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**CHASE GRANT AWARD AGREEMENT**

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## GRANT AWARD AGREEMENT

December 2015

Grantor: Office of the Attorney General

Grantee: Agricultural and Labor Program, Inc.

Contact: Deloris Johnson, CEO

Employer ID # 59-1634148

Grant award amount: \$59,000.00

Area to be served by this grant award is described in Attachment A, Part 1.

Details of services and activities to be provided by this grant award are described in Attachment A, Part 2.

You acknowledge that a Chase Settlement Grant of \$59,000.00 was approved for the purposes described in your grant proposal.

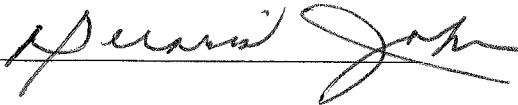
It is important to remember that the grant award cannot be used for any other purpose, including your office space purchases or rentals, your building renovations, your consultants, and your professional organization dues or severance payments. If, for any reason, you feel you will be unable to fulfill any part of your grant proposal or comply with this Grant Award Agreement, you must notify the Office of the Attorney General in writing.

Any grant award funds not used for the purposes of your grant proposal will be returned to Office of the Attorney General. The Office of the Attorney General may audit your records pertaining to the grant award. If the Office of the Attorney General determines you are not meeting the grant's goals, it may demand the return of some or all of the grant award.

If your organization changes its legal status while it is using the grant award, you will immediately submit written notification to the Office of the Attorney General.

You will also submit quarterly progress reports to the Office of the Attorney General by the 15th day of every third month of the grant. For example: First Quarter Report - April 15, 2016; Second Quarter Report - July 15, 2016; Third Quarter Report - October 15, 2016; and Fourth Quarter Report - January 15, 2017.

ACCEPTED AND AGREED:

By: 

Print Name: Deloris Johnson

Title: Chief Executive Officer

Date: December 9, 2015

Return to:  
Tallahassee, FL 32399-1050  
Laura K. Daugherty  
Economist Supervisor  
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**POLK COUNTY INTERAGENCY AGREEMENT**

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# **Polk County**

## **Early Childhood Community Procedures** **For the Transition of Young Children with Disabilities**



Facilitated by  
Florida's Transition Project AND TATS-West Central Region

**July 1, 2015 – June 30, 2018**

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## I. Purpose

The purpose of this document is to establish early childhood community procedures for the successful transition of young children with disabilities, who at age three will be exiting Part C/Bay Area Early Steps and entering the Part B/PreKindergarten Exception Student Education (PreK ESE) Program or other community programs or services and, who at age five, will be exiting the Part B/PreK ESE Program and entering Kindergarten in Polk County. These procedures are based on the *Technical Assistance Paper 2007-160: Transition from Early Steps to the School District Prekindergarten Program for Children with Disabilities or Other Programs (Florida Departments of Education and Health, October 10, 2007)* and evidence-based practice for transition in early childhood. They are designed to:

- Support timely notification, transition planning and conferences, completed referral information, collaborative evaluations to determine eligibility and report child outcomes, and the development and implementation of an IEP by the child's third birthday;
- Promote family engagement/involvement; and
- Ensure that the partners are in compliance with federal and state requirements for transition at age three and at kindergarten, including confidentiality of information.

## II. Description of Partners:

The partners to these procedures are listed in alphabetical order and include community partners providing services to young children with disabilities, birth to kindergarten, in Polk County. The list of partners with contact information may be found in **Attachment 6**.

**A. Achievement Academy, Inc.** – provides a comprehensive program for children birth through six years of age who are at-risk for developmental delay or have an identified disability. The Achievement Academy has an **Early Intervention Program** and a **PreKindergarten Program**.

**1. Early Intervention Program** - provides services to children, birth to three, who are at risk for developmental delay or have an identified disability. Services are provided at home or in a center-based program with one-on-one sessions or in play groups. Funding is provided by United Way, IDEA/Part C, Medicaid, private insurance, foundations, grants, and community donations.

**Eligibility:** A child must be referred to Bay Area Early Steps and be found eligible for IDEA/Part C.

**2. PreKindergarten (PreK) Program** – provides services to children, 18 months to six years with an identified disability. The PreK Program is a Charter School that provides a full-day educational program for all enrolled children and physical therapy, occupational therapy, and speech therapy for those children who require related services. The Charter School has three locations in Polk County: Lakeland, Bartow, and Winter Haven. Funding is provided by the School Board of Polk County.

**Eligibility:** If under age three, the child must be eligible for IDEA/Part C and Bay Area Early Steps and have a current Individualized Family Support Plan (IFSP). If over age three, the child must be eligible for IDEA/Part B and have a current Individual Educational Plan (IEP).

For more information, <http://www.achievementacademy.com/>.

**B. Agency for Persons with Disabilities (APD), Central Region, Area 14 Office, Lakeland, Florida** – serves children, three years and older, and adults with developmental disabilities Hardee, Highlands, and Polk counties. APD coordinates and provides supports and services based upon individual need. Determination of



need is based upon "medical necessity", as defined by the Home and Community Based Services Waiver and available funds. Services available include, but are not limited to Support Coordination (case management services), Residential Habilitation Services, Adult Day Training, Behavioral Analysis Services, Supported Living Coaching, Supported Employment, Respite, Durable Medical Equipment, and Consumable Medical Supplies.

**Eligibility:** Individuals must be Florida residents, at least three years old, and have a developmental disability that occurred before the age of 18.

Eligible diagnoses include: Autism, Cerebral Palsy, Down Syndrome, Intellectual Disabilities, Prader-Willi Syndrome, and Spina Bifida. Children, three to five years of age, who are at "high risk" of having one of the stated diagnoses are also eligible for services, but must have their diagnoses confirmed by age five years in order to be eligible for continued services.

Children classified as "high risk" are not eligible for the Home and Community Based Services (HCBS) Waiver (Medwaiver). To determine eligibility, previous psychological and / or medical evaluations are required for validation. When needed, the APD can arrange for free diagnostic assessments to determine eligibility. The Florida Legislature determines funding for HCBS and FSL waiver services annually. At the present time, there is a waiting list for individuals who request waiver funding.

Families/Guardians may apply for services at their local APD area office. For more information, <http://apdcares.org/area/14/>.

**C. Agricultural and Labor Program, Inc., Polk County-** The Agricultural and Labor Program, Inc. (ALPI), headquartered in Lake Alfred, Florida is an IRS certified 501 (C) (3) private, nonprofit organization Community Action Agency. ALPI is a direct descendent of The Agricultural and Labor Project, established in 1968 by the Coca-Cola Company to improve the quality of life for farmworkers in their Florida citrus operations. Today, ALPI serves the total spectrum of socially and economically disadvantaged children and families throughout Florida. Since its inception, ALPI has continued to grow and to expand efforts to assist those persons that the organization was chartered to serve. This effort is continuous and will exist as long as there are persons needing services. ALPI serves families and children through the Family Services and Child Development Division with our Early Head Start and Head Start programs. ALPI is the grantee for Early Head Start.

**1. Early Head Start Program-** is a research based program that provides comprehensive child development and family support services to low-income families with children under three years of age and to pregnant women. The Early Head Start Program enhances the development of infants and toddlers, promotes healthy prenatal outcomes for pregnant women, and encourages healthy family functioning. The center-based program builds upon and responds to the unique strengths and needs of each child and family through developmentally appropriate activities for infants and toddlers, home visits, parent education, supportive services, and comprehensive developmental and health services for children and pregnant women. As in Head Start, parent involvement and community partnerships are imperative to the program's success.

**Eligibility:** Early Head Start is also a child development program primarily for low-income families who meet the federal poverty guidelines. Pregnant women and families with children under the age of 3 may apply. Children from families receiving public assistance (TANF or SSI) and children in the foster care system are also eligible



for Head Start services. The Head Start Program Performance Standards require that 10 percent of enrollment opportunities be made available to children with disabilities.

2. ALPI operates two center-based programs in Polk County:
  - a. Frostproof Child Developmental Center, 701 Hopson Road, Frostproof, FL33843
  - b. Jumpstart Development Center, 1068 Pine Avenue, Lake Wales, FL 33853

For more information, <http://www.alpi.org/Children.htm>

**D. Bay Area Early Steps** is part of the Children's Medical Services (CMS) network. The system offers early intervention services to families with infants and toddlers (birth to 36 months) who have developmental delays or an established condition likely to result in a developmental delay. Early Intervention services are based on the concerns, priorities, and resources identified by the child's family, as a member of their Individualized Family Support Plan (IFSP) team. Many types of specialized services are available through Early Steps for children found eligible and their families, such as:

- Screening for possible developmental delay;
- Multidisciplinary evaluations to determine eligibility;
- Development of the Individual Family Support Plan (IFSP);
- Intervention services and supports;
- Hearing and vision services;
- Service coordination;
- Assessment to monitor child and family outcomes; and
- Transition, including notification, planning, and transition conferences.

**Bay Area Early Steps** provides services in both Hillsborough and Polk Counties. Early Steps uses a Team Based Primary Service Provider approach which aims to empower each eligible family by providing a comprehensive team of professionals from the beginning of services through transition. The goal is for the family to receive strong support from one person, and for the family to have fewer appointments and more time to be a "family." Services are provided to the family and child where they live, learn and play, to enable the family to implement developmentally appropriate learning opportunities during everyday activities and routines. Most services will be early intervention home visits. The Early Steps system is administered by the Florida Department of Health, Children's Medical Services Network in accordance with Part C of the Individuals with Disabilities Education Improvement Act (IDEA 2004).

For more information, [http://www.cms-kids.com/families/early\\_steps/early\\_steps.html](http://www.cms-kids.com/families/early_steps/early_steps.html)

**E. Children's Medical Services (CMS) Primary Care** - a program of the CMS Network provides children with special health care needs a family-centered, comprehensive, and coordinated statewide managed system of care that links community-based health care with multidisciplinary, regional, and tertiary pediatric care. Children with special health care needs are those children under age 21 whose serious or chronic physical or developmental conditions require extensive preventive and maintenance care beyond that required by typically healthy children. Care is provided within its system through two basic models: the CMS Network/Managed Care and CMS Network/Traditional Care.

**Eligibility:** Eligibility for these two models is determined by medical, financial and age requirements. CMS is organized and operates under the authority granted to it by Florida Statute Chapter 391. For more information, [www.cms-kids.com](http://www.cms-kids.com)



**F. The Center for Autism & Related Disabilities at the University of South Florida** is a community-based project that provides information and consultation to individuals diagnosed with autism spectrum disorders and related disabilities. CARD serves children and adults of all levels of intellectual functioning who have autism spectrum disorder (including autism, Asperger's disorder, childhood disintegrative disorder, Rett's disorder, or pervasive developmental disorder not otherwise specified); an autistic-like disability (documented on an evaluation that describes the characteristics that are being considered "autistic-like" by the evaluator); a dual sensory impairment; or a sensory impairment with other disabilities. CARD-USF serves Florida families and professionals within the following counties: Charlotte, Collier, Desoto, Glades, Hardee, Hendry, Highlands, Hillsborough, Lee, Manatee, Pasco, Pinellas, Polk, and Sarasota. CARD's purpose is to enhance the lives of individuals by helping them become valued members of their communities. CARD-USF offers supports within the natural contexts of homes, residences, child care programs, schools and communities at no charge.

**Eligibility:** The Florida Legislature requires that CARD have documentation of a qualifying diagnosis in order for a child to receive services. For children aged 0 to 5 years, developmental delay with documented evidence of autistic-like behaviors is acceptable.

For more information, call Toll-Free 1-800-333-4530, email [card-usf@fmhi.usf.edu](mailto:card-usf@fmhi.usf.edu) or visit <http://card-usf.fmhi.usf.edu/>.

- G. Department of Children and Families (DCF), Central Region, Circuit 10** - provides the following services in Polk, Hardee, and Highlands Counties:
- 1. Abuse Hotline** - Conducts investigations of allegations of abuse and neglect of children under the age of 18 throughout the region. Within 48 hours of receipt of a hotline report, the investigator completes a child safety assessment on each child in the home to determine whether or not the child can remain safely in the home. If the child is removed from the home, children and families will be linked to child welfare services by the Child Protection Investigator (CPI), Resource Specialist, or the Diversion Counselor.

**Eligibility:** Children under the age of 18 who are at risk of abuse or neglect. Calls that don't meet criteria for abuse or neglect are screened and may be referred to Diversion or community agencies for follow up with the family. All referrals are accepted through the Abuse Hotline, telephone 1-800-96-ABUSE, FAX, or report online. For more information, <http://www.myflfamilies.com/service-programs/abuse-hotline/howtoreport>
- 2. Child Welfare** - Circuit 10 contracts with Heartland for Children, Inc. (HFC) (see listing on page 10), the community-based care agency, to provide child welfare services to children identified as at risk for further abuse or neglect. HCF provides services to children under the age of 18 and their families in the dependency system and includes the following programs: protective supervision, emergency shelter care, in-home services, foster care, adoption services, and independent living for children aging out of the foster care system. For more information, <http://www.myflfamilies.com/service-programs/community-based-care>

**Eligibility:** All children involved in the dependency system in the state of Florida. All referrals are generated through the Abuse Hotline.



- 3. ACCESS Florida** - Provides public assistance programs through the ACCESS, Automated Community Connection to Economic Self-Sufficiency. The ACCESS Florida Program provides enhanced access to Medicaid, Food Stamps and cash benefits through a state and community partnership network throughout Polk, Hardee, and Highlands counties. The community partnerships provide additional ACCESS portals to these services for clients mutually served by the partner agency and DCF. The system offers self-directed opportunities and 24/7 service through a web application and an integrated voice response system.

**Eligibility:**

- **Temporary Cash Assistance** – Provides cash assistance to families with children under the age of 18 or under the age of 19, if full time secondary school student that meets the technical, income, and asset requirements. The program helps families become self-supporting while allowing children to remain in their own homes.
- **Food Stamps** – The Food Stamp Program helps low-income individuals and families that meet the technical, income and asset requirements of the program to buy the food they need for good health.
- **Medicaid** – The Medicaid Program provides medical coverage to low-income individuals and families that meet the technical, income and asset requirements of the program. The Agency for Health Care Administration administers Medicaid services, while the Department of Children and Families determines Medicaid eligibility. For more information, <http://www.myflfamilies.com/service-programs/access-florida-food-medical-assistance-cash>

For more information on DCF, Central Region, Circuit 10, <http://www.myflfamilies.com/contact-us/region/circuit-10>

**H. Division of Blind Services (DBS)** – Blind Babies Program, under the State of Florida Department of Education, provides services to children, birth to 6 years of age, who are blind or visually impaired, to promote development and learning and support the transition from preschool to kindergarten. Specialists from DBS serve eligible children within the family, community, and educational settings. The following is a list of services available to eligible children and families:

- a. Advocacy;
- b. Coordination of early intervention and other related services;
- c. Guidance and counseling;
- d. Liaison services between family and other agencies;
- e. Loan of any current holdings of educational materials (e.g., brochures, books, videos, fliers regarding related trainings, and other related material), including Talking Books Library upon request of the family; and
- f. Participation and representation in IFSP and or IEP meetings when requested by the family.

Currently, early intervention services for young children who are blind or have visual impairments are contracted with the ***Lighthouse for the Blind***, 206 Avenue D, N.W., Winter Haven, FL 33881. Contract funding is provided through a general revenue allocation under F.S. 413.092, the Blind Babies Program.

**Eligibility:**

1. Presence of a bilateral visual impairment which, with best correction for that child, constitutes or results in a substantial limitation to the child's ability to learn, function independently, or to be successful in school and in the community.
2. A reasonable expectation that services may benefit the child and family in terms

of education, independence, and transition.  
For more information: [www.dbs.myflorida.com/parents/blind-babies-program.php](http://www.dbs.myflorida.com/parents/blind-babies-program.php).

**I. Early Learning Coalition (ELC) of Polk County** – provides funding and oversight for programs offered.

1. **School Readiness** - provides early education and care for eligible young children, birth to five and school-aged children. Children ages 0-11 can be served by self-referral, when funding is available. Children ages 0-13 will be served by referral from the Department of Children and Families (DCF) or CareerSourcePolk. Contact the ELC for eligibility information.
2. **Child Care Resource and Referral (CCR&R)** – provides education and assistance to parents in their search for quality child care. CCR&R maintains a comprehensive database of child care providers in Polk County, including licensed family child care homes, private child care centers, public school sites, after school programs, Voluntary PreKindergarten Programs, and faith-based centers. Families receive unbiased, computer-generated referrals for child care based on the family circumstances and preferences. CCR&R also has a “warm line” for child care providers to request assistance for inclusion.

**Eligibility:** All CCR&R services are free of charge.

3. **Quality Specialists** – provides training, technical assistance, and resources to providers, including developmentally appropriate practice, room arrangement, teach/child interactions, developmentally appropriate curriculum, and program quality enhancements.

4. **Voluntary PreKindergarten (VPK) Program** – a free education program for all four year olds in Florida. The Early Learning Coalition is the administrator for the VPK Program in Polk County and contracts with providers and the School Board of Polk County, Florida to provide VPK.

**Eligibility:** A child must be four years old by September 1 and reside in Florida.

For more information, <http://elcpolk.org/>

**J. East Coast Migrant Head Start Project** – prepares young children for educational success, especially the children of migrant and seasonal farm workers, by providing holistic, high quality early childhood services for families in a nurturing, culturally sensitive environment. ECMHSP arranges for the availability of Head Start services in two ways:

- a. Contracting with local social, health, and other organizations called delegate agencies; and
- b. Operating its own center-based programs, referred to as “Direct Services Programs”. The East Coast Migrant Head Start Project operates two center-based programs in Polk County:
  - La Familia Center, 351 Frederick Avenue, Dundee, FL 33838
  - Fort Meade Center, 107 6<sup>th</sup> Street SE, Fort Meade, FL 33841

**Eligibility:** Children ages birth to five years whose families qualify based on the federal poverty income guidelines and the federal definitions of migrant and seasonal farm workers.

For more information, [www.ecmhsp.org/](http://www.ecmhsp.org/)

**K. Healthy Families Polk** - a voluntary home visiting program designed to prevent child abuse and neglect by enhancing parents’ ability to create stable and nurturing home environments, promoting healthy childhood growth and development and ensuring that family social and medical needs are met. Home visiting services are available to expectant families and families of newborns who are at risk of poor birth



outcomes, abuse or neglect. A voluntary assessment is conducted to determine the need for Healthy Families services. If the assessment determines intensive home visiting services are needed, and the family volunteers to participate, a trained family support worker is assigned to the family to provide services. If Healthy Families Polk is at capacity and is unable to provide home visiting services to the family, Healthy Families Polk will provide referrals and information on community resources to the family, depending on their needs. The family support worker's responsibilities include:

- a. Conducting developmental assessments;
- b. Helping the family develop and work toward goals through the use of family support plans;
- c. Providing and following up on referrals to community resources
- d. Assessing the safety of the home environment;
- e. Linking families to medical providers and tracking immunizations and well-baby checks;
- f. Teaching awareness of child developmental milestones and supporting families in developing positive parent-child relationships; and
- g. Modeling positive adult-child interaction and effective coping skills.

Some families may need services beyond those offered through Healthy Families Polk home visiting. These services, such as domestic violence intervention, substance abuse treatment, psychiatric treatment and protective supervision, fall outside the scope of the Healthy Families Polk program. Healthy Families Polk relies upon strong partnerships in the community to provide these types of services.

**Eligibility:** Healthy Families Polk provides free home visiting services to eligible families in Polk County. Families with children prenatal to five years of age are eligible.

For more information, [www.healthyfamiliesfla.org](http://www.healthyfamiliesfla.org)  
or <http://www.healthyfamiliesfla.org/polk.asp>

- L. Heartland for Children, Inc. (HFC)** - is the local not-for-profit agency responsible for redesigning the foster care system in Polk, Hardee and Highlands Counties. Heartland for Children promotes the prevention of child abuse and oversees the provision of services for children who have been abused and/or neglected. These services include in-home family strengthening, adoption, case management, foster care and independent living. As the local Child Welfare Lead Agency for the Department of Children and Families (DCF), Central Region, Circuit 10, Heartland for Children is concerned with the safety and well-being of all children in our community. HFC contracts with local agencies for the provision of services to the children and families within the child protection system, and also works with the community as a whole to support the residents of the tri-county area. For more information, [www.heartlandforchildren.org/](http://www.heartlandforchildren.org/) or <http://www.myflfamilies.com/service-programs/community-based-care>

**M. Polk County Health Department**

- 1. Child Health** – provides well care, immunizations, sick care, and dental care to children under 21 years of age

**Eligibility:** Accepts Kid Care, Medicaid, Medipass, HMOs or if no insurance, services are available on sliding fee scale. For more information, <http://mypolkhealth.org/category/services/child-health/>

- 2. Healthy Start Coalition of Hardee, Highlands and Polk Counties, Inc.** - the mission of the Healthy Start Coalition of Hardee, Highlands, and Polk Counties, Inc. is to build community partnerships that promote and support

healthy pregnancies, babies and families in Hardee, Highlands and Polk Counties. Florida's Healthy Start Program was enacted by the Legislature from the late Governor Lawton Chiles. Healthy Start Coalitions work to address maternal and child health issues by planning and funding a service delivery system while providing quality assurance, advocacy, program development and increasing community awareness and involvement. The Healthy Start Coalition of Hardee, Highlands, and Polk Counties, Inc. is a partnership of community organizations and individuals funded through a contract from the State of Florida, Department of Health. Since 1992, the Coalition has accepted the responsibility for ensuring that maternal and child health services are available and accessible in the tri-county area. The goal of the Healthy Start Program is to give every baby a healthy start in life by ensuring moms receive prenatal care early, babies are born healthy, and infants and toddlers develop and thrive. The Polk County Health Department coordinates care for women with high risk pregnancies, post-partum women (for 3 years following their delivery), and infants and toddlers from birth to age three. Public health nurses and family support workers make home visits to provide families with the following services:

- Breastfeeding education and support;
- Childbirth education and interconceptional education and counseling;
- Family planning education and services;
- Health education (in English and Spanish);
- Referrals for mental health counseling;
- Parenting education; and
- Smoking cessation.

Families that participate in Healthy Start may receive bus passes to travel to medical appointments.

**Eligibility:** There is no cost for the Healthy Start Prenatal and Infant risk screens or program services. Healthy Start identifies women and infants at risk for poor outcomes through a confidential risk screening process.

For more information, [www.doh.state.fl.us/family/mch/hs/hs.html](http://www.doh.state.fl.us/family/mch/hs/hs.html)

- 3. Women Infants and Children Program (WIC)** – a special supplemental nutrition program for Women, Infants, and Children. WIC is available to pregnant, breastfeeding and postpartum women; infants; and children under 5 years of age. Eligibility is based on income and nutritional risk. Undocumented families are eligible to apply as long as they currently live in Florida. WIC clients receive checks which allow them to buy specific types and quantities of nutritious foods. These checks can be redeemed at approved grocery stores throughout Florida. Clients also receive nutrition counseling and education, breastfeeding support and referrals to other health and social service agencies. For more information, <http://mypolkhealth.org/category/services/wic-nutrition/>



**N. Redlands Christian Migrant Association (RCMA)** – is a non-profit, non-sectarian organization, which provides childcare, early childhood education, and support services for rural, low income, homeless, at-risk and migrant families. RCMA Early Head Start, Head Start, and Migrant programs serve children from 6 weeks to 5 years, pregnant women, and families. RCMA funding sources include Early Head Start, Head Start, Migrant Head Start, School Readiness, USDA Food Program, VPK, and United Way. RCMA operates three center-based programs in Polk County:

1. RCMA Mulberry CDC, 4441 Academy Drive, Mulberry, FL 33860
2. RCMA Madonia CDC, 4438 Academy Drive, Mulberry, FL 33860
3. RCMA Wahneta CDC, 1920 Gerber Dairy Road, Winter Haven, FL 33880

In addition to child care, children receive health and developmentally appropriate education services, which include:

- Health (vision, hearing, dental, nutrition and behavior) and developmental screenings;
- Referrals to community agencies;
- Disability service monitoring;
- Inclusion and transition planning; and
- Family and community partnerships.

Parents are recognized as their child's first teacher and therefore, encouraged to participate in education, family goal setting, and policy-making activities. Parent involvement is the cornerstone of Head Start, and services are available to help parents meet their goals in becoming self-sufficient. RCMA also provides comprehensive educational and family support services.

**Eligibility:** There are no fees for Head Start services. Enrollment is based upon family size and household income. In addition, family situations are taken into consideration. These include at-risk status, out of home placement (foster or relative care), migrant/farm worker, homeless, special health care needs and disabilities, high-risk pregnancy, and referrals from community agencies. Florida eligibility for VPK program applies. The Head Start Program Performance Standards require that 10 percent of enrollment opportunities be made available to children with disabilities. For more information, <http://rcma.org/>

**O. The School Board of Polk County, Florida** [known as the Local Educational Agency (LEA)]

1. **Florida Diagnostic Learning and Resources System Sunrise Associate Center (FDLRS Sunrise)** – one of a network of nineteen associate centers and five statewide specialized centers in Florida. FDLRS Sunrise provides public awareness, Child Find, screening, in-service training, technology, and parent services in Hardee and Polk Counties, as a support for school districts, families, and community organizations that serve children with disabilities, birth through twenty-one years of age. The FDLRS Statewide Initiative for Early Childhood Transition identifies the following required activities:
  - a. Develop collaborative written referral procedures;
  - b. Develop collaborative written Children's Registry Information System (CHRIS) procedures;
  - c. Develop collaborative written notice procedures; and
  - d. Facilitate Interagency Transition Procedures development and monitoring.

For the purposes of these procedures, FDLRS Sunrise/Child Find supports Bay Area Early Steps and the school district in the transition of children from Part C to the Part B Prekindergarten Disabilities Program in Polk County.

For more information <http://fdlrs.polk-fl.net>

Polk County June 1, 2015 – May 31, 2018



## 2. PreKindergarten Exceptional Student Education (PreK ESE) Program

- serves children, ages three through entrance into kindergarten, who have been determined eligible to receive IDEA, Part B/Section 619 services based on criteria under the State Board of Education Rule. The PreK ESE Program provides a Free Appropriate Public Education (FAPE) in the least restrictive environment (LRE) through a continuum of placement options. For more information <https://www.polk-fl.net/districtinfo/departments/learningsupport/ese/prek.htm>

## 3. Preschool Programs

**a. Florida First Start** – a home-school partnership designed to give children at-risk of school failure the best possible start in life and to support partners in their role as their children’s first teachers. Emphasis is on enabling families to enhance their children’s cognitive, physical, communication, and social-emotional development by involving parents in their children’s education in the first three years of life. Through early parent education and support services, the program lays the foundation for later learning and future school success, while fostering effective parent/school relationships.

**Eligibility:** Children from birth to three years of age who have a disability or are at-risk of school failure and their families. Families must be identified as economically at-risk and reside in the neighborhood of the Family First Start Parent Resource Centers.

For more information, <http://www.polk-fl.net/parents/preschool/firststart.htm>

**b. Head Start Program** – promotes healthy child development, social-competence, and school readiness for low-income children, 3-5 years of age, and their families. Federal standards require that Head Start services are designed to meet the needs of families in the community and are planned and delivered in collaboration with other local programs, including those serving children with disabilities. Head Start offers comprehensive child development services through center-based, home-based, or a combination of program options that includes health, mental health, nutrition, parenting education and family support services.

**Eligibility:** Families meeting household income and federal poverty guidelines may be eligible. The Head Start Program Performance Standards require that 10 percent of enrollment opportunities be made available to children with disabilities. For more information, <http://www.polk-fl.net/parents/preschool/headstart.htm>

**c. School Readiness** – is funded through a contract with the Early Learning Coalition (ELC) of Polk County. The PreK School Readiness Program provides a safe, nurturing environment for at-risk three and 4 year old children and is designed to meet the child care needs of diverse families. The curriculum is based on the *Florida Early Learning and Developmental Standards (2011)*.

**Eligibility:** Priority is given to children of working families meeting 150% of Federal Poverty Guidelines. Fees are determined on a sliding fee scale, according to the number of people and household income, as determined by the ELC of Polk County. Four year olds are given priority over three year olds. Children must be three years old on or before September 1 of the school year for which they are applying. Typically, there are 18-20 spaces for eligible children in each classroom. Families may decide not to apply for state subsidy and pay for the PreK School Readiness Program. When all spaces are filled, children are placed on a waiting list for their

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school zone. For more information, <http://www.polk-fl.net/parents/preschool/schoolreadiness.htm>

- d. **Teen Parent Program** - is a voluntary, specialized program designed to meet the needs of pregnant and parenting teens and their children. In addition to academics and parenting education, ancillary services include free child care, transportation, coordinated health and social services for parents and their young children, 2 weeks to four years of age. The program is available at the students' home school or three specialized teen parent programs, as follows:

- Triviss Teen Parent Program, 3225 Winter Lake Road, Lakeland, FL 33803
- Ridge Teen Parent Program, 7700 State Road 544, Winter Haven, FL 33881
- Haines City High School Teen Parent Program, 2800 Hornet Drive, Haines City, FL 33844.

**Eligibility:** Pregnant and parenting students who are enrolled in a K-12 Polk County Public Schools are eligible to participate in the Teenage Parent Program. Pregnant students must present a medically documented proof of pregnancy. Parenting student must present the child's birth certificate or other official medical record(s) of the child's birth. Teenage fathers, who are currently enrolled students, are also encouraged to participate in the Teen Parent Program. Documentation of fatherhood must also be presented. A child's birth certificate, with the father's name documented or a notarized affidavit of fatherhood is acceptable.

- e. **Voluntary Prekindergarten (VPK) Program** – prepares four year old children in Polk County for successful entry into kindergarten by focusing on early literacy. The School Board of Polk County offers a number of different models of VPK Programs. Most VPK Programs begin at the start of the second semester of the school year and provide 540 hours of service. Other 540 hour models include classrooms that provide a 3-hour morning or afternoon program for 180 days; collaborative programs with Head Start; or a 3-hour morning program combined with a parent-fee program in the afternoon. A 300 hour summer program is required by law. The curriculum for the VPK Program is based on the *Florida Early Learning and Developmental Standards (2011)*.

**Eligibility:** The child must reside in Florida and be 4 years old on or before September 1 of that school year to be eligible to attend the VPK Program. For more information, <http://www.polk-fl.net/parents/preschool/voluntaryprek.htm>

- f. **Title 1 VPK** - Title 1 (No Child Left Behind) provides supplemental resources and services to high poverty schools. Title 1 VPK students must be zoned to attend kindergarten at the Title 1 school.

**Eligibility:** Students must be 4 years old on or before September 1<sup>st</sup>, and have a VPK certificate.

- P. Other agency that may participate in these interagency procedures for early childhood transition:

1. **Our Children's Academy Charter School**
2. **Resources: Technical Assistance and Training System (TATS)**  
[www.tats.ucf.edu](http://www.tats.ucf.edu), and **Florida's Transition Project**  
[www.floridatransitionproject.com](http://www.floridatransitionproject.com)

### **III. Requirements Impacting the Procedures**

The agencies participating in these procedures have statutory requirements, which may impact the manner in which they participate in transition.

Requirements include:

1. Agency for Persons with Disabilities, 393.064, Florida Statute (F.S.)
2. American's with Disabilities Act Amendment Act (ADAAA), Public Law 110-325;
3. Blind Babies Legislation Section 413.092, F.S.
4. Child Care Resource and Referral – and Warm Line 402.3018 F.S.
5. Children's Medical Services, Chapter 391, F.S.
6. Department of Children and Families – s.409.175, F.S.; Chapters 65C-13 – 16, Chapters 65C-28 – 30, F.A.C.; Chapters 39, 63, and 409, F.S. and Title IV-B and IV-E of the Social Security Act, as amended.
7. Early Steps, Policy Handbook and Operations Guide
8. FDLRS, Required Center Operating Procedures
9. Head Start - Public Law 110-134, Improving Head Start for School Readiness Act of 2007
10. Healthy Families 409.153 F. S.
11. Healthy Start Care Coordination 64F-3, FAC, 383.011 F.S.
12. Individuals with Disabilities Education Improvement Act (IDEA) 2004, Public Law 108-446, Part C and Part B
13. School Health Services Act 381.0056 F.S.
14. School Readiness Act, Chapter s.1002.81-1002.97 F.S. (Warm Line, Child Care Resource and Referral)
15. State Board of Education Rules, Chapter 6A-6, Special Programs for Exceptional Students, F.A.C.
16. Transfer of Assistive Technology, 1003.575, F.S.
17. Voluntary Prekindergarten (VPK) Act: Part V of Section 1002, F.S. A definition of related terms is included in **Attachment 1.**

### **IV. Activities, Procedures, and Timelines – Children Birth to Three Years of**

#### **A. Public Awareness Activities**

1. All partners to the Early Childhood Community Procedures for the Transition of Young Children with Disabilities who provide health, education, and/or social services to infants/toddlers engage in public awareness activities, targeting families, professionals, businesses, and other members of the community to provide information on promoting healthy development, preventing developmental delay, accessing intervention, including quality early care and education programs; supporting and nurturing families; and other resources for young children in Polk County.
  - a. These public awareness activities may include posting information on websites; distributing brochures and flyers; hosting special events; participating in community health/resource fairs; sharing educational books/materials through lending libraries; and/or purchasing public service announcements (e.g., newspaper, radio, television).



## B. Screening and Identification

1. These partners will inform families of their policy for developmental screening and early identification, including consent for screening at the time the infant/toddler is enrolled in the program.
  - a. All infants/toddlers attending family home care or early care and education programs affiliated with the Early Learning Coalition of Polk County; Early Head Start Programs provided by ALPI, East Coast Migrant Head Start Project, and Redlands Christian Migrant Association; or Heartland for Children and suspected of having a developmental delay or disability will be screened using the *Ages and Stages Questionnaire-3* and/or the *Ages and Stages Questionnaire-Social Emotional* within 45-calendar days of entry to the program.
  - b. If the initial score in any domain on the ASQ-3 is BLACK and/or ABOVE THE CUT SCORE on the ASQ-SE, the program will immediately refer the child to Bay Area Early Steps.
  - c. A child with an initial score of GRAY in any domain on the ASQ-3 or BELOW THE CUT SCORE on the ASQ-SE will receive an Individualized Learning Plan (ILP), which includes targeted ASQ-3 Learning Activities.
  - d. The program will arrange for a consultant (e.g., Inclusion Specialist/Behavior Specialist/Disability Specialist) to:
    - Complete an observation of the child in the classroom;
    - Assist the teacher in identifying the targeted developmentally appropriate ASQ-3 Learning Activities;
    - Develop an Individualized Learning Plan (ILP);
    - Engage the family; and
    - Demonstrate to the both the teacher and family the targeted activities to support the child's development and learning.
  - e. The teacher/family will implement the ILP, intentionally teaching the targeted ASQ-3 Learning Activities, and monitor the child's progress for two (2) to three (3) months.
  - f. After two (2) to three (3) months of implementing the ILP, the program will re-screen the child, using the ASQ-3 and ASQ-SE, if necessary. If the score continues to be GRAY in any domain on the ASQ-3 and/or BELOW THE CUT SCORE on the ASQ-SE the practitioner/program will immediately refer the child to Bay Area Early Steps.
  - g. The family will be involved in a discussion of the results of all screening/re-screening, ILPs, and/or referral.

## C. Referral to Part C/Early Steps

1. IDEA 2004, Part C requires that referrals for infants/toddlers, birth to 36 months, be made as soon as possible, but in no case, more than seven calendar days after identifying a child who may have an established condition or a developmental delay.
2. Young children, **birth to 36 months**, with developmental concerns may be referred to Bay Area Early Steps by their family or a community agency/program. The partners to the *Early Childhood Community Procedures* referring infants/toddlers to Early Steps may use the *Early Steps Program Referral Form*. A copy of the *Referral Form* may be found in **Attachment 2**. The policies and procedures for transition at three will be discussed with the family and, with their



permission, children older than **34.5 months** will be referred directly to FLDRS Sunrise/Child Find.

3. With the family's signed Early Childhood: Consent for Release of Information, the referring agency/program will include a copy of the screening results with the referral to Bay Area Early Steps. A copy of the Consent for Release of Information may be found in **Attachment 3**.
4. Bay Area Early Steps will make initial contact with the family within five (5) calendar days from the date the referral is received. If Early Steps has difficulty contacting the family, the Service Coordinator will request assistance in locating the family from the referring agency/program.
5. A Service Coordinator will be assigned to the family and must conduct the face-to-face **First Contact** during the first forty-four (44) days of the family's involvement with Early Steps.
6. During the **First Contact**, the Service Coordinator will meet with the family to (a) explain the Bay Area Early Steps Program; (b) complete the paperwork, including release of information and consent forms; (c) conduct developmental screening, if necessary (infants/toddlers with an established condition do not require a developmental screening or Early Steps may have received a screening from the referring agency/program); (d) complete a voluntary family assessment; (e) provide contact information for the Family Resource Specialist; and (f) assist the family in planning for the evaluation and assessment.
7. The Service Coordinator will provide the IFSP team members with a summary of the first contact information, including the results of the developmental screening and schedule an initial evaluation and assessment. Infants/toddlers with an established condition do not require an initial evaluation, as they are eligible for Part C/Early Steps. However, an assessment must be completed on all young children with an established condition.
8. The Battelle Developmental Inventory – 2<sup>nd</sup> edition (BDI-2) will be used to conduct the initial evaluation. The initial assessment will be conducted in an arena and may include the BDI-2, Hawaii Early Learning Profile for Infants and Toddlers (HELP), Early Learning Accomplishment Profile (ELAP), or the Assessment Evaluation and Programming System for Infants and Children (AEPS).
9. An infant/toddler with an established condition or developmental delay (e.g., visual impairment or autism spectrum disorder) may require additional assessment instruments such as, but not limited to, the Language Development Scale (LDS), Auditory Skills Checklist, Preschool Language Scale (PLS-5), Vineland Adaptive Behavior Scales, Assessment of Basic Language & Learning Skills (ABLLS-R), Transactional Supports (SCERTS), and/or Individual Growth and Developmental Indicators (IGDI).

**D. Referral to Part C/Bay Area Early Steps from Department of Children and Families (DCF)/Heartland For Children, Inc.** Children from birth to thirty-six months who have been determined to be victims of "substantiated" cases of child abuse or neglect, as defined by the 2011 Florida Statutes, Title V, Chapter 39, Proceedings Related to Children will be referred to Bay Area Early Steps, according to the following criteria:

1. Children who will remain in their parents' or legal guardian's home without referral to Heartland For Children, Inc., the Community-Based Care (CBC) agency for services will be referred to Bay Area Early Steps by the Child Protective Investigator (CPI) handling that case. This will be done by completion of the referral form CF FSP 5322- CAPTA REFERRAL FOR BAY AREA EARLY STEPS, within 48 hours of the abuse or neglect being verified.

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- The completed form will be delivered to Bay Area Early Steps via facsimile, electronic mail that is encrypted or protected by a password, or by mail.
2. Children who will remain in their parents' or legal guardian's home and are referred to Heartland for Children, Inc. for services, may also be referred to Bay Area Early Steps by the child welfare case worker at Heartland for Children, Inc., if the following criteria is met:
    - a. A referral to Bay Area Early Steps will occur during the child welfare case plan development process when there is an indication that the child may have an established condition or developmental delay. This will be accomplished by completion of the referral form CF FSP 5322- CAPTA REFERRAL FOR EARLY STEPS, within 48 hours of the child's established condition or possible developmental delay being identified. The form must include the reason for referral.
    - b. The form will be delivered to Bay Area Early Steps via facsimile, electronic mail that is encrypted or protected by a password, or by mail.
  3. Children who are being placed into temporary care for referral to Heartland for Children for out-of-home care placement will receive an initial assessment during the child welfare case plan development process and may be referred to Bay Area Early Steps. The case worker for Heartland for Children, Inc. will ensure that recommendations are included in the child welfare case plan in accordance with the following criteria:
    - a. Children who are not referred for a Medicaid Comprehensive Behavioral Health Assessment will be referred to Bay Area Early Steps by the child welfare case worker during the case plan development process for the child. The referral form, CF FSP 5322- CAPTA REFERRAL FOR EARLY STEPS, will be completed by the child welfare case worker, who will also ensure the child's case plan reflects the referral. When completed, the referral form will be delivered to Bay Area Early Steps via facsimile, electronic mail that is encrypted or protected by a password, or mail.
    - b. Children who are referred for a Medicaid Comprehensive Behavioral Health Assessment will also be referred to Bay Area Early Steps by the child welfare case worker at Heartland for Children, Inc., if the child's Comprehensive Behavioral Health Assessment notes that the child may potentially have a developmental delay or an established condition. The referral to Bay Area Early Steps will be reflected in the child's case plan. Once completed, the form will be delivered to Bay Area Early Steps via facsimile, electronic mail that is encrypted or protected by a password, or mail. The Bay Area Early Steps referral form must be accompanied by the Medicaid Comprehensive Behavioral Health Assessment that indicates the child shows indications of possible developmental delay or has an established condition.
  4. Bay Area Early Steps will screen and evaluate all children referred by Heartland for Children, Inc., in accordance with the current Early Steps, Policy Handbook and Operations Guide. When a child is referred to Bay Area Early Steps from a child welfare case worker, the information on the outcome of the child's screening and evaluation and any recommended services on the child's Individualized Family Support Plan (IFSP) will be forwarded by the Bay Area Early Steps Service Coordinator to Heartland for Children, Inc. for consideration in development of the child's case plan.
  5. Heartland For Children, Inc. will follow-up with Bay Area Early Steps to determine if the child was found eligible for Part C and support the



participation of eligible children's families. This support may include the following:

- a. Assistance with transportation, if necessary;
- b. Provision of written information about Bay Area Early Steps;
- c. Follow-up with the family to encourage their child's participation in Bay Area Early Steps; and
- d. Participation in meetings (in person or by conference call).

#### **E. Evaluation/Determination of Eligibility for Part C/Early Steps**

1. The evaluation and/or assessment for determination of Part C eligibility must be completed within 45 days of the date the referral is received by Bay Area Early Steps.
2. Bay Area Early Steps will obtain written consent for the evaluation and/or assessment and provide the family, in their native language (unless it is not feasible), with written prior notice of the scheduled date for the evaluation and/or assessment.
3. A comprehensive, developmentally and culturally appropriate evaluation and/or assessment by a multidisciplinary team will be conducted using the Battelle Developmental Inventory, 2<sup>nd</sup> Edition (BDI-2), which includes the communication, cognitive, physical (gross and fine motor, vision and hearing), self-help/adaptive, and social-emotional domains and other discipline specific evaluations, as necessary.
4. The evaluation and/or assessment must include opportunities to observe the child in typical routines/activities. The assessment will include the child's strengths and unique needs in each of the developmental areas and the services appropriate to meet those needs, as well as the family's resources, priorities, and concerns and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child with a disability.
5. A child with a developmental delay is eligible for Part C/Early Steps if the standard score on the initial BDI-2 is 1.5 standard deviations (SD) below the mean (78) in two domains or 2.0 SD below the mean (70) in one domain. If the standard score on the initial BDI-2 does not meet the criteria for Part C/Early Steps, the child may be found eligible if the developmental delay is documented by other assessments and/or sources of information. All children with established conditions are eligible for Part C/Early Steps.
6. The results of the initial evaluation and/or assessment will be documented on the Individual Family Service Plan (IFSP).
7. Unless the family requests otherwise, the Bay Area Early Steps will conduct the IFSP meeting immediately following the evaluation/assessment. Bay Area Early Steps has thirty (30) calendar days from the date authorized on the IFSP to begin providing services to the child/family.
8. Bay Area Early Steps will conduct an annual review of the child's IFSP. **For children with developmental delay based on BDI-2 standard scores**, the determination of continued eligibility for Part C/Early Steps will take place during the annual (12-month) review of the IFSP. **For children with developmental delay based on the BDI-2 and other assessments and/or sources of information**, the determination of continued eligibility for Part C/Early Steps must occur, with parental consent, within 6-months of the date of the IFSP.
9. If the child does not qualify for Part C, the Service Coordinator will provide instruction to the family on the ASQ-3 Learning Activities and, with parent consent, FAX a copy of the IFSP, Form A, B, C, and D (including ASQ-3



Learning Activities) to the early care and education program, if enrolled. Bay Area Early Steps may also provide the family with information on other early childhood programs, services, and resources in Polk County.

#### **F. Notification**

Bay Area Early Steps is required to notify the school district of all children who "will shortly reach the age of eligibility" [PL 108-449, Section 637(a) (9) (A) (ii) (I)] for preschool services under Part B to assist the school district in program planning. Notification will also be provided to the Florida Department of Education on a monthly basis, as required.

1. At the time **the child is determined eligible for Part C**, Early Steps will discuss with the family the policy for sharing personally identifying information with the LEA. For children who become eligible for Early Steps prior to their 2nd birthday, the LES will provide a copy of the brochure, Understanding Notification to the family prior to the IFSP meeting or periodic review closest to the child's 2nd birthday. For children who become eligible for Early Steps after their 2nd birthday, Early Steps will provide a copy of the Understanding Notification on the date the child is determined eligible for Part C. A copy of Understanding Notification is included in **Attachment 4**.
2. After reading the brochure, a family may decide to opt-out of notification (provided in writing). Early Steps will document the family's decision on the IFSP, Form I, continue to discuss notification, and **immediately before 27 months of age**, again provide the family with a copy of the brochure, Understanding Notification and the option to share personally identifying information with the LEA.
3. Early Steps will document in the child's record and in the data system the following information: the date the parent was informed of the intent to provide notification to the LEA, whether the parent chose to opt-out of notification, and the date notification was provided to the LEA.
4. Monthly notification to the LEA will include: the name of the Early Steps Service Coordinator; the child's name; date of birth; and family contact information (i.e., name, address, phone number, and email).
5. During the **first week of each month**, Early Steps will provide notification to the LEA (and the Florida Department of Education) with a list of all children eligible for Part C who will be **27 months of age** in that month and those children, **28-34.5 months**, who, in the previous month, were either referred to Early Steps and found eligible or for whom the LEA received notification and were determined, through the process of re-determination, to no longer meet eligibility for Part C. Early Steps will also report the number of families of children **27 months of age** who elected to opt-out of notification.
6. The Early Steps and the LEA will meet monthly to review and plan for all children, **aged 27-34.5 months**, included on the notification list. The discussion each month will include:
  - Specific plans to address receipt of late exit BDI-2 for children who enter Early Steps between **28-29 months of age**;
  - Review status of children referred for transition and later re-determined not eligible for Part C by Early Steps; and
  - Prioritize and schedule an evaluation for children who enter Early Steps between **32-34.5 months**.

**G. Transition Planning**

1. Between **27-36 months** of age, the Early Steps Service Coordinator will meet with the family to discuss transition planning. The discussion will include options for services in the community; specific concerns and skills required to prepare the child for transition; and plans for the transition conference.
2. During transition planning, the family may or may not inform Early Steps of their choice for potential services after the child turns three. A family may decline or consent to a referral to the LEA during transition planning.
3. The Early Steps Service Coordinator will document on *IFSP, Form I* all information (e.g., outcomes of transition planning/conferences; family decisions; assigned responsibilities and timeline for gathering information to complete the Transition Referral Packet) necessary to support the child’s transition. *IFSP, Form I* will also be used to provide an update to the LEA at the monthly transition planning meeting

**H. Transition Conference**

The transition conference may be held up to nine months (at 27 months of age) prior to the child’s third birthday, but must be held not less than three months (or at 33 months of age) before the child’s third birthday [PL 108-446, Section 637(a)(9)(ii)(II)].

1. Early Steps will complete a transition conference on all children potentially eligible for Part B, including children, birth to three, served in charter schools in Polk County.
2. The parent (if available), Child Welfare Case Manager, the foster parent and Guardian Ad Litem representative, if appointed, will be invited to participate in the transition conference for a child who is in a licensed out-of-home-care placement.
3. Early Steps will obtain written or verbal consent from the family for the transition conference. If the consent is verbal, the Early Steps Service Coordinator will document consent in the child’s record.
4. The LEA will provide Early Steps with a quarterly calendar of dates a representative is available for transition conferences. When possible, the transition conference should take place in conjunction with the regularly scheduled IFSP meeting.
5. Between **30-33 months** of age, Early Steps Service Coordinators will schedule a transition conference with the family and notify the LEA by FAX with a copy of the list of children scheduled for each date. The LEA will review and finalize all dates for transition conferences. Early Steps will inform the LEA in advance of any changes in the schedule for transition conferences.

Birthday	Notification to LEA (27 m)	Transition Planning (27-33 m)	Transition Conferences (30-33 m)	Exit BDI-2 (33 m)	Staffing 3 <sup>rd</sup> BD (35-36m)
January	April	Apr – Oct	July - Oct	Oct	Dec – Jan
February	May	May – Nov	Aug - Nov	Nov	Jan – Feb
March	June	June – Dec	Sept - Dec	Dec	Feb – Mar
April	July	July – Jan	Oct - Jan	Jan	Mar – Apr
May	August	Aug – Feb	Nov – Feb	Feb	Apr – May
June	September	Sept – Mar	Dec - March	March	May – June
July	October	Oct – April	Jan – April	April	June



August	November	Nov – May	Feb – May	May	June
September	December	Dec – June	March - June	June	Aug – Sept
October	January	Jan – July	April - June	June	Sept – Oct
November	February	Feb - Aug	May - Aug	Aug	Oct – Nov
December	March	Mar – Sept	June - Sept	Sept	Nov – Dec

6. With consent of the family, Early Steps may share additional information needed by the LEA to ensure a successful transition, including a copy of the most recent evaluation and/or assessment of the child, the family assessment, and a copy of the most recent IFSP, which has been developed and implemented. Sharing of such information prior to the transition conference does not constitute a referral to the LEA.
7. The transition conference will include information about the Part B/ PreK ESE Program; other community supports and services; family concerns regarding transition and activities to address these concerns; skills necessary to support child’s transition; assigned responsibilities with timelines; and any additional activities which must be completed.
8. The Early Steps Service Coordinator will review the IFSP developed during transition planning and add any pertinent child/family information to the IFSP, Form I, including the assigned responsibility for gathering any additional referral information and the plan for completing an “exit” BDI-2 **at 33 months**.
9. A family may decline to consent to the LEA’s participation in the transition conference. Early Steps will document the family’s decision on the IFSP, Form I and notify the family that should they decide to explore school district options at **36 months or older**, Early Steps will refer the family to FDLRS Sunrise to initiate the Child Find process.

**I. Referral to LEA**

Referral is the formal process by which the child and family are referred by Early Steps, with parent consent, to the LEA to determine eligibility for the Part B Pre-Kindergarten ESE Program.

1. With written parent consent, Early Steps may refer children to the LEA either before, during, or after the transition conference. The consent form for release of information to the LEA must list the specific documents that will be provided to the LEA at the time of referral, including the BDI-2.
2. If referred prior to the conference, the Early Steps Service Coordinator will provide the LEA with a copy of the Transition Referral Packet **no later than one week prior to the transition conference**.
3. With parent consent, all information in the Early Steps record related to screening, evaluation and assessment, eligibility determination, development and implementation of the IFSP or provision of services generated from outside sources through a contract with Early Steps may be included in the Transition Referral Packet for the LEA.
4. The Transition Referral Packet must be completed **by the time the child is 34 months** and will include a cover sheet and a copy of:
  - Child’s birth certificate, if available; Note: Early Steps will request that the family bring the child’s birth certificate to the transition conference. This will be documented in the IFSP, Form I. For children transitioning from Part C and found eligible for Part B, the birth certificate is required for enrollment in the PreK ESE Program in Polk County.
  - Written parental consent for release of information;

- Current IFSP, including *Form I*;
  - Hearing and vision screening or other medical reports (e.g., audiology) completed within the previous 12 months;
  - All therapy evaluations and other assessments completed within the previous 12 months; and
  - Entry and exit BDI-2.
5. To ensure that the Transition Referral Packet is completed by **34 months**, Early Steps will administer the exit BDI-2 at **33 months** (except for those children who, at 33 months, do not have an IFSP that has been in effect for at least 6 months), immediately enter the item scores in the BDI-2 Data Manager, and FAX a copy of the exit BDI-2 directly to the PreK ESE Program. The copy of the exit BDI-2 may include *IFSP, Form E*, the protocol and score sheet, the Comprehensive Report or Test Record Report from the BDI-2 Data Manager.
  6. If, at the time of a 6- or 12-month re-determination, the IFSP Team determines that child is no longer eligible for Part C, Early Steps will document the termination date on the *IFSP, Form I*, close the child's record, enter the appropriate disposition code, and immediately notify the PreK ESE Program. The PreK ESE Program will review the child's record, including the exit BDI-2 at the next monthly transition meeting to determine if the child is potentially eligible for Part B or if further evaluation is required.
  7. If, at the time of the exit BDI-2, the IFSP Team determines that all of the goals/outcomes have been achieved and family has no further concerns related to their child's development and learning, the termination date will be documented on the *IFSP, Form I* (as part of the transition plan). Early Steps will immediately notify the PreK ESE Program, close the child's record, and enter the appropriate disposition code.
  8. FDLRS Sunrise/Child Find will assist the LEA in the following activities:
    - Enter or update information in the CHRIS data base;
    - Conduct a final review of the Transition Referral Packet for completeness and follow-up, if necessary;
    - Provide an information packet to the family at the transition conference, including the release of information and any other pertinent information required by the School Board of Polk County, Florida or mail the information packet to the family, if they are unable to attend the face-to-face meeting; and
    - Participate in the Transition Conference with the family, Early Steps Service Coordinator, LEA representative, and other community providers, as appropriate.

**J. Evaluation/Determination of Eligibility/Development and Implementation of IEP by the Child's Third Birthday**

The LEA is responsible for determination of eligibility for the Part B/ PreK ESE Program and the development and implementation of an IEP by the child's third birthday.

1. The LEA will review the completed Transition Referral Packet to determine if further evaluation is required for the determination of eligibility. If additional evaluations are needed, the LEA will obtain parent consent, discuss procedural safeguards, and schedule the evaluation. If no further evaluation is required and eligibility may be determined from information in the Transition Referral Packet, the child's record will be forwarded directly to the Staffing Specialist to be scheduled for staffing.



2. The LEA will schedule an eligibility staffing meeting **no later than 35 months** for children referred to LEA from Part C who are potentially eligible for Part B. The determination of eligibility will involve a review of the completed Transition Referral Packet, including exit BDI-2, and any additional evaluations conducted by the LEA.
3. Bay Area Early Steps will inform the family that they can request participation of the Service Coordinator at initial IEP meeting.
4. For the child who is in a licensed out-of-home-care placement, the parent (if available), Family Service Counselor, the foster parent and Guardian Ad Litem representative and/or Surrogate Parent, if appointed, should be invited to participate in the IEP meeting.
5. LEA will develop and implement an IEP by the child's third birthday for all children determined to be eligible for Part B.
6. Extended School Year (ESY) services are provided if the child's IEP team determines, on an individual basis, that the services are necessary for the provision of free appropriate public education (FAPE). This determination is made by the IEP team. It is acceptable to wait until the beginning of the school year to initiate the services on the IEP when a decision is made that ESY services are not needed.
7. If the child is not eligible for the Part B/ PreK ESE Program, the LEA will provide the family with ASQ-3 Learning Activities to support their child's continued development and learning. The LEA will recommend to the family that they contact their Early Steps Service Coordinator for further information about other community programs and services. With parental permission, Early Steps may refer a child who was found not eligible for the Part B/ PreK ESE Program to Head Start, early care and education programs, or other community options, as determined by the IFSP team. All referral information will be documented on the *IFSP, Form I*. The LEA may offer the family additional information about early childhood resources.
8. The LEA will notify Early Steps of the outcome of the eligibility staffing for all children at the monthly transition planning meeting. Early Steps will record the appropriate disposition code for transition in their data system. A copy of the National Early Childhood Technical Assistance Center (NECTAC), Early Childhood Transition from Part C to Part B: Timeline Requirements may be found in **Attachment 5**.

## **K. Special Circumstances**

### **1. Holidays, School Breaks in Instruction, Summer Birthdays**

- a. When a child turns three years old during a time that school is not in session (e.g., holidays, school breaks, or summer), the LEA continues to have the obligation to have an IEP developed and implemented by the child's third birthday.
- b. The LEA will conduct an eligibility staffing meeting, including the development and implementation of an IEP, as appropriate, by the child's third birthday.
- c. All IEP meetings for children with summer birthdays will be held prior to the end of the school year or, if necessary, special arrangements will be made for staffing during June, July, and August.

## 2. Late Referrals

### a. Referrals to Early Steps between 32 months and 34.5 months (45 calendar days) prior to the child's third birthday

- If the child is referred to Early Steps between **32-34.5 months** (between 120 and 45 calendar days) prior to the child's third birthday, Early Steps will immediately notify the LEA of the late referral.
- These late referrals to Early Steps will be reported on the notification list and discussed at the monthly transition planning meetings to obtain consensus on the plan to complete the evaluation, determine eligibility, and develop and implement the IEP by the child's third birthday.
- If the child and family are a "no show" to the scheduled evaluation, Early Steps will continue to attempt to contact the family. If Early Steps is unable to contact the family and schedule an evaluation before the child is **34.5 months**, Early Steps may close the referral to Part C and make a referral to FDLRS Sunrise to initiate Child Find.

### b. Referral to Early Steps 34.5 months (45 calendar days) prior to the child's third birthday

- If a child is referred to Early Steps at **34.5 months or older** (45 calendar days or less prior to the child's third birthday), Early Steps will discuss transition from Part C to Part B with the family and, with their consent, make a referral to FDLRS Sunrise/Child Find to initiate Child Find.

## 3. Eligible Part C/Early Steps children referred to LEA for speech only

- a. If a child referred from Early Steps to the LEA is potentially eligible for the Part B/ PreK ESE Program based on the disability category of Speech-Impaired, the Transition Referral Packet will be reviewed by the LEA, including a Speech-Language Pathologist who will be assigned to complete the appropriate evaluations, participate in a staffing meeting, and develop an IEP by the child's third birthday.

## V. Activities, Procedures and Timelines-Transition of Preschool Children 3-5 years

### A. Public Awareness Activities

1. All partners to the *Early Childhood Community Procedures for the Transition of Young Children with Disabilities* who provide health, education, and/or social services to infants/toddlers engage in public awareness activities, targeting families, professionals, businesses, and other members of the community to provide information on promoting healthy development, preventing developmental delay, accessing intervention, including quality early care and education programs; supporting and nurturing families; and other resources for young children in Polk County.
2. These public awareness activities may include posting information on websites; distributing brochures and flyers; hosting special events; participating in community health/resource fairs; sharing educational books/materials through lending libraries; and/or purchasing public service announcements (e.g., newspaper, radio, television).



## **B. Screening and Identification**

1. These partners will inform families of their policy for developmental screening and early identification, including consent for screening at the time the preschool child is enrolled in the program.
  - a. All preschool children attending family home care or early care and education programs (e.g., Head Start, School Readiness, Voluntary PreKindergarten) affiliated with the Early Learning Coalition of Polk County, ALPI, East Coast Migrant Head Start Project, the School Board of Polk County (PreKindergarten Programs), and Redlands Christian Migrant Association, or Heartland for Children and suspected of having a developmental delay or disability will be screened using the *Ages and Stages Questionnaire-3* and/or the *Ages and Stages Questionnaire-Social Emotional* within 45-calendar days of entry to the program.
  - b. If the initial score in any domain on the ASQ-3 is BLACK and/or ABOVE THE CUT SCORE on the ASQ-SE, the program will immediately refer the child to FDLRS Sunrise to begin the Child Find Process.
  - c. A child with an initial score of GRAY in any domain on the ASQ-3 or BELOW THE CUT SCORE on the ASQ-SE will receive an Individualized Learning Plan (ILP), which includes targeted ASQ-3 Learning Activities.
  - d. The program will arrange for a consultant (e.g., Inclusion Specialist/ Behavior Specialist/Disability Specialist) to:
    - Complete an observation of the child in the classroom;
    - Assist the teacher in identifying the targeted developmentally appropriate ASQ-3 Learning Activities;
    - Develop an Individualized Learning Plan (ILP);
    - Engage the family; and
    - Demonstrate to the both the teacher and family the targeted activities to support the child's development and learning.
  - e. The teacher/family will implement the ILP, intentionally teaching the targeted ASQ-3 Learning Activities, and monitor the child's progress for two (2) to three (3) months.
  - f. After two (2) to three (3) months of implementing the ILP, the program will re-screen the child, using the ASQ-3 and ASQ-SE, if necessary. If the score continues to be GRAY in any domain on the ASQ-3 and/or BELOW THE CUT SCORE on the ASQ-SE the practitioner/program will immediately refer the child to FDLRS Sunrise to begin the Child Find process.
  - g. The family will be involved in a discussion of the results of all screening/re-screening, ILPs, and/or referral.

## **C. Referral to FDLRS Sunrise Child Find**

1. All 3-5 year old children not currently identified as a child with a disability or receiving early intervention, special education, and/or related services are referred to FDLRS/Child Find to determine their eligibility for the Part B/ PreK ESE Program.
2. With parent consent (for the release of information), the partners to these community procedures agree to provide the following information to FDLRS/Child Find when making a referral:
  - a. Comprehensive developmental screening(s) or series of screening(s)

Polk County June 1, 2015 – May 31, 2018

- and a summary of the results;
  - b. Vision and hearing screening; and
  - c. Data from any curriculum-based assessment and/or documentation of intervention and any progress monitoring of the child.
3. FDLRS/Child Find will create a file and enter the child's information into the CHRIS data system. FDLRS/Child Find will review all referral information to determine if additional screening and/or comprehensive developmental evaluation is required, and contact the family.
  4. If there are problems contacting the family, FDLRS/Child Find will notify the referral source (partner) and they will discuss the referral and collaborate on a strategy to locate the family.

**D. Evaluation/Determination of Eligibility for Part B/ PreK ESE**

1. The School Board of Polk County, Florida is responsible for completing the initial evaluation of preschool children within 60 school days of the district's receipt of parental consent for evaluation.
  - a. If additional screening and/or a comprehensive developmental evaluation is needed, the LEA will obtain parent consent, discuss procedural safeguards, and schedule the evaluation.
  - b. The LEA will use a variety of evaluation and assessment tools, including the *Battelle Developmental Inventory, 2<sup>nd</sup> Edition (BDI-2)* or the *BDI-2 Screener* and strategies to gather relevant functional, developmental, and academic information about the preschool child, including information provided by the family that will help to determine eligibility for the Part B/ PreK ESE Program, assist in writing an Individual Educational Plan (IEP), and enable the child to participate in appropriate activities.
2. Following the comprehensive developmental evaluation, the LEA will contact the family to schedule an eligibility meeting. If the child is determined eligible, the IEP team, including the parent, Child Welfare Case Manager (if appropriate), and a representative from ALPI, charter schools (serving preschool children), ELC, ECMHSP, RCMA, or the School Board of Polk County, Florida PreKindergarten Programs at the request of the family will develop an Individual Educational Plan (IEP). The family has the right to refuse special education and related services and this will be documented on the IEP.
3. If the child is not eligible for Part B/ PreK ESE Program, the LEA will provide the family with developmentally appropriate ASQ-3 Learning Activities to support their child's continued development and learning. The LEA may also provide the family with information on other early childhood programs, services, and resources in Polk County.
4. If the child is eligible for Part B/ PreK ESE Program, an IEP must be developed within 30 calendar days following the determination of a child's eligibility for special education and related services and be in effect prior to the provision of these services. Members of the IEP Team, including the family and all other professionals with responsibility for the implementation of specialized instruction and related services will receive a copy of the IEP.
5. With parent consent, the LEA will notify the contact from the appropriate early childhood partners of the outcome of the eligibility staffing for all preschool children.
6. The LEA will provide FAPE to a preschool child with a disability in the least restrictive environment where the child's unique needs can be met, regardless of whether the LEA operates a public preschool program for children without disabilities. Special education and related services to a preschool child with a



disability may be provided in a variety of settings including the PreK ESE Program, Head Start, a regular kindergarten class, public or private preschool program, community-based early education and care program, or the child's home.

7. ALPI, charter schools (serving preschool children), ELC, ECMHSP, RCMA, or the School Board of Polk County preschool programs, (i.e., Florida First Start, Head Start, Title 1 Prek, VPK) will collaborate with the PreK ESE Program for all enrolled preschool children found eligible for Part B in the design, implementation and evaluation of specially designed instruction, related services, accommodations or modifications, and/or supplemental supports and services to support inclusion and the child's development and learning.
8. A meeting shall be held at least annually to review and revise each IEP, as appropriate.

#### **E. Transition of preschool children with disabilities to Kindergarten**

1. All early childhood partners will collaborate in the preparation of preschool children with disabilities and their families for the transition to kindergarten.
  - a. All family home care and/or early care and education programs (e.g., Head Start, School Readiness, Voluntary PreKindergarten) affiliated with ALPI, charter schools, the Early Learning Coalition of Polk County, East Coast Migrant Head Start Project, the School Board of Polk County (Preschool Programs), and Redlands Christian Migrant Association, or Heartland for Children will meet with families to discuss their child's transition to kindergarten.
    - This transition to kindergarten meeting will include information about the School Board of Polk County; family priorities and concerns regarding transition (e.g., inclusion, core curriculum, education with typically developing peers) and activities to address these concerns; enrollment and registration; transportation; skills necessary to support the child's transition; assigned responsibilities with timelines for gathering information on development and learning (e.g., curriculum-based assessment, portfolio) and transferring educational records; and any additional resources.
  - b. All family home care, early care and education programs (e.g., Head Start, School Readiness, Voluntary PreKindergarten), and charter schools will further support the child's transition by reading books about going to kindergarten; creating opportunities to practice kindergarten "readiness" skills, including both academic and social-emotional skills; offering cafeteria-style meals, and arranging for children and/or their families to tour buses and visit kindergarten classrooms.
  - c. Families of children enrolled in family home care, early care and education programs (e.g., Head Start, School Readiness, Voluntary PreKindergarten), charter schools, and the School Board of Polk County will be encouraged to support their children's transition to kindergarten by actively participating in meetings and sharing their knowledge about their child's development and learning; identifying their priorities and concerns; knowing what school their child will attend; gathering the documents required for registration and enrollment; frequently talking and reading stories with their child about kindergarten; creating opportunities to practice kindergarten

“readiness” skills at home; having well-established morning and evening routines; planning transportation; and attending an open house to visit the school and meet the teacher.

- d. The LEA will review all preschool records of children with disabilities and, if necessary, schedule a transition evaluation to determine the child’s present level of academic achievement and functional performance and discuss how the child’s disability effects their involvement and progress in the general education (kindergarten) curriculum. Following the transition evaluation, the IEP will be updated and the child’s education record will be transferred to the school where the child will attend kindergarten.
- e. The LEA will administer an exit BDI-2 assessment for all preschool children who have an entry BDI-2, were determined eligible for Part B, and have had an IEP for six months. The exit BDI-2 will be administered **no earlier than 90 calendar days or later than 30 calendar days** before the date of termination of services or May 31<sup>st</sup> in the year the child transitions to kindergarten. When administering the complete BDI-2 or screener, the exit BDI-2 will include the following three domains of development, the adaptive, communication, and personal-social domains and may include all five domains.

## **VI. Measurement of Child Outcomes**

### **Battelle Developmental Inventory-2<sup>nd</sup> Edition (BDI-2)**

#### **A. Part C/Early Steps**

1. Entry BDI-2 Assessment – Early Steps will administer an entry BDI-2 to all infants and toddlers **no earlier than 90 calendar days prior to or later than 30 calendar days** after the date of the initial IFSP. The scores on the entry BDI-2 will be used to report child outcomes and may also be considered in the determination of eligibility for Early Steps. When administering the complete BDI-2 or screener for measurement of child outcomes and/or eligibility, the entry BDI-2 will include all five domains of development (i.e., adaptive, cognitive, communication, motor, and personal-social).
2. Children transitioning from Early Steps to the Part B/ PreK ESE Program who have an entry BDI-2 and an initial IFSP date **later than 30 months of age** will not be included in the Part C/Early Steps system for the measurement of child outcomes. However, this BDI-2 (administered at 30 months plus 1 day) may be used as the entry BDI-2 for the Part B/ PreK ESE Program.
3. Exit BDI-2 Assessment– Early Steps will administer an exit BDI-2 for all infants and toddlers who have an entry BDI-2, were determined eligible for Part C/Early Steps, have had an IFSP for at least six months, and will transition at three from Part C/Early Steps to the Part B/ PreK ESE Program or other community programs and services. When administering the complete BDI-2 or screener for measurement of child outcomes and/or eligibility (Part B), the exit BDI-2 will include all five domains of development (i.e., adaptive, cognitive, communication, motor, and personal-social).
4. The exit BDI-2 will be administered **at 33 months** for children who entered Early Steps before 27 months; **at 34 months** for children who entered Early Steps at 28 months; **at 35 months** for children who entered Early Steps at 29 months, and **no earlier than 90 calendar days** before the date of termination of services per notice.



5. Note: Children who were found eligible for Early Steps at 28 or 29 months and have an IFSP for the minimum time permissible (i.e., six months) to be included in the Part C system for the measurement of child outcomes should receive an exit BDI-2 as late in the assessment window as possible (*Flowchart and Decision Rules for Entry and Exit for Child Outcomes Assessments, 2009, May 1*).
6. With parent consent, Early Steps will provide a copy of the *IFSP, Form E*, the exit BDI-2 protocol and score sheet, the Comprehensive Report, or Test Record Report from the BDI-2 Data Manager to the LEA **within 10 days** following the administration of the exit BDI-2 for all children referred to the Part B/ PreK ESE Program.
7. Early Steps will automatically (i.e., upload using Mobile Data Solutions) or manually enter the entry and exit BDI-2 item scores into the BDI-2 Data Manager. The data will be entered as described in the *BDI-2 Data Manager: Guide for the Florida Child Outcomes Measurement System (July 14, 2010)*. A copy of the child's entry and exit report from the BDI-2 Data Manager will be printed and included in the child's record.
8. All hard copies of the original BDI-2 protocols and score sheets or electronic copies from the Mobile Data Solutions (MDS) will be maintained at the Administrative Offices of Bay Area Early Steps.
9. If at the time of the exit BDI-2, the IFSP Team determines that all of the goals/outcomes have been achieved and family has no further concerns or needs, the termination date will be documented on the IFSP, Form I (as part of the transition plan). Early Steps will immediately notify the LEA that the child no longer qualifies for Part C, close the child's record, and enter the appropriate disposition code.

**B. Shared Data Point**

1. A "shared data point" exists when the same BDI-2 assessment can be used as both the exit from Part C/Early Steps and the entry for the Part B/ PreK ESE Program.
2. All partners will assess children transitioning from Part C/Early Steps to Part B/ PreK ESE Program or other community programs and services according to the assessment window for the shared data point which is **90 calendar days before to 90 calendar days after** the date of termination of Part C/Early Steps services per notice (*Flowchart and Decision Rules for Entry and Exit for Child Outcomes Assessments, 2009, May 1*).
3. The partner responsible for administering the BDI-2 that becomes the shared data point will automatically (i.e., upload using Mobile Data Solutions) or manually enter the data in the Data Manager **within 10 days** following the administration, according to the decision reported to either the Early Steps State Office or the Florida Department of Education, and provide a copy of the *IFSP, Form E*, shared BDI-2 protocol and score sheet, the Comprehensive Report, or Test Record Report to their partner who will enter the raw score data into their BDI-2 Data Manager.

**C. Part B/ PreK ESE Program**

1. Entry BDI-2 Assessment - The LEA will administer an entry BDI-2 to all preschool children who have not participated in the Part C/Early Steps **no earlier than 90 calendar days prior to or later than 30 calendar days** after the date of the initial IEP. The scores on the entry BDI-2 will be used to report child outcomes and may also be

considered in the determination of eligibility for the Part B/ PreK ESE Program. When administering the complete BDI-2 or screener for eligibility, the entry BDI-2 will include all five domains of development (i.e., adaptive, cognitive, communication, motor, and personal-social). When administering the complete BDI-2 or screener only for the measurement of child outcomes system, the entry BDI-2 may include three of the five domains of development, the adaptive, communication, and personal-social.

2. The scores from the entry BDI-2 administered by the LEA or by Early Steps for children transitioning from Part C to Part B who have an entry BDI-2 and an initial IFSP date **later than 30 months of age** will be used to report child outcomes for the PreK ESE Program and may be considered in the determination for eligibility for Part B. Further evaluations may be conducted, with parent consent, if the LEA determines it necessary.
3. Preschool children with an entry BDI-2 and an initial IEP date of **December 1 or later in the school year prior to kindergarten** will not be included in the Part B/ PreK ESE Program system for the measurement of child outcomes.
4. Exit BDI-2 Assessment – The LEA will administer an exit BDI-2 for all preschool children who have an entry BDI-2, were determined eligible for Part B, and have had an IEP for six months. The exit BDI-2 will be administered **no earlier than 90 calendar days or later than 30 calendar days** before the date of termination of services or May 31<sup>st</sup> in the year the child transitions to kindergarten. When administering the complete BDI-2 or screener, the exit BDI-2 will include the following three domains of development, the adaptive, communication, and personal-social domains and may include all five domains.
5. The LEA will enter entry and exit BDI-2 item scores into the Data Manager, in accordance with the decision reported to the Florida Department of Education. The data will be entered as described in the *BDI-2 Data Manager: Guide for the Florida Child Outcomes Measurement System* (July 14, 2010). A copy of the child's entry and exit report will be printed from the BDI-2 Data Manager and included in the child's record.
6. All hard copies of the original BDI-2 protocols and score sheets or electronic copies from the Mobile Data Solutions (MDS) will be maintained at the Administrative Offices of the School Board of Polk County, Florida.

#### D. Note

##### Battelle Developmental Inventory-2 (BDI-2) Screening Test

The BDI-2 Screening Test may be used in the measurement of child outcomes for both **Part C/ Early Steps and Part B/ PreK ESE Program** (and in the re- determination of eligibility for the **Part C/Early Steps only**) as defined in the *Memorandum: Revision to Guidance on the use of the BDI-2 Screening Test in Florida's Measurement of Child Outcomes System* (Department of Education, BEESS and the Department of Health, ESSO, current memo).



## **VII. Implementation of the Early Childhood Community Procedures**

The partners agree to:

1. Include information on transition procedures and the measurement of child outcomes system in staff orientation, through staff meetings and joint training events;
2. Provide information on transition and the measurement of child outcomes system to families;
3. Attend quarterly meetings to discuss the implementation and monitoring of the transition procedures and the measurement of child outcomes system; and
4. Invite all members of the early childhood community in Polk County to the scheduled STEPS meetings each year.

## **VIII. Monitoring the Early Childhood Community Procedures**

The partners agree to:

- a. Meet bi-monthly (and at least quarterly) with the TATS-West Central Regional Facilitator and/or TATS-Florida Transition Project (FTP) to discuss the activities related to these transition procedures, including the BDI-2 and the Measurement of Child Outcomes System. The purpose of these meetings are to review data, identify improvement activities, and make revisions to the Early Childhood Community Procedures for the Transition of Young Children with Disabilities, if necessary; ensure compliance with federal and state requirements for transition at age three and the measurement of child outcomes; and improve results for children and families.
- b. By the 15<sup>th</sup> of the month following the end of each quarter (October 15, January 15, April 15, and July 15), Early Steps will provide the LEA with a list/report, preferably in an EXCEL file, by the code for the Service Coordinator of the names of all children enrolled in Early Steps and who turned three in that quarter with date of birth, referral to Early Steps, IFSP, notification, transition conference (and code), and disposition (and code).
- c. In September, January, and June, Early Steps will run the Part C, BDI-2 Macro and the LEA will run the Part B, BDI-2 Macro to correct errors (i.e., child identification number, name, date of birth, and examiner field/data point) and check for missing data (i.e., entry and exit scores).
- d. Data reviewed will be based on the Early Childhood Community Procedures for the Transition of Young Children with Disabilities, State Performance Plan (SPP) and Annual Performance Report (APR), LEA Profiles, and Early Steps Quality Assurance on Transition, specifically Part C, Indicator 8 and Part B, Indicator 12 and the Measurement of Child Outcomes, specifically Part C, Indicator 3 and Part B, Indicator 7: Early Childhood Transition
  1. Review of the data on early childhood transition;
  2. SPP/APR, Part C, Indicator 8 and Part B, Indicator 12;
  3. CHRIS;
  4. Polk County - Transition Tracking Form;
    - i. Notification, transition planning, including documentation on IFSP, Form I, and Transition Conferences;
    - ii. Development and implementation of IEP by the child's third birthday;

5. Transition Referral Packets, including timeline for completion of the exit BDI-2; and
6. Exit BDI-2 at 33 months.

Measurement of Child Outcomes

- a. Review of the data on training, administration of the BDI-2, and data management systems (e.g., TATS Steps to Quality, FCOMS Proficiency Checklist);
- b. SPP/APR, Part C, Indicator 3 and Part B, Indicator 7;
- c. Polk County – BDI-2 Tracking Form;
- d. Part C, BDI-2 Macro and Part B, BDI-2 Macro;
  1. Errors: Name, DOB, Child ID, Examiner Field/Data Points;
  2. Missing data: Entry and Exit BDI-2 scores;
- e. Report of District Findings Related to Child Outcomes;
- f. FL DOE, Indicator 7, Preschool Outcomes, Summary Statements;
- g. Report of Early Steps Findings Related to Child Outcomes;
- h. FL DOH, Indicator 3, Infant/Toddler Outcomes, Summary Statements.
- i. A meeting calendar will be coordinated by the STEPS Team the beginning of August each year.

**IX. Interagency Conflict Resolution Process**

Every attempt shall be made to resolve any disagreement to the satisfaction of all parties, including the family, at the lowest possible level within and across the partner agencies to these procedures. The partners agree to:

- a. Meet as a team in an effort to informally resolve conflicts resulting from the early childhood community procedures on transition. If the conflict cannot be resolved informally, the following procedures will be followed:
  1. All of the partners (**Attachment 6**) will continue the activities in the Early Childhood Community Procedures for the Transition of Young Children with Disabilities until the conflict is resolved.
  2. The partner from the agency/program with a conflict shall provide written communication that identifies the conflict, proposed action, and a summary of factual, legal, and policy grounds.
  3. The partner from the receiving agency/program shall provide a written response, which includes proposed solutions to the dispute, no more than thirty (30) days after receipt of notice of the conflict.
  4. Upon resolution of the conflict, a joint written statement so indicating will be developed and disseminated by a representative of each partner.
- b. Follow the process of conflict resolution described above unless an IEP Team meeting is required to resolve the dispute.
- c. If necessary, request facilitation by the Technical Assistance and Training System (TATS), West Central Region and/or the Florida's Transition Project (FTP) to discuss concerns or assist in the resolution of conflicts.



#### **X. Duration of Procedures**

These Early Childhood Community Procedures for the Transition of Young Children with Disabilities in Polk County, Florida is not a binding contract. It is an expression of cooperation for the purpose of providing services and coordinating activities to the extent possible for each agency partner. No contract rights attach to the procedures for any of the parties or for any third party. The procedures will be in effect from **July 1, 2015 to June 30, 2018**, with annual review. This document procedures can be cancelled by request of any of the signing parties, with a 30 day written notice.

**XI. Signatures**

The Early Childhood Community Procedures for the Transition of Young Children with Disabilities in Polk County provide detailed information on the activities associated with the successful transition at age three and at kindergarten for children with disabilities and their families, and does not require the exchange of funds now or in the future. Any activities requiring exchange of funds must be addressed by separate agreement. The procedures for transition have been reviewed and approved by the parties listed below:

<u>Signature</u>	<u>Date</u>
<u>Debra P. Stephens</u> Achievement Academy Debra P. Stephens	<u>6/27/2015</u>
<u>DeLoria Johnson</u> Agriculture and Labor Program (ALPI) Inc. DeLoria Johnson, CEO	<u>6/12/2015</u>
<u>Dr. Carol Lilly</u> Bay Area Early Steps Carol Lilly, M.D., Medical Director	<u>8/24/15</u>
<u>Karen A Berkman</u> Center for Autism and Related Disabilities Karen Berkman, Executive Director	<u>9/23/15</u>
<u>William D'Aiuto</u> Department of Children and Families, Central Regions, Circuit 10 Julia Hermelbracht, Community Development Administrator William D'Aiuto, Central Region Managing Director	<u>9/25/15</u>
<u>Gilbert Rincon</u> Early Learning Coalition of Polk County Gilbert Rincon, Chief Executive Officer	<u>10/14/15</u>
<u>Roselyn Smith</u> East Coast Migrant Head Start Florida Department of Health - Polk County Health Department Roselyn Smith, Human Services Program Analyst	<u>11/11/16</u>
<u>Poinsetta Tilman</u> Florida Diagnostic and Learning Resources System (FDLRS) Poinsetta Tilman, Program Manager	<u>11/8/16</u>
<u>Marcia Anderson</u> Healthy Families Polk Marcia Anderson, Social Services Director	



*Charlene Edwards*

09/25/15

Healthy Start Coalition of Hardee, Highlands, & Polk Counties  
Charlene Edwards, Executive Director

*Teri Saunders*

09/28/2015

Heartland for Children, Inc.  
Teri Saunders, CEO

*Barbara Mainster*

01/12/2016

Redlands Christian Migrant Association (RCMA)  
Barbara Mainster, Executive Director

*Matti Garcia Friedt*

10/21/2015

School Board of Polk County, Preschool Programs,  
Matti Garcia Friedt, Director

*Diane Taylor*

12/3/15

School Board of Polk County PreK ESE Program  
Diane Taylor, ESE Director

Other Participating Partners:

Agency for Persons with Disabilities - Clarence Lewis, Area Administrator

Children's Medical Services

Division of Blind Services - Mireya Hernandez, Director of Program Services

Other:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**RSM**

**(name change for McGladrey)**

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December 2, 2015

**RSM US LLP**

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Ms. Deloris Johnson  
Chief Executive Officer  
The Agricultural and Labor Program, Incorporated  
P.O. Box 3126  
Winter Haven, Florida 33885

Dear Ms. Johnson,

This addendum to the arrangement letter between McGladrey LLP and The Agricultural and Labor Program, Incorporated, dated August 3, 2015, confirms that the terms stated in that arrangement letter remain unchanged, with the exception of the following:

- The original arrangement letter was entered into with McGladrey LLP. Our firm has since changed its legal name to RSM US LLP.

If the Organization understands and agrees with these additional terms, please sign the enclosed copy and return to us.

**RSM US LLP**

Clay Worden, Partner

Confirmed on behalf of **The Agricultural and Labor Program, Incorporated:**

By: \_\_\_\_\_

Title: Chief Executive Officer

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**REQUEST FOR PUBLIC RECORD**

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**Twila Steward**

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**Subject:** FW: THIS IS A PUBLIC RECORDS REQUEST

**From:** Responsive Records [mailto:responsiverecords@gmail.com]  
**Sent:** Monday, November 30, 2015 3:49 AM  
**To:** Deloris Johnson <DJohnson@alpi.org>; Cheryl Burnham <CBurnham@alpi.org>  
**Cc:** Responsive Records <responsiverecords@gmail.com>  
**Subject:** THIS IS A PUBLIC RECORDS REQUEST

**THIS IS A PUBLIC RECORDS REQUEST**

Custodian of Public Records for The Agricultural and Labor Program, Incorporated

This is a public records request made in connection with the Florida Department of Economic Opportunity Contract 15EA0F076308001. My public records request is being submitted via email to:

[Djohnson@alpi.org](mailto:Djohnson@alpi.org)

[cburnham@alpi.org](mailto:cburnham@alpi.org)

I am seeking access to the following:

**All records reflecting or relating to the last payment made or received by The Agricultural and Labor Program, Incorporated in connection with the Florida Department of Economic Opportunity Contract 15EA0F076308001. Responsive records may include, but are not necessarily limited to, checks, EFT's, invoices (including records for payroll, materials, etc.) and accounting records.**

Please send responsive records to [ResponsiveRecords@Gmail.com](mailto:ResponsiveRecords@Gmail.com).

If you need clarification regarding the public records that I am seeking, please contact me via [ResponsiveRecords@Gmail.com](mailto:ResponsiveRecords@Gmail.com). If you anticipate that production of records responsive to my pu

PRR\_000074

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**RESPONSE from CONGRESSMAN WEBSTER**

**re: Funding**

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**Twila Steward**

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**Subject:** FW: Responding to your message

DANIEL WEBSTER  
10<sup>th</sup> DISTRICT, FLORIDA

COMMITTEE ON TRANSPORTATION  
AND INFRASTRUCTURE

**Congress of the United States**  
**House of Representatives**  
Washington, DC 20515-0908

WASHINGTON OFFICE  
1039 LONGWORTH HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
(202) 225-2176  
(202) 225-0999 (FAX)

WINTER GARDEN OFFICE  
300 WEST PLANT STREET  
WINTER GARDEN, FL 34787  
(407) 654-5705  
(407) 654-5814 (FAX)

January 6, 2016

Dear Ms. Johnson,

Thank you for contacting me regarding government funding for Fiscal Year 2016.

On December 18, 2015, the House of Representatives considered an amendment to H.R. 2029, the Consolidated and Further Continuing Appropriations Act, 2016. The legislation consolidates the twelve annual government funding bills, seven of which the House considered independently prior to the end of the 2015 Fiscal Year. The amendment provides funding for the government through September 30, 2016. In total, the legislation brings Fiscal Year 2016 funding for government operations to \$1.1 trillion, in accordance with the budget deal negotiated by former Speaker John Boehner. H.R. 2029 passed the House of Representatives by a vote of 316-113 on December 18, 2015.

**I opposed the budget deal and I also voted against H.R. 2029.** This "Omnibus" bill, which was negotiated by leadership and staff without input from Members, totaled over 2,200 pages and was introduced fewer than 72 hours before a vote was held on it. Many of the provisions of the bill did not relate to funding the government, but were policy items. Furthermore, the bill excluded many of the priorities of the American people, including a moratorium on funding Syrian and Iraqi refugee settlement in the United States, and it limited debate and consideration of amendments that dealt with other significant issues. Although there were some good aspects of the legislation, it was a deeply flawed product of a deeply flawed process.

The "Omnibus" bill was a consequence of Congress's failure to consider and pass all twelve annual appropriations bills. In order to avoid similarly flawed products, Congress must return to regular order and make a priority of passing appropriations bills. America is not broken, but Washington is. I will continue to advocate for a system that pushes down the pyramid of power in the House of Representatives and seeks to empower the American people through their Member of Congress.

Again, thank you for taking a moment to share your thoughts and views. I am honored to serve the people of Central Florida as your U.S. Representative.

Your servant,



Daniel Webster  
Member of Congress

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**DANYA INTERNATIONAL MONITORING VISIT**  
**(HS/EHS Health & Safety)**

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November 13, 2015

Mrs. Elizabeth Young  
**The Agricultural & Labor Program, Inc.**  
**Grant Number: 04CH4739**  
300 Lynchburg Road  
Lake Alfred, FL 33850

Dear Mrs. Young:

The Office of Head Start (OHS) will conduct an Environmental Health and Safety (EnvHS) monitoring review of The Agricultural & Labor Program, Inc. / 04CH4739 during the week of 1/11/2016.

Ms. Jennifer Johnston, an off-site Content Area Lead (CAL), has been assigned to oversee the on-site review process. Please be advised that the duration of the EnvHS review can range from 1-5 days, based on the size of your program. Ms. Johnston will contact you soon to confirm the schedule for on-site review activities and discuss applicable details. She can be reached at [JJohnston@danya.com](mailto:JJohnston@danya.com).

The FY2016 Head Start Monitoring Protocol is a resourceful tool that was designed to help you prepare for your upcoming review. The protocol is available at <http://eclkc.ohs.acf.hhs.gov/hslc/grants/monitoring>. The OHS has also provided an additional resource for grantees to better understand the Aligned Monitoring System. Please visit the Virtual Expo at <https://vts.inxpo.com/Launch/Event.htm?ShowKey=21103>.

The OHS requires all programs receiving an EnvHS review to upload the following document to the Head Start Enterprise System (HSES):

- Grantee Contact Information Form

Should you need technical assistance, please contact the HSES Help Desk at [Help@hsesinfo.org](mailto:Help@hsesinfo.org) or call (toll-free) 1-866-771-4737 or (local) 703-528-0591, Monday-Friday, 8:00 a.m.-7:00 p.m. EST, except weekends and Federal holidays.

If you have questions or require assistance regarding your review date, please contact Danya's Review Scheduling Team at [OHSMonitoring2016@danya.com](mailto:OHSMonitoring2016@danya.com) or (800) 518-1932 (Option 2).

Sincerely,

A handwritten signature in black ink, appearing to read 'C. Northington'.

Cynthia Northington  
Senior Director, Operations

cc: Mr. William Holt  
cc: Ms. Deloris Johnson

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**NHSA ICYMI ½ BILLION GAIN FOR HEAD START**

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**Twila Steward**

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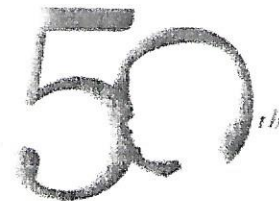
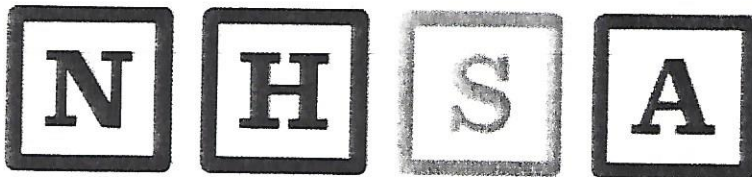
**Subject:** FW: Breaking News: Head Start Funding Levels Announced

**From:** Vinci, Yasmina [mailto:yvinci@nhsa.org]  
**Sent:** Wednesday, December 16, 2015 2:43 PM  
**To:** NNSA BOARD <nnsa-board@nnsa.org>; executivedirectorsconsortium@yahoogroups.com; State Head Start Association Leadership <state-head-start-association-leadership@nnsa.org>  
**Subject:** Fwd: Breaking News: Head Start Funding Levels Announced

ICYMI - Join us in celebrating the half billion dollar gain for Head Start.

HAPPY HOLIDAYS ALL!!!

To view this email as a web page, go [here](#).



**NATIONAL HEAD START ASSOCIATION**

Dear Colleague and NNSA Member:

Today the House and Senate released a spending bill for Fiscal Year 2016. Once the House and Senate have voted and the President has signed the bill into law, Head Start and Early Head Start will receive a significant increase in funding - over half a billion dollars! In general, the funding will stabilize and grow the Head Start workforce, support Head Start programs as they expand the duration of their services, and expand access for infants and toddlers.

The specific highlights of the \$570 million increase for Head Start and Early Head Start include:

- \$141 million for a Cost of Living increase,
- \$294 million as a "down payment" for Head Start programs that are ready to increase their duration of services, and
- \$135 million for the expansion of Early Head Start, of which \$59 million is reserved for EHS-CC Partnerships.

We are pleased that this FY16 \$9.168 billion appropriation for Head Start and Early Head Start represents a bipartisan commitment to the success of our children and families. We will keep you updated on the bill's progress through Congress and as additional details emerge. We fully expect the House and Senate to adopt the agreement in the coming days. [Click here](#) to read our media statement on the bill's release.

Sincerely,

A handwritten signature in cursive script that reads 'Yasmina Vinci'.

Yasmina Vinci  
Executive Director

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**NHSA STATEMENT ON FY'16 OMNIBUS  
APPROPRIATIONS BILL**

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all press

share

# National Head Start Association Statement on FY'16 Omnibus Appropriations Bill

December 16, 2015

WASHINGTON, D.C. – This morning, Congress released a FY'16 omnibus appropriations bill that includes a significant increase in funding for Head Start and Early Head Start.

The following statement should be attributed to Yasmina Vinci, Executive Director of the National Head Start Association:

"The bipartisan FY'16 omnibus appropriations bill now before Congress reflects a powerful national commitment to our country's most vulnerable children. We are encouraged that the funding agreement includes \$9.17 billion for Head Start and Early Head Start – an increase of \$570 million. The increase will support critical investments to strengthen quality and expand access for infants and toddlers. It includes funds to stabilize, develop and grow the Head Start workforce, as well as support Head Start programs as they expand their services to a full school day and year. We will continue working with our national leaders to ensure access to high quality Head Start programs, because we believe that the economic prosperity and security of our nation are absolutely dependent upon our sustained investment in the early education, health, and well-being of at-risk children and families. The Head Start community thanks the leadership of the Appropriations Committees in both the House and the Senate for their bipartisan compromise – the FY'16 omnibus appropriations bill is an encouraging step forward in our shared commitment to ensuring every child, regardless of circumstances at birth, has the opportunity to succeed. We are hopeful Congress will act swiftly to pass the bill so it can move to the President's desk for signature.

Additional information about the **National Head Start Association** can be found at [www.nhsa.org](http://www.nhsa.org).

###

## Media Contact

Sally Aman  
aman@a2pr.com  
202-262-8003



### Become a Member

Lend your voice to the national Head Start community.

[Join or Renew now!](#)



### New to Head Start?

Head Start has improved the lives of more than 32 million children and their families.

[Learn more](#)



### Support NHSA

Your support for Head Start helps ensure a successful future for vulnerable children.

[Make a donation](#)

National Head Start Association | 1651 Prince St, Alexandria, VA 22314  
Telephone: 703-739-0875 | Toll free: 866-677-8724



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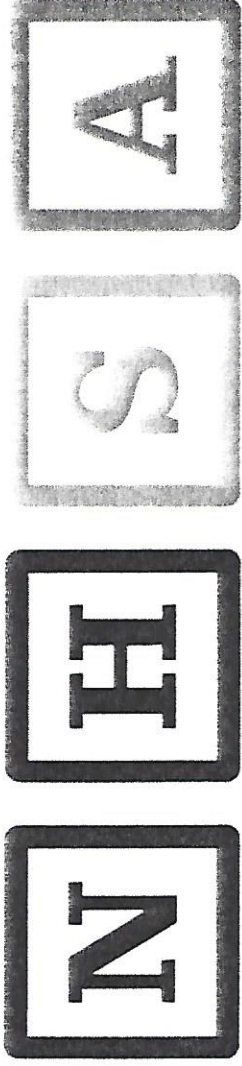


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**NHSA CERTIFICATE OF MEMBERSHIP**

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NATIONAL HEAD START ASSOCIATION

# Certificate of Membership

Presented to:

The Agricultural and Labor Program, Inc.-D  
NHSA Program Member: 11823  
7/1/2015 - 6/30/2016

Yasmina Vinci  
Executive Director

Vanessa Rich  
NHSA Board Chair

## **UPCOMING CONFERENCES/MEETINGS**

### **FEBRUARY**

1<sup>st</sup> – 4<sup>th</sup> Region IV Conference – Atlanta, GA

27<sup>th</sup> Shared Governance Meeting – Winter Haven, FL

### **MARCH**

15<sup>th</sup> – 18<sup>th</sup> NCAF Legislative Conference – Washington, DC

### **APRIL**

19<sup>th</sup> - 22<sup>nd</sup> FHSA Annual Conference – Daytona Beach, FL

22<sup>nd</sup> Executive Committee Meeting – Winter Haven, FL

23<sup>rd</sup> Board of Directors Meeting – Winter Haven, FL

### **MAY**

10<sup>th</sup> – 12<sup>th</sup> FACA Training Conference – Orlando, FL

16<sup>th</sup> – 20<sup>th</sup> NHSA Annual Conference – Nashville, TN

27<sup>th</sup> Staff Appreciation – Port St. Lucie, FL

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**BOARD & ADMINISTRATOR NEWSLETTER**

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# Board & Administrator

FOR BOARD MEMBERS

December 2015 Vol. 32, No. 4

Editor: Jeff Stratton

## Write a job description for board members

A written job description is an effective tool for communicating to board members the importance of their role, and the commitment it requires. Job descriptions help board members understand and appreciate the expectations placed on them.

When your board writes a job description for its members, you communicate clearly defined duties and responsibilities, limits on the individual board member's authority and a sense of the time commitment board service requires.

To write a job description, include your board's beliefs in these areas:

- Who your board members are responsible to

(e.g., the people your organization serves).

- A statement of purpose. Concisely describe the organization's mission and vision for board members.
- Length of term.
- Expectations for meeting attendance.
- Obligations of the board (statement of key responsibilities—e.g., approve the budget, or hire the executive director).
- Specific duties for individual board members. Consider advocacy, fundraising, an annual gift to the organization and meeting attendance, for example, when listing specific duties. ■

## Independent actions can create division

An important concept to keep in mind about board service is that board members, acting on their own, do not have the authority to make decisions on behalf of the nonprofit.

What problems may occur when an individual board member acts independently?

When a board member tries to make decisions

on her own, usually to promote a personal agenda, it disrupts the sense of board teamwork and sends the wrong message to other board members.

When a board member acts independently, the board chair should correct her. If necessary, the chair should discipline the member, even if it means asking her to resign. ■

## Here is a way to shave time off board meetings

When the board faces a motion, the chair asks "Is there any objection to adopting the motion?" If there is no objection, adopt the motion and move to the next item of business.

This practice is called general consent or "unanimous consent."

Unanimous consent works well for those times

in which a motion isn't controversial and appears to have universal agreement—or when the minority is likely to agree to the decision without protest.

The board can adopt a report and approve minutes using this practice. The key, again, is that no board member objects. ■



## Avoid time-wasters at board meetings with these three tips

If a board member understands his or her obligations at a board meeting, the meeting is much more likely to be productive. Here are three tips to clarify roles at the meeting:

**1. What is the chairperson's role in making meetings productive?** The chair should work with the executive director to prepare the meeting agenda. The chair should also preside over the meeting, keep discussion focused on the meeting agenda and ensure that board members follow parliamentary procedure.

**2. What responsibility do individual board members have?** Preparation! Board members should read the meeting agenda and supporting materials before they attend the meeting. Doing so will prepare board members to discuss the is-

ssues and make intelligent decisions. Preparation will also keep the meeting on track, as the board will not have to wait until board members are brought up to speed on the issues. Board members should stick to the business of the agenda, avoid tangents and respect the views of their board colleagues.

**3. Why is meeting attendance such an important part of the board member's job?** Meetings are the place where board business takes place. Board members have an obligation to attend, give their views on issues and vote. Attendance should be important to board members personally, too, because they can be held liable for board decisions. And if they do not attend meetings, they are likely to lose their seats on the board. ■

## What should a board member look for in financial statements?

A board member's number-one concern should be whether the nonprofit is operating responsibly with respect to its finances. First take a look at the financial report's bottom line. Then ask:

1. Is the organization on target with planned expenses and revenues?

2. Is the organization financially solvent? Is there enough money in the bank to pay current

expenses?

3. Will the nonprofit generate enough income to meet future expenses?

As you review the financial summary more carefully, watch for significant changes from month to month. If the bottom-line figures aren't what you expected or if you see sharp upticks or declines, ask your executive director for an explanation. ■

## Make that annual personal gift (and monitor to see that it gets made)

In "5 Ways Board Members Can Raise Money," Gail Perry stresses the importance of each board member making a personal gift to the organization.

"You really need to put your money where your mouth is as a board member," Perry said.

One way to ensure that board members deliver on their promises to the organization is to review this aspect of their performance in an annual

evaluation. Have the chair review each board member's performance every year, concentrating on accomplishments and whether or not the board member made a personal gift to the nonprofit.

Writing that check is "the easiest and quickest way you can personally further the work of your organization," she said.

For more information, go to <http://goo.gl/nL4AFa>. ■



# Board & Administrator

FOR BOARD MEMBERS

January 2016 Vol. 32, No. 5

Editor: Jeff Stratton

## Don't disrupt operations with a pop-in visit

Board members' pop-in visits to the office or to observe programs are disruptive on several levels:

- They lead staff to question the administrator's authority.
- They subvert the executive director's position as manager of staff.
- They can create severe discord in the board member and executive director relationship.

This issue is tricky to say the least.

Board member role confusion is generally the cause of this problem.

If a board member thinks that evaluating the organization's program firsthand is part of his job, that's a role misunderstanding.

Here are a few of the problems this practice can create:

1. An individual board member has no authority to make changes to a program. This can be dis-

appointing and frustrating to the board member, but the real issue here is the disruption to board teamwork.

2. If a board member pops in to observe, he is pulling staff members' attention and time away from the organization's important work.

Nonprofit consultant Andrew Swanson has used a phrase in his work that applies perfectly here: "Board members should have their hands on but not in the organization."

There is a better way to handle a board member's desire to see the mission in action. Ask your executive director to schedule tours of the organization during board meetings or provide an overview of a specific program at the meeting. This way, board members can get a firsthand view of services, ask questions and make their observations. ■

## Always remember:

### The administrator is a vital member of the team

Closed sessions that exclude the administrator can quickly damage the teamwork that is vital between board and administrator. That's because:

- Closed sessions destroy trust. There needs to be a sense of honesty and trust shared between the board and its administrator.
- Closed sessions don't give the executive

director a chance to explain her actions. Without this information, boards can begin to second-guess the administrator, and undermine her authority.

• Closed sessions ignore your best resource. Your administrator understands how the organization works and will be able to tell you which of your plans and goals are the most workable. ■



## Don't shut your executive director out of meetings

I was reading a website article the other day about a board that slyly waited until its executive was out of town to meet and then fired him.

There should rarely, if ever, be an occasion when the board meets without its administrator.

There are only a few acceptable reasons this should occur:

- When discussing the executive director's annual performance evaluation and then compensa-

tion, before meeting with the executive to discuss the same.

- When discussing a corporate compliance issue where allegations have been made against the CEO.

- At the end of the audit review, so the board can ask questions of the auditor without staff present.

- If there is an allegation of sexual harassment against the executive director. ■

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## Chair can boost fundraising accountability

To monitor board members' fundraising commitments, the chair should ask for each member to update the board on progress. Do this at the end of the meeting and go around the table to each board member.

Result? You will stimulate ideas for meeting the challenges of board member fundraising and also boost intra-board competition.

For this to work, the chair must be respected and shoulder her share of the fundraising responsibility. ■

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## Q&A on executive director evaluation

The board has a responsibility to evaluate the executive director. It's important to the nonprofit that the board perform this appraisal because the success of the organization is closely connected to the goals the board sets for the CEO during the appraisal process.

The executive director's evaluation is also an integral element of his growth and development. The following question-and-answer session will take you through some key points about administrator performance evaluation.

**What are the benefits to the board of a regularly scheduled performance appraisal?**

Formal evaluation helps the executive director improve his performance in the job, and this in turn helps the nonprofit improve and grow.

**Is it appropriate to survey staff regarding the executive director's performance?**

No. Evaluating the administrator is the job of the board, which is responsible for managing the ex-

ecutive director. Staff should not be involved in the evaluation, unless it is part of a format mutually agreed upon by the board and executive director.

**What types of biases might staff display?**

Employees typically have subjective and personal views of the executive director that are unrelated to her job performance.

**What sort of issues should be raised during an evaluation?**

Areas that are directly related to the executive director's job performance, such as: Has she met the board's goals? Are programs meeting clients' needs? and, Is she running the organization within budget?

**How does the board ensure that only professional issues, not personal opinions or rumors, are examined?**

The board should adopt an objective evaluation form that is based on the executive director's job description and the goals the board set for her. ■