South Dakota Birth to Age Five Lead Agency, Local Education Agency, and State Education Agency Responsibilities

Guidance Document
Regarding Child Find for Children Who Reside on a Reservation within LEA Jurisdiction

Center for Technical Assistance for Excellence in Special Education (TAESE)
www.taese.org

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South Dakota Lead Agency, Local Education Agency, and State Education Agency Responsibilities Regarding Child Find for Children Who Reside on a Reservation within LEA Jurisdiction

This document is intended to be used by Lead Agencies (LAs), Local Education Agencies (LEAs), State Education Agencies (SEAs) (Part B-619 and Part C), the Bureau of Indian Education (BIE) (tribal and grant schools, the Family and Child Education (FACE) program, and BIE schools), Head Start programs, and other agencies working with birth to age 5 children on reservations.

Purpose
This information will provide guidance related to the provision of early intervention and special education services for infants, toddlers, and preschoolers birth through age 5 who reside on reservations, in accordance with the Individuals with Disabilities Education Act (IDEA).

Framing the Issue
There are many children in the State (birth to age 5) who reside on a reservation within an LA’s/LEA’s jurisdiction. This document provides guidance as to who is responsible for providing special education services, reporting to the Office of Special Education Programs (OSEP), and ensuring that child find is carried out for those children. The following are some of the questions addressed in this document:

- How are child find responsibilities carried out?
- How do children birth to age 3 and their families on the reservation receive special education Part C services?
- How are federal reporting requirements carried out?
- How do the BIE age 3 to 5 population and FACE programs interface with LEAs?
- How should memorandums of understanding (MOUs) be used to ensure services are provided for children (birth to age 3 and ages 3 to 5) residing on reservations and LAs/LEAs that have jurisdiction for those children?

The following are commonly asked questions and responses:
Birth to Three-Year-Olds:

1. Is the LA responsible for providing early intervention services to infants, toddlers, and their families with disabilities residing on a reservation within the jurisdiction of the LA?

Answer:

Under section 634(1) of IDEA, the LA in the State is responsible for ensuring that early intervention services are available to all infants and toddlers with disabilities and their families, including Indian infants and toddlers with disabilities and their families residing on a reservation geographically located in the State.

When a child has been identified through the Birth to 3 Program as needing an evaluation, it is the responsibility of the public school district to provide an appropriate evaluation, as defined in the administrative rules of South Dakota ([ARSD 24:14](#)).

**Administrative Rules of South Dakota (ARSD)**


Section 602(13) of IDEA defines *Indian tribe* to include “any Federal or State Indian tribe” and does not exclude State Indian tribes that are not federally recognized tribes. The list of Indian entities recognized as eligible to receive services from the United States is published in the *Federal Register*, pursuant to section 104 of the Federally Recognized Indian Tribe List Act of 1994, 25 U.S.C. 479a-1. The federal government does not maintain a list of other State Indian tribes.

2. How are children identified as being eligible for Part C services?

Answer:

When children are evaluated and qualify for the Birth to 3 Program, they are eligible for either Part C (the infant/toddler program) or Part B (special education/children in need of prolonged assistance program). The eligibility criteria are different for both programs.

24:14:07:02. Children eligible for services. Infants and toddlers, birth to 36 months of age, inclusive, are eligible for services under this chapter if identified by providers of licensed health care and education services as:
(1) Demonstrating a developmental delay of at least a 1.5 standard deviation below the mean, as measured by appropriate diagnostic instruments and procedures in one or more of the following areas: cognitive development, physical development, including vision and hearing; communication development; social or emotional development; or adaptive development; or

(2) Having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay or born at 28 weeks gestation or less.

Determinations of a diagnosed physical or mental condition shall be based on medical diagnoses, including Down's syndrome and other chromosomal abnormalities; sensory impairments, including vision and hearing; inborn errors of metabolism; microcephaly; severe attachment disorders, including failure to thrive; seizure disorders; and fetal alcohol syndrome.

24:14:07:03. Areas manifesting developmental delay. Developmental delay may be manifested in one or more of the following areas:

1. Cognitive development;
2. Communication development - receptive or expressive, or both
3. Social or emotional development;
4. Adaptive development; and
5. Physical development, including fine motor or gross motor, or both, vision, and hearing.

24:05:24.01:15. Prolonged assistance defined. Children from birth through 2 may be identified as being in need of prolonged assistance if, through a multidisciplinary evaluation, they score two standard deviations or more below the mean in two or more of the following areas: cognitive development, physical development including vision and hearing, communication development, social or emotional development, and adaptive development. Source: 23 SDR 31, effective September 8, 1996.

24:14:07:04. Eligibility verification. The verification of eligibility for early intervention services is obtained through a multidisciplinary evaluation pursuant to chapter 24:14:12 that uses the infant's or toddler's history obtained from parental input, pertinent records related to the child's educational background, current health status, and medical history, and a standardized infant development process in conjunction with at least two of the following:

1. Observations
2. A developmental inventory
3. A behavioral checklist
4. An adaptive behavior measure

This information must be documented by qualified personnel.
Informed clinical opinion shall be determined by qualified personnel and shall also be used in determining a child's eligibility under this section, especially if there are no standardized measures or the standardized procedures are not appropriate for a given age or developmental area. The informed clinical opinion must be documented by the source providing the information and shall be used, pursuant to chapter 24:14:12, as one factor in determining eligibility.

3. If a BIE child who is birth to 3 years old is determined eligible for Part C services, does the LEA pay the costs for services or does the tribe pay the LEA?

Answer:

Children identified as eligible for Part C services, with the exception of Part B Prolonged Assistance, are the responsibility of the State Part C program. The Birth to 3 Program is ultimately responsible for providing services at no cost to the family as the “payer of last resort”; however, other public and private resources, if authorized, must be explored.

Children identified as Part B in need of prolonged assistance are the responsibility of the LEA in which the child resides. The LEA both provides and pays for early intervention services. Tribal organizations do receive funding contained in IDEA and have been reminded of the use of these funds (IDEA P.L. 108-446 and P.L. 105-17).

P.L. 108-446, IDEA Part C, Section 643 (b)(4): “Use of funds.--The funds received by a tribe, tribal organization, or consortium shall be used to assist States in child find, screening, and other procedures for the early identification of Indian children under 3 years of age and for parent training. Such funds may also be used to provide early intervention services in accordance with this part. Such activities may be carried out directly or through contracts or cooperative agreements with the Bureau of Indian Affairs, local educational agencies, and other public or private nonprofit organizations. The tribe, tribal organization, or consortium is encouraged to involve Indian parents in the development and implementation of these activities. The above entities shall, as appropriate, make referrals to local, State, or Federal entities for the provision of services or further diagnosis.”

4. Where is a Part C child served?

Answer:

To the maximum extent appropriate for the needs of the child and family, early intervention services must be provided in natural environments, including the home and community settings...
in which children without disabilities participate.

24:14:13:04.01. Natural environment. To the maximum extent appropriate, early intervention services are provided in natural environments. The provision of early intervention services for an infant or toddler may occur in a setting other than a natural environment only if early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment and only in a setting that is most appropriate, as determined by the parent and IFSP team.

§303.26 Natural environments.

Natural environments means settings that are natural or typical for a same-aged infant or toddler without a disability. They may include the home or community settings, and they must be consistent with the provisions of §303.26.

5. Are LEAs required to adhere to IDEA Part C timelines?

Answer:

Whether a child is determined Part C eligible or Part B in need of prolonged assistance, IDEA Part C timelines must be followed.

Indicator C1 Timely Services: defined as infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner. South Dakota defines this as 30 days.

Indicator C7 45-Day Timeline: defined as infants and toddlers with IFSPs for whom an evaluation, assessment, and initial IFSP meeting were conducted within Part C’s 45-day timeline.

Indicator C8 Transition Planning: for children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their 3rd birthday.

6. Who is responsible for child outcome data collection?

Answer:

The LEA is responsible for data collection and entry of Battelle Developmental Inventory II results in the SEA database for submission to OSEP.

Indicator C3: Percent of infants and toddlers with IFSPs who demonstrate improved:
   A. Positive social-emotional skills (including social relationships)
   B. Use of appropriate behaviors to meet their needs
7. **What occurs when a child turns 3 years?**

**Answer:**

An IFSP meeting is held with parents, providers, and a school representative to review the IFSP and discuss any services the child may receive after the age of 3. The meeting must be held at least 90 days (and, at the discretion of all parties, not more than 9 months) before the child is eligible for preschool services.

The LEA will be notified in writing when a child is close to turning 3.

8. **Who is responsible for the transition of Part C birth to 3-year-old children to the Part B preschool program?**

**Answer:**

Each local school district shall develop policies and procedures for the transition of children participating in the early intervention program under Part C of IDEA who are eligible for preschool programs under Part B of IDEA.

*Administrative Rules of South Dakota (ARSD)*  
Three to Five-Year-Olds:

1. Are public schools that have BIE schools in their geographic area obligated to provide child find and preschool services for Indian children with disabilities?

Answer:

The responsibility for a free and appropriate public education (FAPE) for students aged 3 to 5 living on reservations lies with the State, not with the BIE or the tribes. Under IDEA, the BIE receives 611 funds to provide special education and related services to children with disabilities on reservations aged 5 through 21 enrolled in elementary and secondary schools operated or funded by the BIE. The BIE does not receive any 619 funds. Twenty percent of the 611 funds are distributed to tribes for the “coordination of assistance for special education and related services for children with disabilities aged three to five on reservations” [300.712(a)]. These funds must be used to assist in child find, screening, and other procedures for the early identification of children aged 3 to 5, parent training, and the provision of direct services [300.712(d)]. Although these funds can be used for direct services, they do not have to be. Most importantly, 300.707 outlines the responsibility for the BIE to ensure FAPE for children aged 5 through 21 living on reservations and attending elementary or secondary schools operated or funded by the BIE. It goes on to state: “With respect to all other children aged 3 to 21, inclusive, on reservations, the SEA of the State in which the reservation is located must ensure that all of the requirements of Part B of the Act are implemented” [300.707(c)]. Therefore, the responsibility for providing FAPE for children aged 3 to 5 attending preschools rests with the State. This remains true if the children are attending BIE (FACE programs) or tribe-funded preschools.

Administrative Rules of South Dakota (ARSD)
24:05:13:02. Free and appropriate public education (FAPE) defined.

Federal Regulation
Sec. 300.111: Child find, Sec. 34 CFR 300.712: Payments for education and services for Indian children with disabilities aged 3 through 5 and Sec. 300.707: Use of amounts by Secretary of the Interior.

2. If a BIE child who is 3 to 5 years old needs direct special education and related services, does the LEA or the tribe pay the costs?
Answer:

The SEA is ultimately responsible for ensuring FAPE. If the tribe chooses to use their funds to provide the services, the State does not have to duplicate the services. If the tribe wants to pay that is fine, but they are not obligated to do so. If the tribe does not pay, then the State—and, by extension, the LEA—must do so. In any case, it is the State’s responsibility to ensure FAPE is being provided, IEP teams are meeting, appropriate IEPs are being developed and services are being provided, etc. This is true regardless of who is providing the service or who is paying for it.

3. When tribes receive funds for child find under 618, who counts the children when reporting to OSEP?

Answer:

Federal Regulation 300.644 Child Count:
Tribes receive Part B funds to assist States in conducting child find for children aged 3 to 5 suspected of having a disability on reservations. However, the BIE is not responsible for conducting Child Find or providing special education and related services to children with disabilities aged 3 to 5 on reservations (with the exception of 5-year-old children enrolled in an elementary school operated or funded by the Secretary of the Interior).

Therefore, the BIE should not be counting these students. An LEA is responsible for conducting child find and providing special education and related services to children with disabilities aged 3 through 5 who reside on a reservation within the LEA’s jurisdiction. The LEAs are responsible for including those children in their child count, reporting data under section 618 of IDEA, completing evaluations, and determining eligibility.

4. How is placement for a 3 to 5-year-old child decided—in other words, in what environment should the special education services be provided?

Answer:

Placement is an IEP decision: the team determines the appropriateness of the setting and where services will be provided. If the parent questions whether their child’s placement is providing FAPE in the least restrictive environment (LRE), they have a right to use dispute resolution processes to resolve the issues.

Administrative Rules of South Dakota (ARSD)
**Federal Regulations**
34 CFR 300.114 to 300.116

5. Who is responsible for the transition of Part C birth to age 3 students to the Part B preschool program?

Answer:

Each local school district shall develop policies and procedures for the transition of children participating in the early intervention program under Part C of IDEA who are eligible for preschool programs under Part B of IDEA.

**Administrative Rules of South Dakota (ARSD)**

6. If the IEP team determines the FACE program is the appropriate placement, how is that data collected?

Answer:

The FACE program is considered for all students (with or without disabilities) and may be viewed as an integrated setting in which the student is with typically developing peers. However, this should be considered on a case-by-case basis.

7. Does the FACE program provide special education and related services under Part B for children aged 3 to 5?

Answer:

- The FACE program may help with child find and screening.
- The BIE does not receive funding to provide direct services under Part B.
- FACE is a BIE-funded program, but it does not receive funding for the preschool program to provide Part B special education and related services for children aged 3 to 5.
- The FACE program is a setting—it is not a provider of Part B special education and related services.
8. **Indicator 7 (Preschool Outcomes) in the State Performance Plan requires reporting to OSEP. Who is responsible for the data collection and reporting?**

**Answer:**

The LEA is responsible for collecting data using the Battelle Developmental Inventory II and reporting the results to the SEA for submission to OSEP.

**Indicator 7:** Percent of preschool children with IEPs who demonstrate improved:
- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

9. **What should be included in the MOU between the LEA and the BIE to ensure special education and related services and child find are appropriately provided for children residing on reservations within the jurisdiction of the LEA?**

**Answer:**

- Define which services will be provided by which entity;
- Ensure that children eligible for special education services receive FAPE in the LRE, as required by law;
- Ensure that each entity maintains communication and shares leadership responsibilities at the local level so the available resources are used in the most effective manner; and
- Ensure that cooperative arrangements between LEAs and FACE are developed, implemented, and preserved.
MEMORANDUM OF UNDERSTANDING
BETWEEN
NAME OF PUBLIC SCHOOLS
AND
SCHOOL NAME

This Memorandum of Understanding, hereinafter referred to as “Agreement,” is between Name of School District, a Local Education Agency (LEA), hereinafter referred to as “Initials of School District” and School Name, hereinafter referred to as “School Initials” and its Family and Child Education Program, hereinafter referred to as “FACE,” and is in effect from January 2016 to January 2019.

I. PURPOSE

The purpose of this Agreement is to establish a cooperative relationship and working procedures between Initials of School District and School Initials FACE program in the provision of special education and related services to eligible children in compliance with applicable federal, Tribal Name, and state laws and regulations. Eligible children are those children aged 3 to 5 with disabilities who reside in Initials of School District.

The intent of this Agreement is to

1. define which services will be provided by each party;
2. ensure that children eligible for special education services receive a free appropriate public education (FAPE), as required by law, in the least restrictive environment (LRE);
3. ensure that each party maintains communication and shares leadership responsibilities at the local level to ensure available resources are used in the most effective manner; and
4. ensure that cooperative arrangements between Initials of School District and School’s FACE are developed, implemented, and preserved.

II. PROGRAM MANDATES

Initials of School District will be responsible for

1. providing services to eligible children, aged 3 to 5, on a mandatory basis as defined by Public Law 108-446, Individuals with Disabilities Education Act (IDEA 2004);
2. providing eligible children FAPE, including the development and implementation of an
Individual Education Program (IEP), which contains all of the required components, as well as parental participation, procedural safeguards, and the provision of related services; and

3. determining and placing eligible children in the most appropriate setting, which shall be the LRE with multiple opportunities to learn, develop, and form positive relationships with peers who do not have disabilities.

**FACE** will be responsible for

1. supporting Child Find activities;
2. screening children for potential problems in health and early development within 45 days of enrollment when *Initials of School District* has not performed such screening; and
3. referring children determined to have developmental delays to appropriate professionals, including *Initials of School District* providers, for diagnostic evaluation within established timeframes.

*Initials of School District* and **FACE** will be responsible for

1. working closely with the community and other agencies in order to provide effective services to eligible children;
2. working cooperatively with parents/legal guardians to develop and implement IEPs for eligible children; and
3. providing native language interpretation for families as needed.

### III. PROGRAM CONTACT INFORMATION

A. For *Initials of School District*:

B. For *School District*:

Superintendent First and Last Name, County, District Name

P.O. Box/Street Address, City, State, Zip Code, Phone Number

### IV. SPECIAL EDUCATION SERVICES

A. **Child Find/Screening**

*Initials of School District* and **FACE** will

1. participate jointly on Child Find teams to plan and assist with Child Find screening
events for children aged 3 to 5 who reside in **Initials of School District**;
2. coordinate the screening process and procedures as well as the selection and use of screening instruments and assessment materials; and
3. conduct Child Find screenings together at designated community-based sites in **Initials of School District**, preferably at Name of School FACE located in **Initials of County**.

**Initials of School District** will

1. provide screening results to parents/guardian(s) and FACE and inform parents/guardians(s) of program options that may be available to them and their child; and
2. provide a native language interpreter for families and children who need such assistance throughout the Child Find screening process.

**FACE** will

1. provide transportation, when needed, to families and children residing in **Initials of School District**; and
2. provide a native language interpreter for families and children who need such assistance throughout the Child Find screening process.

**B. Referral for Evaluation**

**Initials of School District** will

1. follow all **Initials of School District** and State Education Department (SDDE) guidelines for referral;
2. provide referral forms and a single point of contact or use appropriate FACE forms to avoid duplication;
3. provide training to FACE staff on the delivery of special education services and the timely completion of referral forms;
4. provide all appropriate written evaluation reports to FACE; and
5. schedule and facilitate IEP team meetings, using a native language interpreter when needed, to share evaluation results with parents/guardian(s) and appropriate staff and to collaboratively develop IEP learning goals/objectives/activities that meet each child’s educational needs.

**FACE** will

1. obtain information documenting the need for referral;
2. provide a referral for each child by completing designated referral forms; and
3. submit completed referral forms to Initials of School District for action as per Initials of School District /SD SEP and Name of School timelines.

C. Comprehensive Evaluation

Initials of School District will

1. formally evaluate children who may require special needs services at FACE in their most natural environment, with agreed-upon assessments for vision, hearing, speech/language (SLP), occupational therapy (OT), physical therapy (PT), and psycho-educational development;
2. whenever possible, conduct appropriate evaluations at designated Name of School sites;
3. provide evaluation assessments, materials, and testing protocols;
4. provide a native language interpreter for families in need of such assistance for all formal evaluations;
5. provide written evaluation reports according to IDEA requirements; and
6. initiate Multidisciplinary Team (MDT) meetings, when appropriate.

FACE will

1. provide initial developmental, hearing, and vision screening within 45 days after a child’s enrollment and report results to Initials of School District when there are identifiable concerns;
2. compile background information for all children with identified concerns using the appropriate Initials of School District and FACE forms;
3. obtain signatures from parents/guardian(s) for permission to share information that may result in an evaluation;
4. notify Initials of School District that parental permission to share information has been obtained within 24 hours of obtaining consent;
5. notify parents/guardian(s) verbally and in writing of the date, time, and place of evaluation;
6. provide families with transportation, when necessary, to appointments at designated Initials of School District sites and/or Name of School sites;
7. provide a native language interpreter for families in need of such assistance for all evaluations; and
8. participate in MDT meetings when appropriate and notify parents/guardian(s) in a timely manner of such meetings.
D. IEP Development

Initials of School District and FACE will

1. set up IEP meetings cooperatively, including the provision of a native language interpreter when needed; and
2. develop IEP goals and objectives cooperatively with parents/guardian(s) to meet each child’s educational needs in accordance with IDEA requirements.

Initials of School District will

1. initiate the MDT/IEP process by notifying appropriate Name of School staff that all evaluations are completed;
2. use Initials of School District’s IEP forms; and
3. provide copies of each child’s IEP (with the signed parent consent form) to parents/guardian(s) and appropriate Name of School staff and teachers.

FACE will

• confirm the date/time/place of IEP meetings with parents/guardian(s) verbally and in writing.

E. Placement

Initials of School District will

1. follow federal and state guidelines and requirements for placement;
2. conduct MDT meetings with parents/guardian(s) to determine the LRE for each child and inform them of procedural safeguards and due process; and
3. provide a native language interpreter for families when needed.

FACE will

1. provide community-based placement for identified children in the LRE;
2. follow eligibility criteria for enrollment in FACE; and
3. provide program information packets to parents/guardian(s) of children referred to any of Name of School’s family/early education programs.

F. Specific Program Service Delivery

Initials of School District will
1. provide direct and consultative therapy to meet each child’s IEP goals;
2. plan and conduct continuous inservice training to FACE staff on culturally sensitive techniques for working with and supporting young children with disabilities; and
3. provide ongoing staff consultation and training to meet each child’s IEP goals.

FACE will
1. collaborate with Initials of School District to implement IEP goals;
2. provide educational materials and equipment for classroom curriculum and IEP implementation;
3. provide appropriate services to children in accordance with IDEA eligibility guidelines, as necessary; and
4. provide transportation for children, when needed, to designated community sites for service delivery.

G. Procedures for Review/Monitoring Child’s Progress

Initials of School District will
1. provide ongoing consultation to appropriate FACE staff regarding each child’s progress;
2. prepare written progress reports for each child, as requested by parents/guardian(s), and submit them to the appropriate FACE staff;
3. initiate an annual review meeting on the child’s progress with parents/guardian(s) and appropriate staff and, when needed, provide native language interpretation; and
4. notify parents/guardian(s) of the annual review meeting in a timely manner, both verbally and in writing.

FACE will
1. keep daily attendance records for each child served and a current log of Initials of School District and other service provider visits;
2. consult with Initials of School District staff regarding each child’s progress;
3. report the child’s progress to parents/guardian(s) at scheduled meetings;
4. meet with parents/guardian(s) when Initials of School District progress reports are received to share and explain their child’s progress; and
5. participate in annual review meetings with Initials of School District staff and parents/guardian(s).

H. Procedures for Hiring and Supervising Staff Providing Special Services

Initials of School District and Name of School will
1. follow their own specific hiring procedures;
2. hire and supervise their own staff;
3. provide appropriate personnel for carrying out the terms of this Agreement;
4. notify each other of any concerns or needs of the staff at Name of School; and
5. communicate with each other about any other pertinent information/situations that will affect children and/or the timely delivery of services.

V. SPECIAL EDUCATION SERVICES

FACE will be responsible for:

1. documenting and providing written observations of each child’s social-emotional development and any identified issues/concerns, in collaboration with other Name of School staff;
2. obtaining a completed Medical Health History for each child enrolled;
3. using the Ages & Stages Questionnaire (ASQ) and its Social-Emotional Checklist (ASQ:SE) to assess the developmental level of each child within 45 days of enrollment;
4. conducting interviews with parents/guardian(s) on their child’s social-emotional development when there are concerns that staff or parents/guardian(s) may have identified;
5. conducting more specific screening of a child by appropriate staff and/or health professionals when the observational assessments indicate a need for further attention;
6. immediately informing parents/guardian(s) when further screening of their child indicates the need for special education services and requesting their permission, with signed consent forms, to have their child undergo further professional evaluation by
   a. Mental Health Physician (Westernized Mental Health Services) or
   b. Native Practitioner (Traditional Diagnostician/Healer) or
   c. Both
7. making referrals for FACE children by
   a. having parents/guardian(s) and their child’s teacher complete the appropriate assessments mandated by each program (e.g., ASQ, ASQ:SE, Work Sampling System, Mental Health Behavior Checklist); and
   b. completing the appropriate referral and consent forms for each child and forwarding them to Initials of School District; and
8. ensuring that each child and family will have transportation to the evaluation and assessment site(s).

Initials of School District will be responsible for
1. accepting the referral and supporting documents from FACE staff and promptly taking action on the concerns identified; and
2. providing formal evaluation and assessment in the following areas:
   a. Physical Coordination/Development
   b. Intellectual Development
   c. Sensory Development
   d. Emotional Development
   e. Social Development
   f. Speech/Language Development
   g. Physical Examination

Initials of School District and Name of School will be responsible for

1. actively participating as members of a Study Team, comprised of the parents/guardian(s), the child’s teacher, and as appropriate, the Health Physician/Native Practitioner, Initials of School District representative, and other concerned service providers; and
2. ensuring that the parents/guardian(s), members of the Study Team, and other service providers review the child’s progress.

VI. TRANSITION

The transition of children with disabilities in the Name of School community occurs when a child is exiting the Name of School Early Intervention Program (EI) or another EI program and enters Name of School FACE, Head Start, or a local preschool or childcare center. Another transition occurs when a child is exiting preschool and entering kindergarten at Initials of School District schools or a Bureau of Indian Education (BIE)-funded grant school. Effective transition occurs when all appropriate parties are communicating, including but not limited to: Initials of School District schools, EI, and the parents/guardian(s) of the child with a disability. In order to assure the effective transition of children from one educational setting to another, the following procedures have been established.

Initials of School District and Name of School will

1. cooperate in coordinating the scheduling of transition activities, including 90-day transition conferences initiated by EI, for parents/guardian(s) of children exiting EI;
2. provide staff to discuss options for the most appropriate placement for their children;
3. cooperate in arranging family visits and transport, when needed, for transitioning children and their parents/guardian(s) to local family/early education programs and schools before their annual review meeting;
4. provide each family with written parent information for the program/school in which their child is enrolled; and
5. provide a native language interpreter for families in need of such assistance throughout the transition process.

TECHNICAL ASSISTANCE

Initials of School District and FACE will

1. inform each other of all pertinent training opportunities related to services for young children with disabilities and invite staff to participate;
2. coordinate Initials of School District training and technical assistance activities with all program calendars to ensure full staff and, as applicable, family participation; and
3. network and collaborate with local/regional resource programs—such as the Indian Children’s Program (ICP), Parent Training and Information Centers, and the National Indian Parent Information Center (NIPIC)—on staff training and family/parenting education, advocacy, and ongoing support.

VII. CHILD COUNT AND REPORTING

Initials of School District and FACE will maintain their own records according to regulatory guidelines and provide documentation and support to other parties, as requested.

VIII. DISPUTE RESOLUTION

In the event that a misunderstanding or difference of opinion occurs regarding the necessary procedures to accomplish the objectives of this Agreement, both parties will meet to find a solution.

X. TERMINATION/REVIEW

This Agreement will be reviewed annually and revised, as needed, by Initials of School District and Name of School in order to remain in effect. This Agreement may be terminated by either party with a 30-day written notice.

XI. SIGNATURES
FOR **Initials of School District** – AUTHORIZED LEA REPRESENTATIVE

First Name, Last Name, Superintendent, Date, Name of School District, PO Box Address, City, State, Zip Code, Phone Number

FOR **Name of School** – AUTHORIZED REPRESENTATIVE

First Name, Last Name, Principal, Date, School District, School Name, School Address, City, State, Zip Code, Phone Number

FOR **SCHOOL BOARD PRESIDENT** – AUTHORIZED REPRESENTATIVE

First Name, Last Name, Board President, Date, School Name, School Address, City, State, Zip Code, Phone Number

FOR **EDUCATION LINE OFFICER** – AUTHORIZED REPRESENTATIVE

First Name, Last Name, Date, Agency Representing, Agency Address, City, State, Zip Code, Phone Number

For more information visit: [www.doe.sd.gov](http://www.doe.sd.gov)

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