## *Federal Register* notice/consultation outside the agency.

Interested persons were invited to comment on this proposed information collection request in a notice published in the *Federal Register*, Volume 82, No. 28485 on June 22, 2017. ED requested public comment addressing five specific issues including: is this collection necessary to the proper functions of the Department; will this information be processed and used in a timely manner; is the estimate of burden accurate; how might the Department enhance the quality, utility, and clarity of the information to be collected; and how might the Department minimize the burden of this collection on the respondents, including through the use of information technology. Comments were due on or before August 21, 2017.

ED received a number of comments in response to the June 22, 2017 proposed information collection request. The Department has summarized, and only responded to below, those major comments that directly relate to the data required to be reported in Tables 1, 2 and 3 under Sections 618 of the IDEA.

<u>Comment 1</u>: One commenter indicated support for the Department to collect the cumulative count of infants and toddlers with disabilities, ages birth through 2, who received early intervention services during a 12-month period by race/ethnicity and by gender. This commenter expressed concern on reporting cumulative count by discrete age. The commenter noted that it would be difficult for a State to identify a discrete age for a child when the child falls within two different discrete ages during the same 12-month period.

Discussion: The Department appreciates the commenter's support for the Department to collect the cumulative count of infants and toddlers with disabilities, ages birth through 2, who received early intervention services during a 12-month period by race/ethnicity and by gender. The Department agrees with the commenter that providing instructions and technical assistance on reporting the cumulative count by discrete age would be challenging. Thus, the Department has removed the discrete ages from section D of Table 1. The Department will continue to collect the number of children receiving early intervention services as of the state-designated child count date by discrete age in section A of Table 1.

<u>Changes</u>: Based on the comment received, OSEP removed the proposed requirement for States to report the cumulative count of infants and toddlers with disabilities by discrete age in section D of Table 1.

<u>Comment 2</u>: One commenter, which represents centers across the country, supports the Department's need to collect Part C Child Count, Settings, and Exiting data, but expressed concerns with how some states interpret the three types of settings category within Table 2 and how one State in particular interprets the "community-based" setting category.

<u>Discussion</u>: The Department appreciates the commenter's support of the Department collecting Part C Child Count, Settings and Exiting data through this information collection. With respect to Table 2, the Department provides definitions for the three major Part C Settings (Home, Community-based, and Other) in Table 2.

The number of children reported under the "community-based setting" in Table 2 captures an "unduplicated count of children whose early intervention services are provided primarily in a setting where children without disabilities typically are found. These settings include but are not limited to child care centers (including family day care), preschools, regular nursery schools, early childhood center, libraries, grocery stores, parks, restaurants, and community centers (e.g., YMCA, Boys and Girls Clubs)."

States must report every infant and toddler receiving early intervention services within their state as of the Child Count date based on the three categories in Table 2 of this information collection. States may provide further explanation through data notes for how they collect and categorize the settings that infants and toddlers with disabilities receive their early intervention services. The Department also includes the definitions for these settings in the EMAPS User guide, which is published each year to assist states in submitting their Part C data collections under IDEA section 618.

Changes: None.

<u>Comment 3</u>: Multiple commenters suggested that the Department collect data through an electronic data system that can gather data on an individual child or from an individual case worker to help the Department collect more in-depth and accurate information.

<u>Discussion</u>: Section 618 of the IDEA requires the Secretary of Education to collect data on an aggregated basis. The statute specifically requires data reported from the collection would not reveal personally identifiable information (U.S.C. 20 § 618(b)(1)) thus, the Department does not collect data at the individual level; instead states provide the Department with aggregate level data to meet the federal reporting requirements above.

With respect to the format of collection, the Department appreciates the reduction in burden an electronic data collecting system provides to the states and requires all states to report Tables 1 through 3 through the ED*Facts* Metadata and Process System (EMAPS) from State agencies.

Changes: None.

<u>Comment 4</u>: One commenter indicated that infants and toddlers prenatally exposed to drugs should be provided early intervention services and included in the child count data.

<u>Discussion</u>: This data collection neither mandates nor changes who is eligible for early intervention services under Part C of the IDEA. However with respect to the population identified, the IDEA statute was revised to 2004 to add IDEA section 637(a)6) to require each State's IDEA Part C early intervention program to include a referral process for the referral to the IDEA Part C program for a child under age 3 who is involved in a substantiated case of child abuse or neglect; or is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. The IDEA regulations include this requirement in 34 CFR 303.303(b). Once referred, if such a child is suspected of having a disability, the child must be evaluated, and if determined eligible under Part C of the IDEA, provided early intervention services identified on the individualized family service plan or IFSP, and included in the data under Tables 1, 2, and 3.

Changes: None.