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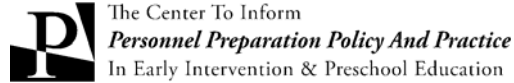
Part C Technical Assistance: State Approaches

Policymakers and early childhood experts have long recognized the important role early childhood programs play in meeting the needs of young vulnerable children. Federal programs such as Head Start and Parts 619 & C of the Individuals with Disabilities Education Act (IDEA) are specifically designed to target young, vulnerable children and their families. In order to maximize the benefits and outcomes of these programs, early childhood personnel need appropriate professional development, technical assistance and support. The Center to Guide Personnel Preparation, Policy and Practice in Early Intervention and Preschool Education[1] recently conducted a study of technical assistance systems for personnel working with infants and toddlers with special needs and their families. Project Forum has summarized the Center's findings as they pertain specifically to Part C of IDEA, which applies to infants and toddlers with disabilities ages birth through five years. The writing of this document was completed

by Project Forum at the National Association of State Directors of Special Education (NASDSE) through its cooperative agreement with the U.S. Department of Education's Office of Special Education Programs (OSEP).[2] Data collection and analysis were conducted by the Center to Guide Personnel Preparation, Policy and Practice in Early Intervention and Preschool Education. The Center will also publish an in-depth document using this and other data.

DATA COLLECTION

Surveys of Part C coordinators and/or their staff from 51 states and U.S. territories were conducted during Fall of 2006 and Spring of 2007.[3] Data on state approaches to Part C technical assistance were collected via a combination of telephone and e-mail-based interviews. To ensure accuracy, findings were verified by states. This document reports on survey findings. It is important to

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[1] More information on the Center is available at http://www.uconnucedd.org/per_prep_center/index.html.

[2] More information about Project Forum is available at www.projectforum.org.

[3] For the remainder of this document both states and territories will be referred to as states.

note that because interview questions were open-ended, interviewee responses were not necessarily exhaustive.

FINDINGS

Definition

For the purposes of this study, the following definition was used:

- **Technical assistance systems** provide ongoing, individualized professional development and problem-solving services to assist individuals, programs and agencies in improving their services, management, policies and/or outcomes.

Based on this definition, 47 of the 51 states self-reported having Part C technical assistance systems in place, three reported having no technical assistance systems in place and one did not specify.

Funding

Interviewees most commonly reported that Part C technical assistance is paid for by federal funds (46 states) and/or state funds (22 states) (see Table 1 in appendix).

Providers

Interviewees most commonly reported that Part C technical assistance is provided by in-state experts or consultants (48 states). However, interviewees also mentioned using early intervention direct service providers (8 states); parents (3 states); out-of-state experts (2 states); national resources (e.g., National Early Childhood Technical Assistance Center [NECTAC], the Early

Childhood Outcomes [ECO] Center) (2 states); and online training (2 states) (see Table 2 in appendix).

Recipients

Interviewees most commonly reported that recipients of state Part C technical assistance are early intervention direct service providers (48 states). Additional recipients mentioned include program administrators (13 states); other early childhood or K-12 personnel (11 states); service coordinators (6 states); and families (3 states) (see Table 3 in appendix).

Delivery Models

States use a variety of technical assistance delivery models. Most commonly, interviewees reported using workshops (e.g., classroom lecture or small group formats) (41 states) or responding to individual requests via phone or email (31 states). Additional service delivery models mentioned include the following: distance learning (13 states); written materials (e.g., memos or listservs) (8 states); regular staff meetings (6 states); annual meetings, symposia or conferences (2 states); and applied learning (e.g., vignettes, case studies, mentoring and/or shadowing) (1 state) (see Table 4 in appendix).

Supports and Incentives

The majority of states (36 total) offer some type of supports and/or incentives to encourage participation in technical assistance activities. Most commonly, interviewees mentioned offering paid time to attend trainings (25 states). Others mentioned offering free trainings (7 states); reimbursing travel expenses (4 states);

offering continuing education credits (CECs) (2 states); and offering stipends or scholarships (2 states). Eight states mentioned that supports and incentives are provided at the local, rather than state, level (see Table 5 in appendix).

Identifying Technical Assistance Needs

Most states (48 total) have procedures in place for identifying Part C technical assistance needs. Most commonly, interviewees reported relying on compliance or performance monitoring findings (40 states) and/or gathering input from providers, administrators and/or technical assistance consultants via surveys, interviews and/or self-assessments (34 states). Other interviewees also mentioned the following: responding to federal and/or state initiatives (12 states); convening personnel preparation committees that include supervisors, providers, parents and/or other stakeholders (9 states); using best practices and/or evidence-based research (4 states); aligning training with state credential requirements/ competencies (2 states) (see Table 6 in appendix).

Topics Addressed

In the past year, states most commonly reported that topics relating to Part C technical assistance included service delivery (32 states), data management and outcomes (29 states), and early intervention policies and procedures (23 states). Less commonly, interviewees reported that content areas included disability-specific information (10 states); working with families (7 states), early childhood risk factors (e.g., environmental risk, infant mental health) (7 states); and providing and/or accessing professional development

(6 states). Seven states also reported offering training specific to language and literacy (see Table 7 in appendix).

Technical Assistance Across Disciplines

Twenty-three states reported no differences in Part C technical assistance across different disciplines, whereas 25 reported offering at least some discipline-specific technical assistance.

Evaluation

The majority of states (38 total) have a system in place for evaluating Part C technical assistance and/or assessing Part C technical assistance outcomes. For example, 15 report using compliance or monitoring outcome data; 15 report using trainee evaluation or survey forms; 11 report relying on verbal feedback; and three report relying on follow-up observation by a technical assistance consultant (see Table 8 in appendix).

Ongoing Professional Development for Providers

Thirty-eight states reported having procedures in place to ensure ongoing professional development of those who provide Part C technical assistance including conferences (24 states), informational meetings (e.g., regional meetings for trainers) (10 states), webcasts and/or resource centers sponsored by national organizations (10 states), written materials (e.g., professional journals, listservs, NECTAC publications) (9 states), and training support (e.g., Train the Trainer) (9 states) (see Table 9 in appendix).

Collaborative Partnerships

Most states (44 total) rely on some degree of collaborative partnering with state professional organizations and other agencies to provide Part C technical assistance. Most commonly, interviewees reported collaborating with other state agencies via interagency coordinating councils, state training and TA committees and/or early childhood training collaboratives (e.g., collaborative members might include representatives from the Department of Health, Child Protective Services, Department of Health and Human Services, Department of Mental Health, Office of Child Care, Department of Mental Retardation, Medicaid and/or Head Start) (30 states). Other collaborative partners mentioned less commonly by interviewees include federal agencies (11 states); disability organizations and/or advocacy associations (e.g., Easter Seals, Association for Special Education, schools for the deaf and blind, autism programs) (9 states); professional therapy organizations (e.g., occupational therapy, physical therapy, speech and language therapy) (7 states); NECTAC (6 states); parent groups and/or parent training institutes (6 states); contracted training and technical assistance agencies and/or provider agencies (6 states); and child care resource and referral agencies and/or special education resource centers (3 states) (see Table 10 in appendix).

SUMMARY

Results of this study suggest that states are engaged in a wide range of Part C technical assistance activities. Almost all states interviewed reported having Part C technical assistance systems in place and a number of common themes emerged across states. Technical assistance is usually provided by instate experts and/or consultants and recipients of technical assistance are most commonly early intervention providers. A wide range of service delivery models are used by states, most commonly workshops or responses to individual queries via email or phone. Content of technical assistance most commonly addresses service delivery and data management/outcomes. Most states reported having procedures in place for identifying Part C technical assistance needs, evaluating technical assistance outcomes and providing ongoing professional development to technical assistance providers. States also identified a wide array of collaborative partners.

REFERENCE

Bruder, M., & Mogro-Wilson, C. (forthcoming). *Training and technical assistance survey of Part C and 619 coordinators.* Farmington, CT: The Center to Guide Personnel Preparation, Policy and Practice in Early Intervention and Preschool Education at the University of Connecticut.

APPENDIX

Table 1 – Funding

Funding Source	States
Federal funds	AL, AK, AZ, AR, CA, CO, CT, DE, DC, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MS, MO, MT, NV, NJ, NH, NM, NY, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VI, VA, WA, WV, WI, WY = 44
State funds	AL, AK, FL, GA, HI, ID, IL, IN, KS, ME, MN, MT, NE, NC, OH, OR, PA, SC, TN, TX, UT, VA, WA = 22

Table 2 – Providers

Providers	States
In-state experts	AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI, WY = 48
Early intervention providers	AZ, DE, IA, ME, NE, NJ, ND, WA = 8
Parents	DE, ND, RI = 3
Out-of-state experts	GA, NV= 2
National resources	MT, VI = 2
Online training	NV = 1

Table 3 – Recipients

Recipients	States
Early intervention providers	AL, AK, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VI, VA, WV, WI, WY = 48
Program administrators	AL, AK, AZ, CO, FL, GA, HI, MD, MO, MT, VA, WA, WY = 13
Other early childhood or K-12 personnel	CA, CO, DE, HI, MI, MN, MT, NE, NY, PA, VA = 11
Service coordinators	AL, CA, DE, GA, SC, WA = 6
Families	DE, HI, NE, NY, PA = 5

Table 4 – Delivery Models

Delivery Models	States
Workshops	AL, AK, AZ, AR, CA, CO, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MI, MN, MS, MO, MT, NE, NH, NM, NY, NC, OH, OK, PA, SC, TN, TX, UT, VI, VA, WA, WI, WY = 41
Responses to individual requests	AZ, CA, CO, DE, FL, GA, HI, ID, IL, KS, KY, ME, MD, MA, MN, MS, NV, NJ, NM, NY, NC, ND, OH, SC, TN, TX, UT, VI, WA, WV, WI = 31
Distance learning	GA, IL, IA, KS, LA, MI, NE, NJ, ND, TN, WV, WI, WY = 13
Written materials	CT, GA, IA, KS, ME, MD, MA, NJ = 8

Regular staff meetings	CT, KY, NV, NJ, OH, RI = 6
Annual meetings or conferences	NE, VA = 2
Applied learning	NV = 1

Table 5 – Supports and Incentives

Supports and Incentives	States
Paid time to attend meetings	CO, CT, DC, GA, HI, ID, IN, KS, MN, MS, MT, NE, NH, NM, NC, ND, OH, OK, PA, RI, TN, UT, VI, WV, WY = 25
Free trainings	DE, IN, KS, NE, NM, NC, ND = 7
Reimbursing travel expenses	KS, MS, MT, NE = 4
Offering CECs	AR, DE = 2
Offering stipends/scholarships	CT, NE = 2

Table 6 – Identifying Technical Assistance Needs

Identifying TA Needs	States
Compliance/performance monitoring	AL, AK, AZ, AR, CA, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, MD, MI, MN, MS, MO, MT, NE, NV, NH, NY, ND, OH, OK, PA, RI, SC, TN, TX, VI, WA, WV, WI, WY = 40
Stakeholder surveys/interviews/ self-assessments	AZ, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, KS, KY, LA, MD, MI, MO, MT, NE, NV, NH, NM, NY, OH, OK, OR, PA, RI, TX, UT, VA, WA, WI, WY = 33
Federal/state initiatives	CA, IA, KS, LA, MO, MT, NE, NJ, NY, OH, UT, WA = 12
Personnel prep committees	AZ, MN, MO, MT, NE, NV, ND, UT, VA = 9
Best practices	CT, IA, MT, WI = 4
Aligning training with credential requirements	MA, TX = 2

Table 7 – Topics Addressed

Topics Addressed	States
Service delivery	AL, AK, AZ, AR, CA, DC, FL, GA, ID, IN, IA, LA, MD, MN, MS, NE, NV, NH, NJ, NM, NC, ND, PA, TN, TX, UT, VI, VA, WA, WV, WI, WY = 32
Data management/outcomes	AL, AK, AZ, AR, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, MD, MS, NV, NJ, NM, NC, OH, PA, UT, VI, VA, WY =29
EI policies and procedures	AK, AZ, AR, CT, DC, ID, IL, IA, KS, ME, MD, MA, MS, NE, NV, NJ, NM, ND, OH, PA, SC, VI, VA = 23
Disability-specific information	HI, IA, MN, NJ, NM, ND, PA, RI, TX, WI = 10
Working with families	AZ, IN, IA, NE, NV, NH, VA = 7
Early childhood risk factors	AK, FL, IA, NE, NM, ND, TX = 7
Providing professional development	CT, ID, NH, NM, TX, UT = 6

Table 8 – Evaluation

Evaluation	States
Compliance/monitoring outcome data	AL, AK, DE, GA, ID, IL, KS, MI, NH, NC, OH, OK, UT, VI, WV = 15

Evaluations/surveys	AK, AZ, AR, CA, DC, IN, KS, MS, MT, NE, NV, NM, PA, VI, VA = 15
Verbal feedback	CA, FL, HI, IN, MN, MS, MO, RI, TX, WI, WY = 11
Observation by TA consultant	NY, SC, TN = 3

Table 9 – Ongoing Professional Development for Providers

PD for Providers	States
Conferences	CT, FL, GA, HI, ID, KY, MD, MA, MO, NV, NH, NJ, NM, NY, ND, OK, PA, TX, UT, VA, WA, WV, WI, WY = 24
Informational meetings	AZ, AR, CA, IN, NE, NY, NC, UT, WV, WI = 10
National organizations	DE, GA, HI, ID, MD, NV, OK, SC, UT, VA= 10
Written materials	CT, HI, ID, MA, TX, UT, WA, WV, WI= 9
Training support	AK, CA, IA, ME, NE, NH, NV, NC, OH = 9

Table 10 – Collaborative Partnerships

Collaborative Partnerships	States
Other state agencies	AK, AZ, AR, CA, CO, CT, GA, HI, ID, IN, IA, KS, MI, MN, MO, MT, NE, NH, NJ, NM, NC, OH, PA, TN, TX, UT, VA, WA, WV, WI = 30
Federal agencies	AZ, GA, KS, MD, NE, NH, NJ, NM, NY, NC, VI = 11
Disability/advocacy organizations	DE, HI, MO, NE, NH, NM, PA, WA, WY = 9
Professional therapy organizations	CA, DE, MO, NE, NV, SC, TX = 7
NECTAC	AZ, ID, KY, NC, VI, VA = 6
Contracted Training/TA agencies	NE, NC, OK, PA, RI, UT = 6
Child care resource and referral agencies	NE, NC, VI = 3

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