

**NORTH CAROLINA INTERAGENCY
AGREEMENT FOR THE PROVISION OF
SERVICES TO CHILDREN WITH OR AT
RISK FOR DISABILITIES AGES BIRTH
THROUGH FIVE AND THEIR FAMILIES
UNDER PARTS C AND B OF THE
INDIVIDUALS WITH DISABILITIES
EDUCATION ACT (IDEA)**

July 1, 2006

NORTH CAROLINA INTERAGENCY AGREEMENT

**FOR PROVISION OF SERVICES FOR CHILDREN WITH OR AT RISK
FOR DISABILITIES AGES BIRTH THROUGH THREE AND CHILDREN
WITH DISABILITIES FOR AGES THREE THROUGH FIVE AND THEIR
FAMILIES UNDER PARTS C AND B OF IDEA**

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PURPOSE

The purpose of this agreement is to ensure cooperation in the development of a statewide, comprehensive, coordinated, collaborative, multidisciplinary, and interagency service delivery system which meets the federal and state requirements for services to children with or at risk for disabilities ages birth to three and for children with disabilities ages three through five (Pre-Kindergarten) and their families.

Federal laws require cooperation among State agencies responsible for the administration and/or supervision of the Individuals with Disabilities Education Act (IDEA). The responsibilities and activities delineated in this agreement are referenced and supported in the following federal statute and accompanying regulations:

Individuals with Disabilities Education Act (IDEA) (20 U.S.C.1400 et seq.)

This agreement describes the interagency cooperation and coordination required to provide specific IDEA entitled services and provides guidance for their implementation. This interagency agreement documents the understandings and commitments of the lead agencies to meet the statutory and regulatory requirements and intents of Part C and Part B of the Individuals with Disabilities Education Act (IDEA) (20 U.S.C. 1400 et seq.).

The two lead agencies for IDEA are the Exceptional Children Division of the Public Schools of North Carolina for the Preschool Three Through Pre-Kindergarten Five-Year-Old Program (Part B,)¹, and the Division of Public Health of the Department of Health and Human Services for the Infant-Toddler Birth Through Two-Year-Old Program (Part C)².

This document was developed through a collaborative process among several agencies as children access many different types of services. These agencies included:

BEGINNINGS for Parents of Children Who are Deaf or Hard of Hearing, Inc.

Divisions of Child Development, Mental Health/Developmental Disabilities/Substance Abuse Services, Medical Assistance, Social Services, and Office of Education Services, Department of Health and Human Services

Division TEACCH of the University of North Carolina at Chapel Hill
Head Start

North Carolina Partnership for Children

North Carolina Office of School Readiness

Institutions of Higher Education Birth through Kindergarten Programs

Family Support Network of North Carolina

Eastern Band of Cherokee Indians

North Carolina Council on Developmental Disabilities

Exceptional Children's Assistance Center

¹ Services for children 0 to 5 with disabilities under IDEA are referred to as early intervention. Part B, will be referred to as the "Preschool Program" in this document.

² Part C will be referred to as the "Infant-Toddler Program."

SERVICE PRINCIPLES

There are a number of fundamental *Service Principles* which are essential to the effective provision of early intervention and special education services to young children. They should be reflected in all activities of public and private agencies. These include family centeredness and service delivery based on the developmental needs of children.

A. Family-Centeredness

1. Definition. “The term ‘parent’ means natural, adoptive, or foster parent of a child guardian (but not the State if the child is a ward of the State); an individual acting in the place of a natural or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child’s welfare, or an individual assigned to be a surrogate parent” (IDEA Section 602(23).
2. Need for Family-Centeredness. Early intervention and preschool service systems and personnel within those systems frequently change over the course of a child’s early years. Parents hold the primary responsibility for the development of their children and are a constant influence in their lives. Therefore, the best interests of children are served when parents and service providers work in partnership. Service delivery should build upon families’ strengths and resources and the needs of the child while helping families to make informed decisions with the involved agencies. Services must support the family’s efforts to mobilize their resources to meet their needs and the needs of the child, using empowering, help-giving practices. This includes providing families complete information about the full range of service choices and options. Public and private resources should build upon existing informal supports, resulting in a comprehensive community approach.
3. The lead agencies recognize the significance of culture, language, socioeconomic status and other aspects of family life. The cultural and linguistic sensitivity, responsiveness and accommodation of the early intervention system shall be enhanced through ongoing review and capacity building of all aspects of this system. Such aspects include, but are not limited to, child find, public awareness, policy development, professional development, child and family assessment, service provision, and transition.
4. Procedures and Practices. The lead agencies shall support procedures to promote and encourage family-centeredness in all facets of the service delivery system in the following ways:
 - a) Support partnering with families in the mandated North Carolina Interagency Coordinating Council, Regional Interagency Coordinating Councils (RICCs) and other related boards, commissions, and advisory committees specific to different agencies;
 - b) Support participation of parents on local, regional and statewide task forces, advisory groups, boards, and commissions, in all facets of service delivery - initial development, coordination, implementation and evaluations through the adoption of policies that:
 - i. schedule meetings at times and places convenient to parents,
 - ii. encourage the use of stipends for parents to support participation, and
 - iii. establish a goal of at least 10% parent membership on all such groups;

- c) Support policies and practices to ensure appropriate parental participation in all aspects of the development of the Individualized Family Service Plan (IFSP) and to ensure that family concerns, priorities, and resources are addressed in the IFSP;
- d) Support policies and practices to ensure appropriate parental participation in all aspects of the development of the Individualized Education Program (IEP);
- e) Promote resources for parents related to IDEA including training, support, individual assistance, and information, including
 - i. providing these resources to parents during the eligibility determination process and at other regular intervals as appropriate and when requested,
 - ii. providing informational resources to parents in their native language or other mode of communication when necessary to ensure comprehension and access to resources, and
 - iii. encouraging families supporting other families through formal and informal information and referral systems;
- f) Support the involvement of parents in the planning and provision of information and training for other families and professionals; and
- g) Provide technical assistance, training, and reference materials in a manner to nurture, encourage, enable, and support the orientation of the early intervention system personnel to a family-centered approach.

B. Service Delivery Based on the Developmental Needs of Children

1. Service coordinators, multidisciplinary teams, and service providers must work closely with parents in ensuring that all early intervention services “to the maximum extent appropriate, are provided in natural environments, including the home, and community settings in which children without disabilities participate” (IDEA, Section 632 (4)(G)). The agencies shall jointly develop policies and procedures to operationalize this principle.
2. “The provision of early intervention services for any child birth to three years with a disability occurs in a setting other than a natural environment that is most appropriate, as determined by the parent and the individualized family service plan team or the individualized education program team, only when early intervention cannot be achieved satisfactorily for the child in a natural environment” (IDEA Section 635(a) (16)(B)).
3. Serving children with disabilities in settings with children without disabilities will be determined collaboratively with parents, keeping in mind the individual needs of the child as documented by the Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP). When appropriate, service delivery systems shall include the use of services designed for all children (e.g., Head Start, public/private preschools, state-funded pre-kindergarten programs, licensed child care centers, family child care homes, family resource centers).
4. Early intervention services shall address the full range of developmental needs of the child. Ongoing consultation and specialized services or special education and related services by service providers as defined in IDEA and as specified by the IFSP and IEP will be available.
5. Services should be accessible to children and families by ensuring that:
 - a) they are located in close proximity to where families live;

- b) early intervention/special education services and models that meet children’s needs as defined by the child’s IFSP or IEP are available; and
- c) interpreters are available where needed to ensure participation and access.

SYSTEM LEVEL PRECEPTS

There are several precepts which describe the required components of the state level system. These precepts are the responsibility of all agencies participating in the IDEA Part C and Part B system of services. The precepts are non-duplication of effort, interagency coordination, comprehensive system of personnel development, procedural safeguards, supervision and monitoring, timely provision of services, child find, transition, and financial responsibilities.

A. Non-Duplication of Effort

1. The lead agencies shall develop and implement policies to provide guidance to local communities for the promotion of utilization of existing service providers.
2. The lead agencies shall develop and implement a statewide system for the provision of services consistent with IDEA Section 635. This includes the responsibility to develop new services through contracts or other means when those services are not being provided by existing public or private resources, or when the services cannot be purchased from existing providers who meet the applicable standards or requirements (IDEA Section 635(a) (11)).
3. The lead agencies shall promote and ensure collaborative service planning and delivery by their regional and local agencies (Children's Developmental Services Agencies for Part C and Local Education Agencies for Part B) through the development of standard procedures, policy guidance, and staff development.
4. Collaborative partners will assist the lead agencies in “the identification and coordination of all available resources within the State from Federal, State, local, and private sources” (IDEA Section 635(a) (10) (B)).
5. The lead agencies shall establish and maintain formal mechanisms for the communication of information about their activities related to services between the lead agencies and their respective regional and local agencies and consumers.

B. Interagency Coordination

Interagency coordination is essential at state, regional, and local levels of the service delivery system to benefit the child and family. Therefore, the lead agencies shall develop the structure and procedures for communication and coordination among these levels. At each of these levels, the lead agencies shall collaborate in the development of procedures to involve private providers and their organizations with special emphasis on their inclusion in child find, public awareness and personnel development efforts.

1. State Level

- a) The Department of Health and Human Services Division of Public Health and the Public Schools of North Carolina, Exceptional Children Division, as lead agencies shall identify the necessary personnel or resources for the related staff work of the State Interagency Coordinating Council.
- b) The lead agencies shall identify staff members to participate in interagency leadership meetings focused on the implementation of IDEA.
- c) The lead agencies shall encourage the provision of consultative services to other private and public providers.

- d) The lead agencies will participate in the ongoing development, implementation and evaluation of working agreements and strategies at the state and local levels including the evaluation of this interagency agreement document at least annually.
- e) The collaborative partners shall support participation in and representation on the State Interagency Coordinating Council by their appropriate staff.

2. Regional Level (Part C)

- a) The agencies shall support the participation of appropriate staff on the Regional Interagency Coordinating Council (RICC) as defined by state statute (i.e., required membership of Children’s Developmental Services Agency Directors).
- b) The policies and guidance shall emphasize the following as important responsibilities of the RICC:
 - i. development and implementation of child find and public awareness activities;
 - ii. assurance of the availability of the required early intervention services through assessment of service delivery capacity, identification of needs, and implementation of activities to address gaps or inadequacies;
 - iii. identification of interagency professional development needs and development of strategies for addressing those needs;
 - iv. establishment of methods for compliance monitoring and qualitative evaluation of service delivery to be coordinated by the Children’s Developmental Services Agency; and
 - v. coordination and integration with other early childhood special education and related human service planning, such as that carried out by Mental Health Local Management Entities, Smart Start and Local Education Agencies.

3. Local Interagency Coordinating Councils (LICCs) are supported.

C. Comprehensive System of Personnel Development

- 1. Lead agencies will collaborate with one another, the Interagency Coordinating Council, and other appropriate groups (e.g. universities, community colleges), in planning, developing, and providing an array of professional development and technical assistance activities related to recommended practice for serving young children with disabilities and their families.
- 2. Lead agencies will identify the necessary personnel and resources for this process and to support family participation in all levels of planning and implementation of professional development activities.
- 3. Lead agencies will plan and support initiatives sufficient to promote provision of highly qualified personnel to provide services to children with or at risk for disabilities ages birth through three and for children with disabilities ages three through five.

D. Procedural Safeguards

The lead agencies receiving federal Part C and Part B funding shall provide input into and abide by the State procedural safeguards as contained in the *North Carolina Infant-Toddler Program Policy and Procedure Manual* and *Procedures Governing Programs and Services for Children with Disabilities*. Procedural safeguards protect the legal rights and privacy of eligible children with or at risk for disabilities ages birth through three and for children with

disabilities ages three through five. A comprehensive review of these rights can be found in the *North Carolina Infant-Toddler Program Policy and Procedure Manual and Procedures Governing Programs and Services for Children with Disabilities*.

E. Supervision and Monitoring

The lead agencies are responsible for the general administration and monitoring of programs and activities receiving assistance under Part C and Part B and monitoring of programs and activities used by the State to carry out this part. This is the case whether or not the program/activities are receiving assistance under Part C or Part B, to ensure compliance with Part C and Part B (34CFR 303.501).

The lead agencies will take necessary steps to ensure the following:

1. Monitoring of state, regional (Part C), and local agencies for direct services to children and families and agreements and contracts with organizations receiving Part C and Part B assistance, including on-site monitoring;
2. Investigating, identifying and reporting suspected noncompliance with statutory, regulatory, and policy requirements;
3. Ensuring adherence to the provisions of IDEA and this Interagency Agreement
4. Providing technical assistance as necessary to those agencies; and
5. Ensuring the correction of noncompliance identified through monitoring as soon as reasonable, not to exceed one year from identification of the noncompliance.

Both parties to this Agreement will develop and participate in the timely collection, verification, analysis, reporting, and usage of data for the purposes of intra- and interagency monitoring and program improvement. Supervision will be carried out by periodic monitoring processes to review programs and services as part of a continuous improvement processes.

F. Timely Provision of Services

1. All early intervention services included in the IFSP and IEP must be made available to the child and family on a timely basis as defined by IDEA. Services may be provided by state or local agencies in accordance with each agency's eligibility requirements but must meet Part C and Part B requirements.
2. When system capacity limitations are identified at the state or local level, providers receiving federal Part C and Part B funding or state funding may enter into contractual agreements to ensure the timely provision of services.
3. Within each lead agency's authority, providers receiving federal Part C and Part B funding or state funding will assist in the development, implementation, and improvement of a system of timely evaluation, assessment, and service provision.

G. Child Find

1. In accordance with IDEA, the lead agencies remain ultimately responsible for the implementation of Child Find policies and procedures. Collaborative partners participate in the Child Find system, which is a system to locate, evaluate, assess, and identify children with or at risk for disabilities or delays who may be eligible for Part C and Part B supports and services.
2. Part C, the Division of Public Health, through its Women's and Children's Health Section, Early Intervention Branch's Children's Developmental Services Agencies (CDSAs), will ensure that the required nondiscriminatory multidisciplinary evaluation for eligibility determination is conducted by qualified personnel and completed in a time period sufficient to allow determination of eligibility and the

conduct of the meeting to develop the IFSP within 45 days of referral. In meeting this responsibility, the Division of Public Health will establish, publish, and update as necessary criteria for enrollment of providers for multidisciplinary evaluations for entry into the Infant-Toddler Program, including minimum qualifications of persons conducting assessments. The Division of Public Health will monitor CDSAs to determine if the appropriate timelines were met.

3. Part B Preschool Disabilities Program, located in the Exceptional Children Division of the Public Schools of North Carolina will ensure that IEPs are developed in a timely manner, which is defined as no more than 90 days from referral to placement. Once a child is determined to be eligible for special education and related services, the IEP shall be developed within 30 days of the eligibility determination. The Public Schools of North Carolina will monitor Local Education Agencies (LEAs) to determine if the appropriate timelines were met.
4. In accordance with the child find requirements of Part B and Part C (34 CFR 300.132, 34 CFR 300.500, 34 CFR 303.148, and 34 CFR 303.344,), Part C service coordinators will disclose directory information, including the child's name, date of birth and sufficient contact information to allow the Public Schools of North Carolina to fulfill their child find responsibilities. Parental consent is not required for this disclosure.
5. Lead agencies shall share information about referral and eligible children with or at risk for disabilities or delays and their families to the extent consistent with State and Federal confidentiality requirements, including the requirements of the Health Information Portability and Accountability Act (HIPAA) and the Family Education Rights and Privacy Act (FERPA), in order to get accurate and unduplicated counts to meet Federal reporting requirements and to facilitate the effective and efficient delivery of services
6. Collaborative partners will participate in the following ways:
 - a) Appropriately refer potentially eligible children who are under three years of age to the Children's Developmental Services Agency, and for children 3 and older, to the Local Education Agency (LEA);
 - b) Develop and implement procedures and public awareness and child find activities to ensure that all public and private primary referral sources, especially hospitals and physicians, make appropriate referrals of children under three years of age to the Children's Developmental Services Agency and for children three years and over to the LEA;
 - c) Participate in the ongoing development, implementation and improvement of effective child find, screening, referral, and evaluation activities and procedures including rigorous efforts to reach children who are wards of the state, homeless, abused/neglected, substance-affected, victims of domestic violence, premature, in foster care, and otherwise potentially at risk for developmental delays or disabilities;
 - d) Have representation on local and/or regional planning level (LICC/RICC) in similar manner as representation on the state ICC; and
 - e) Ensure interagency participation in the development of training materials and procedures; ensure interagency delivery of periodic training of state, regional, and local levels to address child find, underserved, and public awareness needs, including at risk populations as defined by IDEA and the Child Abuse Prevention and Treatment Act (CAPTA);

- f) Ensure that children substantiated as abused or neglected will be referred for screening and/or evaluation for Part C eligibility by all participating agencies; and
- g) Coordinate and share data collection, analysis, and reporting of child find and public awareness efforts with the lead agencies for the purposes of program evaluation, monitoring in child find and public awareness.

H. Transition

The lead agencies will work collaboratively to distribute transition materials and technical assistance on the transition of children with or at risk for disabilities or delays from Part C services to Part B services. CDSAs and LEAs must adhere to the transition policies and procedures jointly established by Department of Health and Human Services Division of Public Health and the Public Schools of North Carolina to ensure a timely transition to Part B preschool services.

1. Beginning on their third birthday, preschool children with disabilities who have transitioned from the Part C program and who meet the eligibility criteria as defined in *Procedures Governing Programs and Services for Children with Disabilities (Procedures)* under Part B of IDEA must have available a special education program, that provides for a free and appropriate public education, which includes special education and related services.
2. LEAs shall evaluate a child in accordance with criteria established by *Procedures* and develop the IEP within the designated timelines. For eligible children who have transitioned from the Part C program to the Part B program, services are to be made available by the child's third birthday. Recent evaluations conducted by other professionals or agencies may be accepted and used in developing the initial IEP so as to ensure a timely initiation of that program and to avoid unnecessary duplication in assessment of the child.
3. CDSA service coordinators must notify the LEA where the child resides at least fourteen calendar days before the transition meeting is scheduled. At least ninety days before the child's third birthday, school district personnel from the district where the child resides must participate in a transition meeting convened by the child's CDSA service coordinator. Transition meetings may occur as early as 9 months before the child's third birthday if additional time is needed.

I. Financial Responsibilities

1. The lead agencies receiving federal Part C and Part B funding agree to the following in relation to the state's Part C and Part B financial resources:
 - a) To ensure and document that Part C funds and Part B funds are not commingled with state or local funds (IDEA Section 637(b)(5)(A));
 - b) To ensure and document that financial practices meet the maintenance of effort and non-supplanting requirements meet the requirements in 34 CFR 303.124;
 - c) To ensure and document that expenditure of Part C funds meet the Payor of Last Resort requirements of IDEA Section 640;
 - d) To ensure effective use of the resources available to the State, including the maximization of Title V and Title XIX match revenues, and the use of Head

Start funds, Developmental Disabilities Assistance and Bill of Rights funds, and other federal funds (34 CFR 303.522(b));

- e) To institute and maintain fiscal control and fund accounting procedures as is necessary to ensure proper disbursement of, and accounting for, Federal funds (IDEA Section 637(b)(6)) and provide ongoing expenditure and budget information as part of the development and implementation of an annual assessment of state Part C and Part B expenditures inclusive of Title V and Title XIX; and
 - f) To ensure that maximum use will be made of all third party funding sources and that State planning efforts will continue to support and facilitate such financing arrangements.
2. Part C agencies agree not to impose fees on the families utilizing these services (34 CFR 303.521(b)):
- a) Referral and Screening
 - b) Service coordination
 - c) Evaluations and assessments related to determining initial and ongoing eligibility
 - d) Determining the child's levels of functioning in the developmental areas
 - e) Determination of family resources, priorities and concerns
 - f) Personnel services related to the development, review, and evaluation of the IFSP
 - g) Implementation of procedural safeguards
 - h) Child find related activities

Fees based on a sliding scale may be charged for other services in accordance with Federal and State statutes and agency regulations when on file with, and approved by the U.S Department of Education. However, fees may not be charged for the services that a child is otherwise entitled to receive at no cost to parents; and the inability of the parents of an eligible child to pay for services will not result in the denial of services to the child or the child's family (34 CFR 303.520).

3. When preschoolers who meet the eligibility requirements established by the Public Schools of North Carolina receive special education and related services, the Part B preschool program agrees not to impose fees for the following:
- a) Screening
 - b) Evaluation
 - c) Special education/related services
 - d) Transportation
 - e) Any services related to special education as included in the IEP
 - f) Evaluation services for the purpose of determining eligibility

For other preschool children not eligible under the definitions established by the Public Schools of North Carolina for this age group, fees may be charged by other agencies for non-evaluative services in accordance with state statutes or policies established by the involved agencies.

SPECIFIC AGENCY RESPONSIBILITIES

A. Responsibilities of the State Part C Lead Agency

The Infant-Toddler Program in the Early Intervention Branch, Women's and Children's Health Section of the Division of Public Health (DPH), Department of Health and Human Services, with the advice and assistance of the North Carolina Interagency Coordinating Council, is the lead agency responsible for North Carolina's Part C system of services for eligible infants and toddlers with or at risk for disabilities or delays and their families. As the lead agency, DPH has responsibility for the administration of the Infant-Toddler Program in accordance with the requirements of Part C, including the:

1. Administration of federal early intervention funds;
2. Development of interagency agreements with other involved public or private service providers to ensure availability of statewide comprehensive, coordinated, interagency early intervention system;
3. Establishment of general policies and standards for early intervention services in such areas as child eligibility requirements, service delivery, personnel certification, and licensure procedures, monitoring compliance of these policies and standards by all parties involved, ensuring that deficiencies are corrected, and developing a data collection system;
4. Development, implementation, and evaluation of a personnel development and training plan;
5. Ensuring correction of noncompliance that is identified through monitoring;
6. Establishing and maintaining a statewide data system that includes a process for collecting data from various agencies and service providers in the state;
7. Monitoring agencies, institutions, and organizations that carry out Part C activities;
8. Providing technical assistance if necessary to those agencies, institutions, and organizations;
9. Entering into formal interagency agreements with other State-level agencies involved in the State's early intervention program;
10. Establishing or adopting procedural safeguards that meet the requirements of Part C;
11. Ensuring effective implementation of procedural safeguards by each public agency in the State that is involved in the provision of early intervention services;
12. Ensuring enforcement of any obligations imposed on those agencies by Part C of IDEA, its regulations, and State statutes and regulation;
13. Documentation of unmet service system and personnel needs, including the identification of additional fiscal, personnel, and other resources to meet needs;
14. Development of procedures for appointment of surrogate parents;
15. Coordination of system complaint resolution procedures and preparation of final rulings on interagency disputes and individual or organization complaints;
16. Notification of parents in their native language or other mode of communication whenever necessary, by publication and otherwise, of procedures concerning the collection, maintenance, and use of confidential information and of their rights under the Family Education Rights and Privacy Act (FERPA);

17. Planning and coordination of statewide child find and public awareness activities. The focus of these activities shall include underserved populations; and
18. Provision of personnel and fiscal support to the State Interagency Coordinating Council.

B. Responsibilities of the State Part B Preschool Lead Agency

The Preschool Program within the Division of Exceptional Children of the Public Schools of North Carolina, with the advice and assistance of the North Carolina Interagency Coordinating Council, provides special education and related services to eligible children, 3 to 5 years of age under IDEA Part B. As such, the Public Schools of North Carolina have the responsibility for administration and the provision of the following services:

1. Administration of federal IDEA Section 619 funds and assignment of financial responsibility among local educational agencies;
2. Establishment of general policies and standards for special educational services in such areas as child eligibility requirements, service delivery, personnel certification, and licensure procedures, monitoring compliance of these policies and standards, ensuring that deficiencies are corrected, and developing a data collection system;
3. Development, implementation, and evaluation of a personnel development and training plan;
4. Provision of technical assistance to all state and local agencies;
5. Monitoring of programs and activities used by local educational agencies to carry out their responsibilities under IDEA Part B;
6. Ensuring correction of deficiencies that are identified through monitoring and supervision activities;
7. Entering into formal interagency agreements with other State-level agencies involved in the State's early intervention program;
8. Establishing or adopting procedural safeguards that meet the requirements of Part B;
9. Ensuring effective implementation of procedural safeguards by each public agency in the State that is involved in the provision of early intervention services;
10. Ensuring enforcement of any obligations imposed on those agencies by Part B of IDEA, its regulations, and State statutes and regulation;
11. Development of procedures for appointment of surrogate parents;
12. Coordination of system complaint resolution procedures and preparation of final rulings on interagency disputes and individual or organization complaints;
13. Notification of parents in their native language or other mode of communication whenever necessary, by publication and otherwise, of procedures concerning the collection, maintenance, and use of confidential information and of their rights under the Family Education Rights and Privacy Act (FERPA);
14. Planning and coordination of statewide child find and public awareness activities in coordination with the Part C Program;
15. Participation on the State Interagency Coordinating Council;
16. Identification and training of persons to serve as mediators and hearing officers for IEP related disputes;
17. Participation in transition conferences for children with suspected disabilities or delays moving from services under Part C to services under Part B; and

18. Coordination of data system efforts with Part C to ensure that both Part C and Part B have accurate and unduplicated counts and otherwise meet federal and state reporting requirements.

DISPUTE RESOLUTION

The lead agencies receiving federal Part C and Part B funding recognize the complexity of interagency coordination in a program as comprehensive as IDEA. They shall strive for open and frequent communication at both informal and formal levels.

The purposes of a State agency dispute resolution process are to:

- A. Clarify roles and responsibilities among agencies;
- B. Address noncompliance with the provisions of IDEA, disputes regarding the provisions of services, disputes regarding payment for services, and other disputes regarding responsibilities under this Interagency Agreement;
- C. Ensure entitled services are provided to eligible children and families in a timely manner while disputes are resolved; (34 CFR 303.520 (c)) and 34CFR 303.527(b); and
- D. Ensure every effort is made to resolve any differences at the lowest administrative level possible.

Generally, the dispute resolution procedures in this agreement do not apply to individual child complaints (i.e., complaints that generally affect only a single child or the child's family). For these types of complaints, the child and family have the right to existing procedural safeguards, including mediation and due process, in accordance with State and Federal laws. This dispute resolution incorporates and affirms the provisions and language of the *North Carolina Infant-Toddler Program Manual Complaint Resolution-Interagency Disputes* document and the dispute resolution procedures for children three to five years of age are in the *Procedures Governing Programs and Services for Children with Disabilities*.

Official Signatures for this Interagency Agreement are from

Secretary Carmen Hooker Odom

for the North Carolina Department of Health and Human Services

And

June St. Clair Atkinson, Ed.D., State Superintendent

for the North Carolina Department of Public Instruction