this is the reason *attempts to contact the parent or guardian were unsuccessful*, which showed a 5% increase in 2005 from 2004 when compared with the other reasons. This may be due to the increasingly transient nature of New Mexico's population and the difficulty in providers locating families of migrant workers or undocumented residents.

There is a small but significant change in two of the racial categories of children leaving the program, when these racial categories are compared to the other racial categories for each year. In 2005 there was an increase of 7.3% for children who left the program whose identified racial category was Hispanic and a decrease of 4.6% for those children who's identified racial category was White. This again may have some relationship with New Mexico's population

New Jersey

There was an increase in the number of children that *completed an IFSP prior to maximum age*. The increase was attributed to the implementation of family cost participation and increased accountability to service utilization.

There was a decrease in the number of children that were *Part B eligible*. There was an increase in the number of children that *exited to other programs*. These changes are attributed to improved data collection and reporting.

There was an increase in the number of children that *exited with no referral*. The increase was due to the changing populations and parent choice.

There was an increase in the number of children Exiting with *Part B eligibility not determined*. This increase was due to improved data collection and reporting. This count also includes families that do not pursue Part B services for their child.

There was an increase in the number of children that *moved out of state*. The increase was due to family choice and the increasing cost of living and taxes.

There was an increase in the number of children *withdrawn by a parent*. The increase was attributed to the implementation of revised family cost participation policies and procedures.

There was an increase in the number of Hispanic and White children Exiting Part C. These changes are due to an increase in the number of children served for the fiscal year. This increase follows the trend of populations served.

New York

The general instructions for Table 3 require that children turning three prior to the reporting period (July 1, 2005 to June 30, 2006) be excluded from the report. The number of children excluded because of this requirement was 6,468.

In reports submitted in previous years, children who remained in the New York State Early Intervention Program beyond their third birthdays were reported in Table 1 and were not reported in Table 3. The instructions for Table 3 require that children who turned three during the reporting period, yet continued to receive early intervention services, be reported in Table 3. The New York State Early Intervention Program requires children to be determined eligible for Part B services in order to receive Part C services beyond their third birthdays. All children must be evaluated for Part B eligibility by age 3. If eligible, an IEP is developed with a start date for Part B preschool services. The parent decides when the child will transition to Part B and, depending on the child's birth date, the child can stay in EI with an IFSP, until Jan 2 (for children born Sept 1-Dec 31, or until Sept 1 (for children born Jan 1 - Aug 31). Therefore, as instructed by OSEP and Westat, these children (n = 3,984) have been included in line 2.

In Exit reports prior to PY 2003-04, children moving out of county were assigned to exit category *moved out of state*. For the current reporting period, 980 children fell into this category. In an effort to determine their true program status or exit category, these children were matched against both enrolled children and children closed during the program year. Matching criteria included the child's name, sex, date of birth, Social Security Number, Medicaid ID and mother's maiden name. Based on the results of this match, 451 children were found to be enrolled in the EIP in another county and were removed from the Exit report, 498 children under three years of age could not be located (unable to be matched) and were categorized as *attempts to contact unsuccessful*, and 31 children over three years of age unable to be matched were placed in *Part B, eligibility not determined*.

There were 40 children remaining who exited the EIP during the year with a NYS exit reason that did not explicitly correspond to a federal exit category and whose status could not be resolved by any of the previous steps. Based on additional guidance from Westat, these children were

assigned to an exit category based on their age at time of program exit. 5 children over 3 were placed in *Part B eligibility not determined* and 35 children under 3 were placed in *attempts to contact unsuccessful*.

There was an increase in the number of children that *exited to other programs* and *exited with no referrals*. The increase was attributed to the state enacting legislation in 2003 requiring that all children receive an eligibility determination for Part B by their third birthday in order to remain in the Early Intervention Program. One of the expected effects of this legislation was that more children were expected to have eligibility determinations for Part B, and a disproportionately high number of these children would not be eligible for Part B services. Due to the timing of the implementation of this legislation, it is expected that there should not be a continuing year-to-year increase beyond this program year. This trend will be monitored in order to verify this expectation.

North Carolina

There was an increase in the *total number of children Exiting Part C*, the number of children that *completed an IFSP prior to maximum age, exited to other programs, moved out of state, withdrawn by a parent and had unsuccessful attempts to contact*. These changes were due to a dramatic increase in the number of infants and toddlers referred to the early intervention program. This increase has led to an increase in the number of infants and toddlers enrolled in the program.

There was a decrease in the number of children with *Part B eligibility, not determined*. The decrease was attributed to the creation of a local lead agency with direct responsibility for data and a new data system. The new data system (CECAS) was implemented in July 2005 with migration of historical data, and entry of new data beginning in fall 2005. The new system provides closure data on an increased number of children is available.

The increase in the number of American Indian/Alaska Native and Asian/Pacific Islander children receiving services is most likely explained by random fluctuations associated with categories with small numbers. Additionally, the reorganization of the North Carolina's Part C program in 2004 decreased the number of agencies responsible for completing the Infant Toddler Data form, which increased the consistency in data reporting.

Exit Reason Crosswalk:

1. *Completion of IFSP Prior to Reaching Maximum Age for Part C* is the sum of the state categories "Does not meet eligibility criteria for ITP", which means that an enrolled child no longer meets eligibility due to developmental improvement, and completed IFSP prior to 3rd birthday.
2. *Part B Eligible* is the sum of the state categories "Aged out; Entered Preschool Program (Part B)" and "Aged out; eligible for Preschool, family refused".
3. *Not eligible for Part B, Exit to Other Programs* is the sum of "Aged out; not eligible for Preschool Program (Part B)" and "Aged out; not eligible for Part B - Referred to Other Programs".
4. *Not Eligible for Part B, Exit with No Referrals* is the state category "Aged out; not eligible for Part B - Exit with No Referrals".

5. *Part B Eligibility Not Determined* is the sum of state categories “Aged out; Unknown Eligibility for Preschool Program” and “Other” and the number of children who reached their third birthday who did not have a closure report.
6. *Deceased* is the state category “Child Expired”.
7. *Moved out of State* is the state category “Moved, address unknown or out-of-state”.
8. *Withdrawal by Parent (Or Guardian)* is the sum of the state categories “Parent ended participation; no longer wants services”, “Parent ended participation; no longer needs services”, “Parent ended participation; dissatisfied with services” and “Parent discontinued”.
9. *Attempts to Contact Unsuccessful* are the sum of the state categories “Lost to follow-up” and “Unable to make contact”.

North Carolina implemented the categories “Aged out; Not Eligible for Part B - Exit with No Referrals”, “Aged out; Not Eligible for Part B -Referred to Other Programs” and “Completed IFSP prior to third birthday” in June 2006 to correspond with the federal reporting categories.

North Dakota

North Dakota does not have re-determination points. Once a child is eligible they remain eligible until they are 3 years of age. Because they remain eligible they exit only when *withdrawn by their parents or guardians*. That is why there is no data to report for *completion of IFSP prior to maximum age*.

Oklahoma

There were increases in seven of the ten Exiting categories. These increases are attributed to the full implementation of the Keeping Children Safe Act. In 2005 the state began screening all children birth to the age of three with substantiated cases of child abuse or neglect. Local Early Intervention offices began meeting on a regular basis with the Child Welfare Agencies to ensure that all children were referred and screened for developmental delay.

There are approximately 3500 children ages birth to three in Oklahoma at any given time in the custody of the State. At the state level the Child Welfare Agency the Department of Human Services and the Lead Agency the Department of Education worked closely to monitor the statewide database system of children in the custody of the state maintained at the Department of Human Services. This database was monitored closely to ensure all children were being referred to the Early Intervention Program at the local level.

Oregon

Since the state has a seamless system of serving children birth - school age, the children reported as *Part B Eligible* are known to have successfully transitioned to the state’s Early Childhood Special Education Program.

Pennsylvania

There was an increase in the number of children that *completed an IFSP prior to maximum age*. This change was due to the fact that in the December 2004 Child Count, there was a 7% increase in the number of children served. In addition, Pennsylvania has implemented a more comprehensive monitoring system, with increased detail in documenting children’s progress in meeting their goals prior to transition age.

There was an increase in the number of children whose *Part B eligibility was not determined*. Some of the increase is attributed to the increase in the number of children served. Other contributing factors to the increase in this area include the following: delays in determining eligibility at the request of parents and a delay in eligibility determinations made by the Part B agency reported back to the Part C agency. Local Part C county programs have been working on the latter issue with the local Part B agency. Pennsylvania will be monitoring this number throughout the coming year to see if our strategies for improvement were successful.

There was an increase in the number of children that had *unsuccessful attempts to contact*. Some of the increase is attributed to the increase in the number of children served. Pennsylvania will monitor this number throughout the coming year to determine if there are continually trends in this data and if there is a need review current procedures.

There was a decrease in the number of American Indian/Alaska Native children that exited Part C. The change was attributed to the fact that in the December 2004 Child Count, there was a 29% decrease in the number of children served in this category. The very small percent of this population also needs to be taken into consideration. Since this is a very small percent of the population, any decreases or increases in this category could result in larger percentage changes that may not be reflective of performance in the identification or service to these children.

There was an increase in the number of Asian/Pacific Islander children that exited Part C. This change was attributed to the fact that in the December 2004 Child Count, there was a 17% increase in the number of children served in this category.

There was an increase in the number of Hispanic children that exited Part C. This change was attributed to the fact that in the December 2004 Child Count, there was a 13% increase in the number of children served.

Puerto Rico

The increase in the *total number of children Exiting from Part C* is explained by the increase in the number of children served 0-2 years of age.

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- The increase in the number of children that completed *an IFSP prior to the maximum age* is because many of these children have minimal delay (in speech and language) and therefore achieve established outcomes faster. Also, most of these children were in the 2-3 age group and served in natural environments where services are integrated family's and children's daily routines, which may contribute to earlier achievement of outcomes.

There was an increase in the total number of children determined as *eligible for Part B services*. The change was attributed to the increased efforts of most of the centers to educate families on the importance of the process of eligibility determination by Part B to assure continuity of services, where applicable. The increased efforts involve providing orientation to families on their rights under Part C by the Service Coordinator and training to Part C staff on transition procedures.

The ninety (90) percent increase in the number of children *not eligible to Part B and referred to other programs* was due to re-training of service coordinators on transition issues during last year. The training was conducted because a large percentage of the children present speech / language delay, many of them, minimal delays, who will benefit from community providers, such as Head Start.

The increase in the number of children that *moved out of the state* may be explained by the difficulty in obtaining jobs in the island, most of all for young people without job experience. Due to a fiscal crisis in Puerto Rico during the past months (Feb and March 2006) some families may have decided to move to the States. We do not have data on the specific reasons.

The decrease in the number of children that were *withdrawn by a parent* may be explained on basis of increased satisfaction of families with services. In the future monitoring data will be collected to validate this theory.

The increase in the number of children that had *unsuccessful contact* may be explained by a procedure implemented recently by which if a family fails an appointment on two (2) successive visits without previous notification, a letter is sent requiring a call to the Service coordinator within two weeks. If this does not occur we proceed to exit the child and family from the program due to unsuccessful contact.

Rhode Island

In the Rhode Island statewide database system, 12.09% (174 infants/toddlers) of the overall 2005 count fell outside of the noted categories. The percentages of the categories were determined and the 12.09% (174 infants/toddlers) were proportionally distributed among the categories in table 3.

There was a decrease in the number of children that *moved out of state* and an increase in the number of children that had *unsuccessful attempts to contact*. These changes were due to an increase in the number of children served and improvements made to the Early Intervention Management System (EIMIS).

Rhode Island's Early Intervention Program changed Lead Agencies in January 2005. The RI Department of Human Services has reviewed the EIMIS data collection process and has implemented new data collection policies and EIMIS improvements which enhanced the reporting capabilities. The EIMIS System was developed by the Department of Health and was transferred to DHS. DHS updated the system to a higher version of Microsoft Access and added new data elements as required by the SPP. All drop downs lists were reviewed and updated to match federal wording and federal definitions including discharge. Two category clarifications were added. These categories were *not eligible for Part B-No referrals* and *Part B eligibility not determined*. The definitions of these two categories now match OSEP's definitions more closely. Definitions and policies surrounding data entry was then distributed to all providers.

South Dakota

Between 2004 and 2005, the number of children served in the program had increased from 897 percent in 2004 to 935 in 2005 which is a 4.24 percent increase. The number of children Exiting the program has also increased in 2004 there were 720 children and in 2005 there were 764 children Exiting the program which is a difference of 44 children or 6.1 percent increase. The majority of the children on the program are white children in 2004 there were 625 and in 2005 the number of white children increased to 644. The bulk of the number of children Exiting the program are 2 to 3 year olds (in 2004 – 625 were white children and in 2005 – 644 were white children) and most of the children were 2 to 3 year olds (in 2004 there were 515 and in 2005 this number increased to 531). With the increase of white children in Child Count and the majority of children Exiting the program being 2 to 3 year old children, it would be expected that most of these children would be white children. This would justify an increase of 11.91 percent of white children Exiting the program.

There was an increase in the number of children *withdrawn by a parent*. The Part C program is concerned by this data and intends to track this data to determine if this continues beyond a single year and intends to address possible causes once we have sufficient data.

There was an increase in the number of children *Exiting to other program*. This increase was due to children that did not meet the Part B eligibility requirement for services because of children that have entered the Part C program with motor delays only such as torticollis. This particular motor delay is typically resolved by the age of 3. Therefore, children are not qualifying for Part B/619 services.

Tennessee

There was an increase in the number of children that *completed an IFSP prior to reaching maximum age for Part C*. The increase was due to the completion of data verification activities by the data manager. In a number of incidences, reporting entities were inaccurately reporting these children in the *withdrawal by parent* category. Technical assistance regarding definitions was provided through this investigation process.

There was an increase in the number of children that were *not eligible for Part B, and exited with no referrals*. The Data manager followed-up with reporting entities whose numbers reflected the greatest amount of fluctuations and two predominant reasons were attributed to the increase. The first reason is that the Transition Planning Conference Meetings were held in a timely fashion, which resulted in the Part C system having specific information about the determination process. This allowed Part B eligibility to be determined earlier. The second reason was that the LEAs were being stricter in enforcing Part B eligibility standards.

There was an increase in the number of children that had *unsuccessful attempts to contact*. Data verification activities showed that the most significant change occurred in one district. An on-site verification visit has been scheduled with that district point of entry office in order to further validate their data submitted.

There was an increase in the number of Asian/Pacific Islander children that exited Part C. The state's data manager followed-up with reporting entities whose numbers reflected the greatest amount of fluctuation. One of the nine reporting districts noted an increase in number and percent of 10 or greater. Data were reviewed for this district and two additional districts which revealed increases but did not meet "significant change" criteria. For the three districts reviewed, verification activities included a review of 2003 to 2005 trend data from 618 Child Count and Exiting reports, including an examination of numbers across counties and reasons for Exiting. No clustering of data among review elements revealed any unusual or concerning pattern explaining a reason for the increase for this race/ethnicity category.

There was an increase in the number of Hispanic children that exited Part C. The data manager followed-up with reporting entities whose numbers reflected the greatest amount of fluctuation. One of the nine reporting districts noted an increase in number and percent of 10 or greater. Data was reviewed for this district and two additional districts which revealed increases but did not meet "significant change" criteria. For the three districts reviewed, verification activities included a review of 2003 to 2005 trend data from 618 Child Count and Exiting data, including an examination of numbers across counties and reasons for Exiting. Two of the districts (one with a significant change and one without) revealed an increase in population for this race/ethnicity category. The explanation for an increase in Hispanic children can be found on the 2005, 618 Child Count Significant Change Report submitted September 2006.

Texas

The increase in the number of children *Exiting to other programs* and the corresponding decrease in the number of children *Exiting with no referral* is the result of ongoing transition efforts to connect families to appropriate services upon dismissal from Part C services.

The increase in the number of children whose *Part B eligibility was not determined* is difficult to attribute to any one reason. Though the number is higher than the year before, the percentage of the total is within one percentage point of previous years.

The increase in the number of families who *moved out of state* and those who *could not be contacted* is the result of a larger number of families who are mobile and transient.

The greater number of children Exiting who are Asian is the result of population growth in urban areas.

Utah

Data collected and compiled using Baby Toddler On-Line Tracking System (BTOTS), Utah's new statewide data system.

BTOTS included 9 infants and toddlers Exiting during the reporting period, with ethnicity "other". These were distributed across the appropriate cells for race/ethnicity in each category, described below:

Part B Eligible: 5 with "other" race/ethnicity with the following information: 1 White/Hispanic, 1 White/Black, 1 Tongan/Hispanic, 2 unknown: distributed as 2 White, 1 Hispanic, 1 Black, and 1 Asian *Not Eligible for Part B, Exit with No Referral*: 1 with "other: White/Hispanic - counted as Hispanic.

Part B Eligibility Not Determined: 2 with "other: unknown" - distributed as 1 White, 1 Hispanic *Withdrawal by Parent*: 1 with "other: White/Hispanic" - counted as White.

The significant year-to-year changes are a result of program growth. Utah has the highest birth rate in the nation, and the enrollment has increased along with the population. As more children are served, more children exit.

Virginia

Virginia estimated the race of children Exiting Part C in the following amounts: 1 *Deceased*, 14 *Left Virginia*, 11 *Parent Withdrew*, 19 *Lost Contact with Family*, 41 *IFSP Completion (Child Less Than 3)*, 73 *Public School / Part B Eligible*, 14 *Exit with Referrals*, 19 *Exit at age 3 - No Referrals*, 13 *Part B Referral, Eligibility Not Yet Determined* and 14 *Other*. Virginia follows the procedures for estimating race/ethnicity are posted online at <https://www.ideadata.org/docs/PartCRaceEthnicity.doc>

Washington

There was an increase in the total number of children that exited Part C, completed an IFSP prior to maximum age, exited to other programs, exited with no referral, Part B eligibility not determined, moved out of state, withdrawn by a parent and with unsuccessful attempts to contact. The increases are consistent with and reflective of overall increases in the number of children served in the State of Washington.

The increase in the number of Asian/Pacific Islander children that exited Part C reflects that the State of Washington is now serving closer to 5% (211 of 4,248) of this population, as a result of increased Child Find activities. The total Asian/Pacific Islander birth to three population of the state is 8.6% (20,490 of 239,027).

Transition Data by Other, Multi-Racial and Not Provided=473 1. Completion of IFSP Prior to Reaching Maximum Age for Part C: 0-Other, 33-Multi-Racial, 31-Not Provided Total = 64 2. Part B Eligible: 18-Other, 151-Multi-Racial, 72-Not Provided Total = 241 3. Not eligible for Part B, Exit to Other Programs: 0-Other, 23-Multi-Racial, 3-Not Provided Total = 26 4. Not Eligible for Part B, Exit with no referrals: 0-Other, 7-Multi-Racial, 2-Not Provided Total = 9 5. Part B, Eligibility Not Determined: 0-Other, 29-Multi-Racial, 17-Not Provided Total = 46 6. Deceased: 0-Other, 3-Multi-Racial, 0-Not Provided Total = 3 7. Moved out of state: 0-Other, 14-Multi-Racial, 9-Not Provided Total = 23 8. Withdrawal by Parent (or guardian): 0-Other, 11-Multi-Racial, 9-Not Provided Total = 20 9. Attempts to Contact Unsuccessful: 0-Other, 30-Multi-Racial, 11-Not Provided Total = 41

West Virginia

In the *Part B Eligibility not determined* category, of the 363 children, 129 had the sub-category, family requested no referral be made, and 188 had the sub-category referral made to Part B, awaiting eligibility determination.

Wisconsin

Wisconsin resubmitted their 2003-04 Exiting data due to a data entry problem. The *Part B eligibility* category included ninety-eight (98) families who did not consent to transition planning. The computer print out states “parents did not consent to plan,” so the state interpreted that as the child being eligible but did not like the IEP. These children have now been included in the category of children that were *withdrawn by their parents*.

There was a decrease in the number of children that *exited to other programs*. The state attributes the decrease to a variance in children’s needs from year to year based on children’s unique set of needs. The state will continue to monitor this area over the next reporting period to see if this is a one time change or a possible trend.

There was an increase in the number of children that *exited with no referral*. The state attributes the increase to statewide efforts to help discharge children from Birth to 3 Programs when the child has met all of their developmental goals at or before age three.

There was a decrease in number of children that were *deceased*. This is possibly due to the Wisconsin Department of Health and Family Services strengthening statewide efforts to work with public health, health care, and community leaders to eliminate racial and ethnic disparities in infant mortality.

There was an increase in the number of children that *moved out of state* and were *withdrawn by parents*. The state will continue to monitor these areas over the next reporting period to see if this is a one time change or a possible trend.