First Steps: A Parent Information Handbook

Infant and Toddler Programs and Preschool Special Education

A publication of Montana’s Parent Center
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### Introduction

Children have different potentials and develop at different rates. As they grow, some children experience delays in one or more areas. Children with delays can benefit from therapies, support services, and special education, which stimulate their development and help them to overcome or “work around” their developmental lags.

This handbook describes the publicly supported services in Montana that are available for children, from birth through age six, who are experiencing developmental delays, disabling conditions, or who are "at risk" for developing them. First Steps can help you make the best use of the services for your child.

### Part I: Early Intervention, vs. Preschool Special Education Services—What is the Difference?

The Part C Infant and Toddler Program is the responsibility of the Developmental Disabilities Program (DDP). The Office of Public Instruction (OPI), Division of Special Education, and local school districts run the Part B Preschool Special Education Program. These two systems—DDP and OPI—have different procedures and rules.

Part C Early Intervention services for infants and toddlers with disabilities end when the child turns three; if the child needs special education services he or she can go to Part B Special Education services provided by local public schools under the IDEIA. Parents need to recognize the differences between the systems and to be prepared for some changes in services that are provided to their child.

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### Introduction to Montana’s Part C Early Intervention Programs

Families are not required to take part in early intervention programs. Their involvement is voluntary. Local child and family service agencies provide early intervention services. In early intervention, the main contact for the family is their Family Support Specialist.

Planning for services happens at the Individual Family Support Program (IFSP) meeting. The parents are considered the lead member of the IFSP team. The IFSP document belongs to the family, and details the child and family’s plan for receiving early education and related services.

At the IFSP meeting, the parent, the Family Support Specialist, and others plan what services are needed, who will provide the services, where the services will be provided, how long the services will continue, and how often the child/family will receive services.
Services are based on the child’s needs and the needs of the family. A variety of local programs and professionals may provide needed services. Some service options depend upon geographic location. Services provided through local agencies might include home visits, parent and child education programs, and private therapies.

Children usually transition out of early intervention services at age 3. Eligible children transition into services provided through their local school district. Other service options, such as continuing services with the family service agency or looking for a community preschool program, are discussed with the family. Some children may be served by both the family service agency and the local school district.

**Introduction to Montana’s Part B Preschool Special Education Programs**

School districts are required to find and identify all children ages 3 through 21 years old, who may be eligible for special education; this process is called Child Find, and helps the district evaluate potentially eligible children. You may refer your child for evaluation by contacting your local school district, explaining your concerns, providing documentation, and signing a written consent for your child’s evaluation.

When the *Child Study Team* reviews the *comprehensive educational evaluation*, the members can identify the child’s educational needs. The Child Study Team will evaluate the child, determine whether the child meets the criteria defining disability under the IDEIA, and identify which category or categories are appropriate.

Planning for services happens at the *Individualized Education Program (IEP)* meeting. The parents are considered a full member of the IEP team. The IEP document details the child’s plan for special education and related services.

At the IEP meeting, goals and objectives are written to address these identified needs and are based on the child’s level of performance. The IEP team also sets the starting date for the special education and related services. The team decides what services are necessary to meet the educational goals, then where the child will receive services (placement). The team also decides how often the child will get the services (frequency) and how long the services will continue (duration).

The IEP team will meet at least annually to review and, if appropriate, revise the IEP. If the IEP team decides that the child has met all of the goals and objectives in the IEP and no longer needs special education, a Child Study Team will gather to determine whether the student still requires special education.

The local school district will have options for meeting the child’s educational needs. These may include preschool special education in the classroom and provision of related services like physical and speech therapy, which support the specialized instruction. The services may be provided at the local school or at other community-based programs.

Children are not required to take part in preschool special education programs. Their involvement is voluntary. The local school district provides the needed educational and related services for the child. In local schools, the main contact for the parents is usually their child’s preschool special education teacher.
Part II: Early Intervention Infant and Toddler Programs—Early Learning

When children are very young, we expect most of their needs to be met by their families. However, when children have developmental problems, it is occasionally necessary to supplement what the family can do by seeking help from professionals like doctors, nurses, teachers, and therapists. Getting outside help and support early enough often lessens a child’s problems and helps him or her to develop more normally. Though it is sometimes difficult to think of infants and young children as “going to school,” early training and therapy can make a tremendous difference.

The preschool years are learning years for all young children; but for children with special needs, early learning takes on greater importance. Skills like walking, talking, learning to feed and dress oneself, and getting along with others are often learned before the age of six. Some of these skills, such as language development, are best taught during the preschool years. There are a number of useful services available for infants, toddlers and preschool children with special needs in Montana.

Values We Share

Montana’s early intervention services for children with special developmental needs are based on the following set of beliefs and values:

- As much as possible and appropriate, children belong in families;
- Families need supports so they can nurture their children in the home;
- Parents should be empowered to make their own decisions about how to meet their children’s needs;
- Infants, toddlers, and children with special developmental needs must receive their services in natural environments (where they would be if they had no disability) and should have opportunities for inclusion in the typical activities of their families, neighborhoods, public schools, and communities;
- Activities for children with special needs should be age and developmentally appropriate;
- Services for children should be individualized and should reflect high expectations for their growth and development;
- Access to services is based on eligibility and family choice;
- To the greatest degree possible, services to children should be provided through cooperation among parents, professionals and service agencies; and,
- Emphasize the "person first," for example, say "my son, who has a disability," not "my disabled son”—the reason for this "person first" emphasis is to help all the members of our communities understand that people with disabilities are just people, like everyone else.

Services Guaranteed by Law

Both federal and state law guarantee services to eligible young children with special developmental needs. The federal law authorizes a grant program to deliver early intervention services to children with disabilities from birth through two years. The Montana Department of Public Health and Human Services, Developmental Disabilities Program is the agency responsible for providing early intervention services to infants and toddlers (0-3 years) with developmental delays. Services are available for two age groups: 0-3 and 3-5 years. The Infant and Toddler Program is the responsibility of the Developmental Disabilities Program.
Eligibility for Early Intervention, Part C

Children from birth up to age three with developmental delays are eligible for services in the Infant and Toddler Program. These services end when the child reaches three years of age.

Montana defines Part C eligibility as:

Children from birth through age two inclusive, are eligible for early intervention and family support services under Part C of the Individuals with Disabilities Education and Information Act (IDEIA) if they:

1. Have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (e.g. sensor y impairments, inborn errors of metabolism, microcephaly, fetal alcohol syndrome, epilepsy, Down syndrome or other chromosomal abnormalities), even though the delay may not exist at the time of diagnosis.
2. Are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures in one or more of the following areas:
   - Cognitive development;
   - Physical development, including vision and hearing;
   - Speech and language development;
   - Social and emotional development; and,
   - Self-help skills.

An informed clinical opinion must be used when determining eligibility for services under Part C in the absence of standardized measures, or if the standardized measures and procedures are not appropriate for a given age or developmental level. Children under the age of six may receive the nonspecific label, Child with a Disability, which shows that the child has developmental delays that affect learning, but it is too soon to determine a specific special education label.

Evaluation and Developmental Milestones

In order for a child to be eligible, he or she must have received a comprehensive assessment, including all of the relevant information available about the child’s development. A child may not be evaluated unless the parents give their written permission. The assessment data is gathered by a team that includes the parents, a Family Support Specialist, medical practitioners, or others who have knowledge of the child’s abilities and special needs.

Parents are important contributors to the evaluation process. You have the right to help choose which evaluation tools will be used and to participate in the assessment process at the level which is comfortable for you. The results of the evaluation must be explained in understandable terms and you have a right to receive copies of all the evaluation results.
Children with developmental delays are often “diagnosed” by a variety of professionals. They may receive a number of different medical diagnoses or descriptions: Down syndrome, pervasive developmental delay, multi-handicapped, medically fragile, low birth weight, sensory impaired, brain damaged, cerebral palsy, and more. Some children receive no specific diagnosis. To qualify for the Infant and Toddler Program, the child needs a functional description of what he or she can or cannot do; a medical diagnosis is not required.

A functional analysis tells which developmental milestones—smiling, gurgling, sitting up, walking, talking, etc.—that a child has mastered. The child’s performance is measured alongside the normal developmental range for a particular age. Functional diagnosis is helpful for planning special programs for a child, but it may not shed any light on the causes for delays in development.

**Individualized Family Service Plan (IFSP)**

When a child is eligible for Part C early intervention services in the Infant and Toddler Program, the parents, a Family Support Specialist, and other professionals meet as a team to write an Individualized Family Service Plan (IFSP). The IFSP includes the:

- Child’s present level of development;
- Family’s strengths and needs relating to enhancing the child’s development;
- Outcomes expected to be achieved, written in the family’s own words;
- Goals describing how positive results will be accomplished;
- Listing of the family support services, including when, where, how often, and how each service will be paid for;
- Projected dates for starting and ending services;
- Name of the service coordinator; and,
- Steps taken to support transition.

**Review of the IFSP**

As a parent, if you are not satisfied with some aspect of the IFSP, you may sign off on services you want and revisit other issues and service needs as time goes on. Parents must approve at least one outcome and set of objectives in order to begin services. IFSPs are dynamic documents which can be changed as families’ needs change. The IFSP must be reviewed at least every six months. If a change in the IFSP is needed sooner than 6 months, the parent or anyone working with the child may call for a meeting to revise the IFSP.

**Types of Services**

The Infant and Toddler Program allows for a wide variety of possible services to meet the family’s and the child’s individual needs, including:

- Special instruction;
- Parent and family education and counseling services;
- Speech pathology and audiology services;
- Occupational therapy services;
- Physical therapy services;
- Psychological services;
- Service coordination and social work services;
- Home visits;
- Early identification, screening and assessment;
- Health services necessary to benefit from early intervention services;
- Nutrition services;
- Vision services;
- Assistive technology devices and services; and,
- Transportation and related costs.
Family Involvement

Family involvement is essential to the Infant and Toddler Program. A child cannot be evaluated or served without the consent and involvement of parents. Parents are involved as primary decision-makers in every step, including:

- Identifying family needs and resources;
- Identifying what role they wish to play in their child’s evaluation;
- Identifying who the members of the IFSP Team will be;
- Determining the desired outcomes on the IFSP;
- Identifying the role they wish to play in service coordination;
- Determining how often and when home visits will take place;
- Choosing which resource and service options to pursue; and
- Evaluating the progress of the IFSP and deciding on necessary changes.

Family-Centered Services

Infants and toddlers do most of their early learning in their families. You are your children’s first and best teachers. Parents sometimes seek the assistance of professionals with experience in particular areas like speech and language, physical therapy, occupational therapy, health services, behavior management, or infant stimulation. A child may need any or all of these special services, but the child remains part of a family. Whatever services are provided are offered to serve the family as a whole.

Family Support

Raising a child with a disability can be challenging for parents. You are faced with sorting through the advice of professionals and making decisions that you think are in the best interests of your child. You must deal with greater demands on your time, energy, personal relationships, and financial resources. You must consider the needs of all family members—the child with special needs, other children, and close relatives. You may struggle, too, with your own emotions, disappointments, and concerns about the future.

The Infant and Toddler Program supports families as they meet all of these challenges. The program is not supposed to impose any particular philosophy or to be intrusive in family life. Instead, the Infant and Toddler Program attempts to meet the developmental needs of children and the families needs for support.

Professional Roles

The individuals who work with children in the Part C Program must be qualified professionals. They may include any of the following:

- Family support specialists,
- Special educators,
- Speech and language pathologists,
- Audiologists,
- Occupational therapists,
- Physical therapists,
- Psychologists,
- Social workers,
- Nurses, and
- Nutritionists.
A professional is considered qualified if he or she has met the standards set for licensure by the State of Montana. To deliver Part C service coordination in Montana, a professional must hold Family Support Specialist certification from the Developmental Disabilities Program. Habilitation aides or teaching assistants who do not have professional credentials may provide some services as long as they are properly supervised and trained by a licensed professional or a certified Family Support Specialist.

Cost

If a child is eligible for the Infant and Toddler Program, the child receives services in the program without cost to the family. However, if the child is eligible for Supplemental Security Income (SSI) or other similar programs, or has private health insurance, funds from these programs or insurance benefits may be used first before Part C dollars pay for services in the Infant and Toddler Program. Part C can make interim payments if there is an otherwise unacceptable delay in provision of services; Part C would then seek reimbursement from the originally responsible public or private source.

Parents’ Rights in Early Intervention

Parents of a child in the Infant and Toddler Program have the following rights:

· Timely resolution of complaints;
· Confidentiality of personally identifiable information;
· Opportunity to examine records;
· Appointment of a surrogate parent if natural parents are not available to represent the child;
· Prior notice for identification, evaluation, placement or provision of services;
· Notice in the parent’s native language; and
· Continuation of services to the child during any period when action is being taken on a complaint.

Settling Disagreements

If a parent disagrees with professionals on the IFSP Team, the parent can:

· Try to resolve the disagreement informally,
· Ask for another meeting of the IFSP Team to discuss the issues again,
· Utilize the agency’s internal grievance procedures,
· Appeal to the Administrator of the Developmental Disabilities Program,
· File a complaint with the Director of the Department of Public Health and Human Services, and
· Appeal through a district court or file a civil action.

Steps in Transition from Early Intervention to Special Education

Six to three months before a child’s third birthday, the Individualized Family Service Plan (IFSP) team must meet to plan the child’s transition from the Part C Early Intervention program to Part B Special Education. Some children will not need any more special services, others will move into the preschool special education program from the local school district or co-op. Other children may need services from more local programs such as Head Start or a community childcare center. Some families will continue to get services from their early intervention agency. However, these state-funded services are limited, and are not covered by federal law.
When children need preschool special education, a joint planning meeting (or meetings) must occur at least 90 days before the move from Part C Early Intervention programs to the Part B preschool special education. Since eligibility rules are not the same between the programs, combined meetings help the professionals who determine eligibility for Part B preschool special education services.

Preschool Transition focuses on the child’s third birthday because:
1. The child is no longer eligible for the IDEA/Part C early intervention program;
2. The child may be eligible for the local IDEA/Part B Special Education program; and
3. The child may be eligible for other discretionary (not required by law) disability services.

Your Family Support Specialist will, with your permission:
· Convene a Transition Planning Meeting at least 90 days and up to six months before the child’s third birthday;
· Invite a representative from the local public school’s special preschool education program to attend the meeting;
· Schedule the Transition Planning Meeting at a time and place that is mutually agreed upon by all those who will attend; and
· Assist your family through the transition process.

The “core team” of the Transition Planning Meeting includes parents of the child, the family’s Family Support Specialist, and a representative of the local public school or special education cooperative. The team members will:
· Determine whether other parties should participate, as necessary;
· Discuss the similarities and differences between early intervention and special education programs under IDEA;
· Discuss the termination of Part C early intervention services;
· Advise the family about alternatives to special education if the child is not eligible to continue under IDEA services, or if the parent chooses not to refer for IDEA services;
· Arrange for the family to meet special education personnel and visit possible preschool sites, if the family wishes;
· With written parental consent, share records (assessments, evaluations, IFSPs, other useful information) with the public school preschool special education program;
· Help the family to recognize the stress inherent in making the change from one program to another; and
· Assist the child and the family to begin to develop a trusting, effective working relationship with the staff and administration of the preschool special education program.

The purposes of the Transition Planning Meeting are to:
· Provide the family an opportunity to meet the public school staff and to begin to develop mutually supportive relationships;
· Review the child’s priority outcomes for the time from his/her third birthday through the beginning of the next school year;
· Describe the steps and anticipated outcomes of the transition process;
· Consider future needs and placements in relation to current services;
· Discuss how to help prepare the child and family for changes in service delivery;
· Help the family to decide if they wish to make a referral for evaluation for preschool special education services; and
· Develop a plan for transition.
Other things to remember about Transition Planning Meetings:
- More than one meeting may be necessary;
- The transition meeting should, above all, help the family to understand preschool procedures and services;
- The transition plan which is developed at the transition meeting becomes part of the child’s IFSP; and
- The family may or may not decide to refer their child for evaluation for preschool special education after the transition planning meeting.

Helpful Hints for Families in Transition from Part C to Part B

1. **Start early**
   The infant and toddler years go by quickly. Begin to plan early for your child’s next step at age three.

2. **Be part of the transition planning team**
   Play an active role in the decisions made about your child’s transition.

3. **Know and understand your child’s educational rights**
   When you sign the form to have your child evaluated by the school district, your school district will give you a copy of “Parents Rights in the Special Education Process.” Read the booklet. If you do not understand these rights, ask your special education teacher or a consultant from PLUK (1-800-222-7585) for help.

4. **Know and understand the responsibilities of the school district**
   Preschool special education is very different from the early intervention program. It is important for you to understand the differences.

5. **Think about your child’s strengths and abilities**
   An important role for you is to talk about your child’s strengths. Sharing the things your child likes and dislikes with the team can help the school staff to understand and serve your child better.

6. **Remember that you are going through a transition, too**
   The Part C program is very nurturing for families as well as for children. Preschool special education is focused on a child’s educational needs and not on family needs. You will be saying goodbye to professionals who have been significant in your life and meeting a new group of professionals. Give yourself time to adjust to the change.
Part III: Preschool Special Education

Part C to Part B Transition Checklist

1. The transition meeting was held and the transition plan is part of the child’s current IFSP.
2. The child was referred to the local school district.
3. The following records and information were provided to the school district:
   - Birth certificate
   - Current picture of the child
   - Shot (immunization) record
   - Social Security number
   - Medicaid number (if child has one)
   - Emergency contacts
   - Child’s records from early intervention agency, including IFSPs listing the child focused services provided
   - Other preschool or childcare program records
   - Hospital, clinic, or other medical records
4. Testing and evaluations were completed.
5. The Child Study Team meeting was held with school staff.
   If the child was not eligible for special education services from the local school district, other options have been discussed. If the child was eligible for special education services from the school:
6. Parents helped write the child’s IEP.
7. Parents helped decide the child’s school placement.
8. Transportation needs were identified and met.
9. Parents visited the local school district’s preschool special education program.
10. Parents met and talked with the child’s new public school teacher(s).
11. The child met with his or her new teacher(s).

Child Find

Each public school district is required to locate, identify and evaluate all children with disabilities ages 3 through 21. Before a child can receive special education and related services, the child must be evaluated. The special education process begins with Child Find. Child Find is the method of discovering children who may be eligible for services. Finding eligible children:
   • Is the responsibility of both the early intervention agency and the public school
   • Requires cooperation from the family, the early intervention agency, and the public school to ensure smooth transitions between programs; and
   • Ensures that the family may use the Transition Planning Meeting procedure or other Child Find procedures to access the IDEIA preschool special education program.

You can refer your child for a special education evaluation. Professionals who work with your child, like your family physician or a therapist, may make a referral. A child may also be referred because of concerns raised by a Preschool Screening.
To make a referral:
1. Contact your local school district,
2. Discuss the reasons for suspecting that your child has a disability,
3. Summarize the supports and services your child received through early intervention services and their results and outcomes,
4. Fill out the district’s referral form describing the child’s learning problems or developmental delays, and
5. Give your consent in writing so that your child can be tested for special education.

**Evaluation**

Your local Child Find process will lead to an assessment by the Child Study Team (CST). If you want your child to be evaluated for special education, you need to give written consent before the evaluation. As a parent, you can ask your school for an evaluation and the district’s special education personnel will help you plan your child’s initial assessment. An assessment must look at the child from several viewpoints. It must also be nonbiased and nondiscriminatory. If your child speaks a language other than English, your child must be tested in the language that he or she uses and understands. The evaluation cannot be limited to one test. The evaluation may include:

- Individualized testing;
- Observation;
- Review of records;
- Collection of samples of your child’s work;
- Vision and hearing exams;
- Medical history;
- Standardized developmental assessment;
- Language development evaluation;
- Observations of social behavior;
- Observations in various environments;
- Information from family members and others who know the child well; and
- Information from teachers, doctors, therapists, and others who have worked with the child.

Before starting any evaluation, school staff will help you to develop a plan to test your child. You must give your permission in writing before your child can be tested. You will have an opportunity to contribute to the assessment by providing information about how your child acts at home and in the community. Your school may ask you to release records of your child’s education and other relevant information, especially if another agency refers your child. You may also want to supply copies of results of evaluations done outside of school, or letters from physicians.

Parents may request an evaluation or a re-evaluation at any time. Parent requests should be made in writing, and you should ask the district for a timely response to your request. You have the right to be fully informed of the results of the assessment. At the Child Study Team meeting, you will meet with public school personnel to discuss the results of the evaluation.
Parent Involvement

Parents are important decision-makers in the special education of young children. School districts must inform parents about the options available and the procedures used in special education. The family and school personnel become the team that makes decisions about the child's needs and services. Representatives of your school district should discuss with you:

- The nature of your child’s disability and its implications for education,
- The methods of coordinating your child’s services, and the
- School district’s special education program and processes.

Child Study Team (CST)

The Child Study Team (CST) includes parents, a school administrator, a special education teacher, a regular education teacher (if the child is in kindergarten), and other individuals who are qualified to report on the results of a child’s evaluation. If the child is enrolled or going to be enrolled in Head Start or a private preschool, representatives of those programs also become part of the Child Study Team.

The Child Study Team has two purposes:

- To decide whether or not the information from the evaluation indicates that the child has a disability, and
- To determine whether or not the child needs special education.

Independent Educational Evaluation

After members of the school staff share the evaluation results with you, you can decide if the results match your view of your child. If you do not think the evaluation or assessment results are correct, you can disagree with the CST results and request an independent educational evaluation by a qualified person outside of the school district.

The school district must pay for the independent educational evaluation done by a qualified examiner unless the district disagrees about the need for another evaluation. If the district disagrees with you, then the district can ask for a due process hearing and maintain that its evaluation was appropriate and that it should not have to pay for the independent educational evaluation.

If an independent evaluation is done, the Child Study Team or IEP team must consider the results. The results are crucial for the teams involved in making decisions about your child’s identification, program, and school placement.

Eligibility for Preschool Special Education

A child is eligible for preschool special education if he or she meets the criteria for one of the disabling conditions recognized by the Individuals with Disabilities Education Act (IDEA) and Montana Code. The child must be: speech/language impaired, other health impaired, hearing impaired (includes deafness), visually impaired (includes blindness), orthopedically impaired, cognitively delayed, multiply-disabled, deaf/blind, seriously emotionally disturbed, learning disabled, autistic, or traumatic brain injured. A child who is 5 years old or younger may be identified as a child with disabilities without the disabilities being specified.

If the child is eligible for preschool special education services, the IEP team will set a date to start special education services. This date may be on the child's third birthday or on the first day of the following school year. An eligible child whose third birthday falls during the summer vacation begins services in the fall unless the child needs Extended School Year (ESY) services.
Individualized Education Program (IEP) Elements

The Individualized Education Program (IEP) is similar to the Individualized Family Service Plan (IFSP) used in the 0-2 program. The IEP contains goals and objectives for the child’s special education program. It also lists the child’s related services and identifies in what type of placement—home-based, center-based, private preschool, Head Start—the child will receive his or her special education program. A team including the parents, a special education teacher, a school administrator and others writes the IEP. The IEP cannot be implemented until parents have approved it. Once an IEP has been written and signed, it must be put into practice immediately.

Extended School Year

Normally special education services are provided during the regular school year, but some children require more schooling than that. Extended School Year (ESY) services may be written into the IEP and provided to a child during the summer months. ESY services are offered to prevent significant loss of previously learned skills. ESY applies to specific educational goals and objectives. For more information on ESY, contact the Office of Public Instruction (OPI) and ask for the booklet "Extended School Year Programs."

Related Services

Children in special education are entitled to a wide variety of services if they need those services in order to benefit from their education. These related services may include (but are not limited to):

- Transportation,
- Physical therapy,
- Occupational therapy,
- Orientation,
- Mobility services,
- School health services,
- Speech and Language pathology services,
- Audiology services,
- Recreation and Recreation therapy service,
- Social work services in schools,
- Psychological services,
- Counseling services,
- Rehabilitation counseling services,
- Medical services for diagnostic or evaluation purposes,
- Assistive technology services, and
- Parent training services.

The IEP should indicate the related services the child needs, how much of the service is required, and how often the service will be provided.

Transportation

If transportation is a related service that a child needs, the school district must provide the transportation, contract with another agency to do so, or contract with the parents to bring their child to school. Transportation means round trip, home to school and school to home services. If a parent has been offered a transportation contract, but does not want to transport the child, the school district is still responsible for providing transportation. Parents cannot be forced to provide transportation if they are unwilling or unable to do so.
IEP Review

The Individualized Education Program (IEP) must be reviewed periodically because preschool children grow and change very rapidly. Parents can ask for a review at any time. The IEP must be reviewed and rewritten at least annually. The annual review should consider transition into the primary grades and into less restrictive environments.

A comprehensive reevaluation of the child’s strengths and weaknesses must be conducted at least every three years. Parents or teachers can ask for a reevaluation at any time that it seems necessary and appropriate.

Free, Appropriate Public Education (FAPE)

When a child enters a preschool special education program, he or she is guaranteed all of the protections and benefits of the federal and state special education laws. The central benefit under these laws is a free, appropriate public education. Every child who qualifies for special education has the right to a public education. It does not matter how severe the child’s disabilities may be or how much special education the child requires. Every qualifying child must receive an appropriate educational program, and the services must be provided without cost to the parents.

Placement in the Least Restrictive Environment (LRE)

Every child in special education must be placed in a program that is in the least restrictive environment. The least restrictive environment means the placement that is as close as possible to the regular education program.

Special education law favors placing children with disabilities in regular classrooms with whatever supplemental aids they need to be successful. If a child is not going to be placed in regular education, the school district must justify the removal from regular education as necessary to meet the child’s needs.

The least restrictive environment (LRE) at the preschool level has been interpreted somewhat differently from LRE at the elementary school level. Since few public schools offer preschool programs for children aged 3 and 4, there is no “regular” classroom environment where preschoolers with special needs can be placed with children who are the same age. Preschool children may, however, be integrated into kindergarten classes with 5 and 6 year-olds, or, they may be served in a community-based preschool classroom, a Head Start class, a preschool special education classroom with children who are the same age, or in a home based program in which the special education teacher provides services in the child’s home.
All children need a chance to make friends with other children their age. Special education law encourages school districts to give children with disabilities the chance to associate with other children, both children with and without disabilities, so that they can build a circle of friends and acquaintances.

All children in special education—no matter where they receive their program—have the right to spend at least part of the school day with children who do not have disabilities. The least restrictive environment for preschool children may be achieved in any of the following ways:

- Locating a preschool special education program in a regular elementary school,
- Linking a preschool special education program to preschool programs operated by other public or private agencies (e.g. Head Start), and
- Combining children who have disabilities with children who do not have disabilities in a preschool special education program.

A child in a preschool special education program may be placed in a private preschool if such a placement is necessary to implement the child’s Individualized Education Program (IEP). The school district would be responsible for the costs of the private placement for the portion of time that the child was receiving special education.

**Qualified Personnel**

Special education and related services for preschool children must be provided by qualified personnel. These professionals must have the training to hold licenses in their specific fields (school psychologist, speech/language pathology, special education, physical or occupational therapy). Unless private preschool or Head Start teachers have these licenses, they may not provide special education and related services.

Certified teachers with child development credentials and certified elementary teachers may assist with special education but may not provide special education unless they are also endorsed as special education teachers.

**Appropriate Facilities**

Classes for preschool children with special needs must be provided in classrooms comparable to regular education classrooms. These classrooms should meet at least minimum standards for heat, light and ventilation. Classrooms should have either toilet facilities or appropriate access to toilet facilities. School buildings must be physically accessible to the children who are in the program and should be equipped with unbreakable furniture and toys, covered electrical outlets, tap water at safe temperatures and appropriate exits in the event of an emergency.

**Special Education Program Models**

Special education can be provided to preschool children in a number of ways:

- In the child’s home by an itinerant special education teacher;
- In the neighborhood elementary school building, where there are opportunities for interaction with other students throughout the course of the school day;
- Center-based programs involve bringing children to a central location for a preschool special education class—the program usually lasts for two hours per day for either three, four, or five days per week (according to need)—some children may require more or less time in preschool special education than two hours per day;
- Five year-old children with disabilities may participate in a regular kindergarten program with supplementary special education and some children may be placed both in kindergarten and in a preschool special education class;
When the needs of the child require it, two or more of the options above may be combined into a dual placement. Where questions arise regarding placement in home school settings or private school settings, call the Office of Public Instruction at (406) 444-4429, for specific information and requirements.

An IEP team may also develop another locally suitable placement appropriate to the student’s special education needs. The IEP team is free to select any model but must ensure both free appropriate public education and least restrictive environment as it identifies an appropriate placement for the child.

Moving On—Kindergarten and First Grade Transition

When children are three, four, and five years old, it is sometimes hard to imagine them attending "school" as older children do. Preschool special education is a program designed to meet the unique developmental needs of a particular child. The program may focus on self-help skills, motor development, language skills, pre-academic learning, social skills or any combination of these. Preschool special education is education. It is not designed to meet a child’s medical needs, nor does it provide the childcare services typically found in daycare.

As a child's sixth birthday approaches, a number of important decisions have to be made. First, if the child has been identified as a “child with disabilities,” that generic classification must be changed to one of the disabling conditions found in Montana’s special education law for school-aged children. This change in classification can be traumatic for parents. Parents should again insist that the child be thoroughly and properly evaluated before any new classification is applied.

A second important decision concerns placement, specifically how the IEP team will determine the appropriate placement for the student entering kindergarten or first grade in the public school, following the evaluation. The preference in special education is for placement in the regular classroom if the child’s needs are being met in that setting. When considering a regular classroom placement, the IEP team should consider what barriers there may be to the child’s success and how those barriers could be eliminated.

Parents’ Rights In the Special Education Process

Parents of children in special education are intended to participate fully with professionals in designing their child’s educational program. To guarantee that parents have an opportunity to participate, special education law provides parents with several rights.

Notice. You have the right to receive written notice before the school evaluates your child individually, considers special education for your child, or changes your child’s placement. You also have the right to receive notice before the school district refuses your request for an evaluation or a change in placement.

Records. You have the right to inspect and review all of your child’s educational records.

Consent. You are not required to consent to an evaluation for your child. If you want to have an evaluation, you must provide written consent before the school district can evaluate your child or place your child in a special education program.
Evaluations. It is important to understand the following about evaluations:

· You may refuse to permit an evaluation;
· If your child is evaluated and you think the evaluation is not adequate, you have the right to get an independent evaluation;
· The school district must reevaluate your child at least every three years;
· All tests must be given in the language the child knows best; and
· You have the right to be fully informed of the results of the evaluation.

Due Process. You have the right to an impartial due process hearing if you disagree with the school district on a special education matter.

Complaints. You have the right to file a complaint with the Office of Public Instruction if the school district does not comply with special education law.

Parent Empowerment—Knowledge Counts

Your child will learn a variety of new skills as he or she moves through early intervention and preschool special education. As a parent, you will also gain knowledge about yourself, your child, and about the educational opportunities and services available to your son or daughter. The more information you have the more power and control you will have to shape your child’s educational future.

As a parent of a child with special needs, you can become empowered in several ways:

1. Contacting national, state and local disabilities groups for more information about your child’s disability;
2. Reading about special education, disabilities, and other family and professional topics, using your local resources, like the library at PLUK (Call 1-800-222-7585);
3. Asking questions of the professionals who work with your child;
4. Keeping careful records of your child’s medical and educational history;
5. Participating in parent training workshops; and
6. Joining a parent organization and gaining emotional and social support.
**Glossary of Terms**

**Assessment**—the gathering of information by qualified personnel on a child’s development, and on the needs and priorities of the family. This information about the child and family is used in planning the Individual Family Service Plan (early intervention).

**At Risk**—that a child has conditions which make it likely that he/she may have some developmental delays. A child identified as "at risk" is not eligible for early intervention services under Part C of IDEA or for special education under Part B of IDEA. The child may be eligible for discretionary (not required by law) Family Education and Support (FES) Services through a local child and family services agency (early intervention).

**Child with a Disability**—a child who is 3, 4, or 5 years of age who has a severe delay in development (defined below) or who meets the criteria defining any of the disability categories described below, and who, because of this severe delay or disability, needs special education and related services (special education).

**Special Education disability categories** (under Montana Law)—the IDEIA requires Child Study Teams to classify all students with disabilities, six years of age and older, into one or more of the following disability categories:

- Autism,
- Cognitive delay,
- Deaf-blindness,
- Deafness,
- Emotional disturbance,
- Hearing impairment,
- Orthopedic impairment,
- Other health impairment,
- Specific learning disability,
- Speech impairment,
- Traumatic brain injury, and
- Visual impairment.

**Cognitive**—refers to the brain processes used for thinking, reasoning, understanding and judging (both early intervention and special education).

**Comprehensive Educational Evaluation**—tests and observations done by public school staff to find out if the child has a disability and requires special education and related services. The school district’s Child Study Team is required to do this evaluation. The Child Study Team meeting discusses the results of the comprehensive educational evaluation. A parent may choose to share any evaluation and assessment information done by the child and family agency, or by other qualified persons (special education).

**Developmental**—steps or stages of mental, physical, and social growth in children under age eighteen (both early intervention and special education).

**Developmentally Delayed**—having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay, even though the delay may not exist at the time of diagnosis, or experiencing developmental delays as measured by appropriate diagnostic instruments 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 (early intervention).
Due Process (in early intervention)—refers to a process for resolving a dispute between the family and the child and family service agency related to the delivery of early intervention services.

Due Process (in special education)—refers to a process for resolving a dispute between the family and the public school related to the identification, evaluation, or placement of a child with disabilities.

Evaluation—the process to find out if a child qualifies or continues to qualify for early intervention or special education services; includes finding out the status of the child in several developmental areas (both early intervention and special education).

Extended School Year—the delivery of special education and related services during the summer vacation when the child needs those services in order to prevent significant loss of previously learned skills. The IEP team must consider the need for Extended School Year at each meeting and must describe those services specifically with goals and objectives. Not all special education students, nor all special education services in the IEP, require an extended school year. Extended school year services must be individually crafted. For more information, contact the Montana Office of Public Instruction (OPI).

Family Education and Support Services—services that provide resources, supports and assistance designed to assist a child and to enhance the capacity of a family to promote the development of their child. The family, in partnership with their Family Support Specialist and other IFSP team members, establishes priorities and assists in the development, implementation, and evaluation of the IFSP. Family Education and Support Services include:

- Helping children with disabilities reach their maximum potential;
- Keeping children with their families in their home communities;
- Assisting families in maximizing their skills and abilities to utilize generic and specialized resources; and
- Helping families avoid unnecessary reliance on the service delivery system.

Individuals with Disabilities Education Act of 2004 (IDEIA)—refers to the federal law that provides the legal authority for early intervention and special educational services for children birth to age 21.

Individualized Education Program (IEP)—a written document that defines the special education and related services that make up a free, appropriate public education for a child with disabilities; the program is designed to meet the individual special education and related services needs of an eligible child (special education).

Individual Family Service Plan (IFSP)—a written document that defines the early intervention services provided to the child and family; the program is designed to meet the needs of the child and the family, and is based on family-identified priorities (early intervention).

Intervention—the efforts made on behalf of a child with a disability and that child's family (early intervention).

Least Restrictive Environment (LRE)—refers to the placement that is as close as possible to the regular education environment (special education).
**Natural Environment**—a place where infants and toddlers without disabilities are usually found, like a family home or a pediatrician’s office; early intervention services are provided in natural environments whenever possible (early intervention).

**Part B**—refers to the part of the Individuals with Disabilities Education Act (IDEIA) that outlines services for children ages 3-21 (special education).

**Part C**—refers to the part of the Individuals with Disabilities Education Act (IDEIA) that outlines services for children birth to age 3 (early intervention).

**Preschool Special Education**—educational program that is designed to meet the unique developmental needs of an individual child with a disability who is three, four, or five years of age; preschool special education is a child-focused educational effort (special education).

**Referral for Evaluation**—occurs when a parent requests that the school conduct a comprehensive educational evaluation to find out whether their child has a disability, which requires special education. A referral ends with Child Study Team (CST) meeting in which the parents and the school staff discuss the findings of the evaluation (special education).

**Related Services**—the supportive services required to help a child with a disability benefit from his/her individual education program (IEP). Related services for a child are discussed and decided upon by the IEP team at the IEP meeting. Related services support the student’s special education and cannot occur without special education (special education). Some examples of related services under Part B of IDEA include:

- Audiology,
- Occupational therapy,
- Physical therapy,
- Speech and language therapy,
- Counseling services,
- Psychological services,
- School nurse services,
- School social work services,
- Transportation, and
- Parent training.

**Screening**—process of quickly looking at a child’s development to find out if there are any areas of concern; screening is used to recommend children for more in-depth evaluation and assessment (early intervention and special education).

**Service delivery**—manner or setting in which early intervention services will be provided to the child and/or family (early intervention).

**Therapy**—treatment for physical or psychological conditions (early intervention and special education). The most common therapies provided through early intervention and special education are:

- Occupational therapy,
- Physical therapy, and
- Speech and language therapy.

**Transition**—the movement from one place or program to another; young children with disabilities transition at age three from early intervention to preschool special education services or to other community settings and services (early intervention and special education). Families also experience a transition, from their early intervention program to different services within the same local agency or to other community service program.
Appendix A - Summary of IDEA Services for Children

Please note that your child may be referred for evaluation and qualify for services at any age.

Age: Birth up to age 3 (Part C Services)

Service: Home-based Early Intervention

How to qualify?
If you suspect a disability or delay:
   Contact your local early intervention agency (see Appendix C),
   (please note that some school districts have preschool screening at this age and will refer to the Early Intervention Agency if needed)
   Sign consent for assessment,
   Early Intervention agency will conduct assessment, and
   Early Intervention agency will determine eligibility based on assessment results.

If your child qualifies for early intervention services:
You and the Early Intervention agency will determine appropriate services within the IFSP (Individualized Family Service Plan). These services can include, but are not limited to:
   Parent and family education/counseling,
   Speech/audiology,
   Physical/occupational therapy,
   Home visits, and
   Transportation and related costs.
Six to three months before a child’s third birthday, transition to preschool special education services begins.

Age: 3-5 (Part B Services)

Service: School-based preschool Special Education

How to qualify?
If you suspect a disability or delay:
   Contact your local school district,
   Sign consent for assessment,
   School personnel will conduct assessment, and
   You and the school personnel will review the assessment results and determine eligibility for preschool special education services within a CST (Child Study Team) meeting.

If the CST determines that your child qualifies for and would benefit from preschool special education services:
You and the school district personnel will convene an IEP (Individualized Education Program) meeting to:
   Design an appropriate special educational program,
   Determine placement,
   Determine any needed related services,
   The IEP will be implemented upon your consent and approval, and
   The IEP can be reviewed at any time as your child’s needs change.
Before age 6, transition to Kindergarten and First Grade begins.
Age: 6-18 (Part B Services)

Service: School-based Special Education

How to qualify?
If you suspect a disability or delay:
    Contact your local school district,
    Sign consent for assessment,
    School personnel will conduct assessment, and
    You and the school personnel will review the assessment results and determine eligibility for special education services within a CST (Child Study Team) meeting.
If the CST determines that your child qualifies for and would benefit from special education services You and the school district personnel will convene an IEP (Individualized Education Program) meeting to:
    Develop the IEP
    Consent for placement in Special Education
    Monitor and review IEP, and
    Re-evaluation, when needed.
Transition planning to adulthood may begin at any time, but must begin by age16.
Graduation!!! Transition to adulthood.
Appendix B - Sample Letters

Here are a few samples of letters you might want to write. Use these as a guide and include your information about your own situation. We've included the following sample letters:

Requesting a Referral & Assessment,
Requesting a Parent-Teacher Conference,
Requesting an IEP Team Meeting,
File a Complaint, and
Requesting Due Process.

Letter Requesting a Referral and Assessment for Special Education Services

Your Name
Address
Town, MT 59000

Date
Principal
School Address
Town, MT 59000

Dear Mr. or Ms. _____________:

As parents, we are concerned about our [son’s, daughter’s] progress in school. [He, She] seems to be falling further and further behind in [reading, math, spelling, etc.]. Even though various interventions have been tried in the classroom, our child has not shown improvement in academic work.

[His, Her] academic history shows [specific academic issues/retention (held back); past requests for special education evaluations from parents/teachers; previous successes, if any, using special education services and supports in the past]. We are concerned about providing services for [him/her] in the following area(s): [examples: written language, math, staying on task, homework organization].

We would like to fill out a formal referral for our child and request a comprehensive assessment of [his/her] educational achievement and potential. We understand that we must sign evaluation consent forms before the process can start. Please send the forms to us as soon as possible so we can begin our [son’s/daughter’s] evaluation and help [him/her] succeed in school.

Thank you for your attention to this matter. We hope to hear from you within the next week.

Sincerely,

[signatures]

Your Name(s)
406/555-1212 (your telephone number)
Letter Requesting a Parent-Teacher Conference

Your Name
Address
Town, MT 59000

Date

Principal
School Address
Town, MT 59000

Dear Mr. or Ms. _____________:

We would like to arrange a private conference with you to discuss our child’s progress in your program. We have some questions about the curriculum and what we can do to support our child's learning.

We would like to meet as soon as possible. Good times for us would be: [provide several dates and times that are convenient].

Please call (list phone number) at work, or (list phone number) at home to confirm a meeting date and time. If we are not available, please leave a message on our answering machine. We hope to hear from you this week.

We look forward to talking with you and we appreciate your help.

Thank you,

[signatures]

Your Name(s)
406/555-1212 (your telephone number)
Letter Requesting an IEP Team Meeting
Your Name
Address
Town, MT 59000

Date

Principal
School Address
Town, MT 59000

Dear Mr. or Ms. ______________:

Our [son, daughter] is an IDEIA-eligible student who is currently receiving special education services as part of an IEP. We realize that an IEP is usually reviewed on an annual basis, but we feel that we need to review our child’s program sooner than that. We have noticed some changes in our [son’s, daughter’s] behavior and academic progress that may warrant making changes in the IEP.

In order to provide an appropriate program for our child, we are requesting that an IEP meeting be held within two weeks so that necessary changes can be made in a timely fashion.

Thank you for your help in this matter. We look forward to seeing you and the other members of the IEP Team soon.

Sincerely,
[signatures]

Your Name(s)
406/555-1212 (your telephone number)

Letter to File a Complaint
Your Name
Address
Town, MT 59000

Date

Complaint Officer
Office of Public Instruction Room 106, State Capitol
P.O. Box 202501
Helena, MT 59620-2501

Dear Sir or Madam:

We are filing a formal complaint against the __________ school district where our child is receiving a special education program under an IEP. Describe the problem and your specific complaint [example: Despite the fact that our child’s IEP specifically states that our [son, daughter] will receive speech therapy daily for 30 minutes, our child has not received such therapy for over a month].
Describe the impact of the problem and why you’ve decided to issue a complaint [example: Our child has a hearing impairment. [His, Her] need for speech therapy has been properly assessed and documented. The amount of speech therapy needed is described in the IEP (see enclosed IEP), which school district personnel have signed].

We would appreciate your assistance in getting our school district to comply with the IEP and provide the services that are required by law.

Sincerely,
[signatures]

Your Name(s)
406/555-1212 (your telephone number)

Letter Requesting Due Process

Your Name
Address
Town, MT 59000

Date

Legal Counsel Office of Public Instruction
Room 106, State Capitol
P.O. Box 202501
Helena, MT 59620-2501

Dear Sir or Madam:

Our child is an IDEIA-eligible student who is being served under an IEP at _________ public school. Currently, we disagree with school personnel about the appropriateness of our child’s educational program and placement. We do not think that the current program is providing our child with educational benefits, even though the staff says that the program is working effectively.

Despite our efforts to come to an agreement, we find that we are still at odds with the school district. We are formally requesting a due process hearing to determine what is legally and educationally appropriate for our child. We would consider formal mediation and resolution sessions as interim steps to assist us with resolving these issues without resorting to a due process hearing.

We think our child’s current program is detrimental and needs to be changed as quickly as possible. We would appreciate hearing from you soon.

Sincerely,
[signatures]

Your Name(s)
406/555-1212 (your telephone number)
Appendix C - Resources

Montana’s Part C Early Intervention Resources (Infants and Toddlers, Birth to Age 3)

Family Support Services Advisory Council — advises and assists the Developmental Disabilities Program on the implementation of birth through age three (Part C) services statewide.

The following early intervention agencies serve different regions in the state. For a detailed map, visit the Montana Department of Health and Human Services on the web at http://www.dphhs.mt.gov/fssac.

AWARE, Inc., Helena, Missoula
Helena 406-449-3120  Missoula 406-728-3193
1-800-432-6145 • http://www.aware-inc.org/

Child Development Center (CDC), Missoula
406-549-6413 • 800-914-4779 • http://www.childdevcenter.org

Developmental Educational Assistance Program (DEAP), Miles City
406-234-6034 • 800-228-6034 • http://www.deapmt.org

Early Childhood Intervention (ECI), Billings
406-247-3800

Family Outreach, Helena
406-443-7370 • http://familyoutreach.org

Hi-Line Home Programs, Inc., Glasgow
406-228-9431 • 800-659-3673 • http://hilinehomeprograms.org

Quality Life Concepts, Inc., Great Falls
406-452-9531 • 800-761-2680 • http://www.qlc-gtf.org

Support and Techniques for Empowering People (STEP), Billings
406-248-2055 • 800-820-4180 • http://www.step-inc.org

Advocacy & Information for All Ages in Montana

PLUK — Montana’s Parent Training and Information Center provides information, training and support to families, individuals and professionals statewide.
406-255-0540 • 800-222-7585 • http://www.pluk.org

Disability Rights Montana (Formerly MAP) — advocates and attorneys who promote the rights of Montanans with disabilities.
406-449-2344 • 800-245-4743 • http://www.mtadv.org
State Resources

Children’s Special Health Services
406-444-2596 • 800-762-9891 • http://www.dphhs.mt.gov

Department of Public Health and Human Services — Senior and Long Term Care Division
406-444-4077

Disability Services Division Programs
406-444-2590 • 877-296-1197 • http://www.dphhs.mt.gov

Head Start
Services in Montana • http://www.headstartmt.org

Home and Community Based Services
800-219-7035 Referrals

Montana Child Care Resource & Referral Network
406-549-1028 • 866-750-7101 • http://www.montanachildcare.com

Montana Children’s Health Insurance Plan

Montana Independent Living Services

Montana Law Help
http://www.montanalawhelp.org/MT/index.cfm

Montana Medicaid Programs

Montana School for Deaf & Blind Children
406-771-6000 • 800-882-6732 • http://msdb.mt.gov

Office of Public Instruction (OPI)
406-444-3095 • 888-231-9393 • http://www opi.state.mt.us

Office of Public Instruction (OPI) — Special Education
888-231-9393 • http://www opi.state.mt.us/SpecEd

Office of Public Instruction (OPI) — Early Assistance Program
406-444-5664 • 888-231-9393 • http://www opi.state.mt.us/SpecEd/EAP.html

Office of Public Instruction (OPI) – Parents Page
http://www opi.mt.gov/parents/

State Commissioner of Insurance
406-444-2040
National Resources

**ADA Information**
800-514-0301 (voice) • 800-514-0383 (TTY) • www.ada.gov

**ARC – Health Insurance Policy**
800-433-5255 • http://www.thearc.org/NetCommunity/Page.aspx?&pid=429&srcid=217

**Disability Rights Laws**
http://www.usdoj.gov/crt/ada/cguide.htm

**Equal Employment Opportunity Commission**
EEOC Offices 800-669-4000 (voice) • 800-669-6820 (TTY) • www.eeoc.gov
Information on EEOC Enforcement 800-669-3362 (voice) • 800-800-3302 (TTY)
ADA-Related Information 202-663-4395 • 202-663-4399 (TDD) http://www.usdoj.gov/crt/ada/adahom1.htm

**Federal Communications Commission**
888-225-5322 (voice) • 888-835-5322 (TTY) • www.fcc.gov/cgb/dro

**Job Accommodation Network**
800-526-7234 (voice/TTY) • www.jan.wvu.edu

**Montana Yellow Pages for Kids with Disabilities**
http://www.yellowpagesforkids.com/help/mt.htm

**National Dissemination Center for Children with Disabilities (NICHCY)**
http://www.nichcy.org

**Social Security**
800-772-1213 voice • 800-325-0778 (TTY) • Publications http://www.ssa.gov • SSI/SSDI Forms http://www.ssa.gov/d&s1.htm • Pass Plan http://www.socialsecurity.gov/online/ssa-545.html • Regional Communications Office (Denver) 801-377-5651 ext. 303

**Regional ADA and IT Technical Assistance Centers**
800-949-4232 (voice/TTY) • wwwadata.org

**U.S. Department of Education – Information for Parents**
http://www.ed.gov/parents

**U.S. Department of Education, Office of Special Education and Rehabilitative Services IDEA Information**
202-245-7468 (voice/TTY) • www.ed.gov/about/offices/list/osers/osep

**U.S. Department of Justice Civil Rights Division (ADA Title II and III)**
800-514-0301 (voice) • 800-514-0383 (TTY) • www.ada.gov

**U.S. Department of Transportation, Federal Transit Administration, Office of Civil Rights (ADA Title II)**
888-446-4511 (voice/relay) • www.fta.dot.gov/ada
First Steps: A Parent Information Handbook
Infant and Toddler Programs and Preschool Special Education

“I love the timeline and the checklists; they are great when I’m preparing for IEPs.” (Parent)

“Thanks for the discussion of the difference between the Infant and Toddler programs and preschool special ed—I am trying to get ready for that change in services.” (Parent)

“The information is spot on and the sample letters are clear and empowering in case I need more resources or support from others.” (Parent)

The First Steps Handbook is an introduction to Montana’s early childhood intervention and special education programs.

This revised edition offers parents a focused collection of resources to help foster strong early learning opportunities and effective, collaborative education for their children with disabilities.

PLUK is a Montana nonprofit dedicated to providing training, information, and support to the 20,000 families in Montana who have a child with a disability or special health care need, and the professionals and educators that serve them:

- **Resources** —Special Needs Library (5,000+ volumes including books, DVD/Video, software, curricula) Accessible and Adapted Computer Lab, a variety of PLUK publications and electronic information via email and the PLUK website (www.pluk.org)

- **Trainings** —Specific topics ranging from disabilities to medical, educational, financial, and human service issues, other training opportunities to learn parenting, communication, and advocacy skills.

- **Support** —Trained Family Support Consultants offer support and assistance with information, conflict resolution, and essential services. Consultants also provide referrals to other professionals and community support groups.

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PLUK
516 N 32nd Street
Billings MT 59101
800-222-7585
406-255-0540
406-255-0523 (fax)
www.pluk.org
plukinfo@pluk.org

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