

## INTRODUCTION

New Jersey is a geographically small, but densely populated state. It is the most urbanized State, but has no single very large city. Nearly eight million people make it the ninth largest state. The State's population is projected to grow steadily, but slowly, through the year 2010 to just over 8.5 million. The State's residents comprise over 400 different ethnic groups.

The State has sharp differences in wealth by region and community with some of the nation's wealthiest and poorest communities located in close proximity. Higher proportions of poorer residents are in the cities and in small rural communities.

### Part C

The Department of Health and Senior Services (DHSS) is the Lead Agency for the State's Part C system, known as the New Jersey Early Intervention System. The DHSS contracts with four Regional Early Intervention Collaboratives that are responsible for local planning, development and implementation of the State system and for ensuring that families have sufficient voice and decision-making power to influence the early intervention system. These Collaboratives carry out functions such as: public awareness, child find, and personnel development, and ensure evaluations and IFSP development, monitor providers and service coordination units, and conduct needs assessments. County Special Child Health Services Case Management Units and sixty-six Early Intervention Program providers under contract with DHSS provide early intervention services.

The single point of referral to the early intervention system is county-based through the Special Child Health Services Case Management Units. In addition to providing initial and ongoing early intervention service coordination for eligible children, the SCHS-CMU provides case-management services for children (birth through 21) and their families identified through a State-mandated Special Child Health Services Registry.

With a total approximate budget of \$36,000,000 from Federal, State and local dollars, New Jersey's Early Intervention System served 4,743 infants and toddlers on December 1, 1999 (1.45 % of all infants and toddlers in the State).

Between the fall of 1995 and summer 1999, Rutgers, The State University of New Jersey, conducted a longitudinal statewide study of the New Jersey Early Intervention System. The longitudinal study provided the following information: families who participate in early intervention are comparable to the general population in New Jersey in terms of ethnicity, education and income. According to parental report, children are first referred to early intervention at the mean age of fifteen months with 9% of participants referred at birth, 34% before their first birthday, 35% from 1-2, and 20% from 2-3. The racial distribution of enrolled children was: 73% White, 17% African American, 17% Hispanic, and 10% other. English was not the primary language for ten percent of the families. It is important to note, however, that the racial and ethnic mix for New Jersey mothers, infants, and children is slightly more diverse than the overall population composition. In 1997, 17.5% of mothers delivering infants in New Jersey

were Hispanic, 73% were White, 18.6% African American, and 6.4% were Asian or Pacific Islander.

The Rutgers study reported that thirty-six percent of the primary caregivers are employed, versus 50% of families with children under three in the general population; of those employed, thirty-six percent use regular childcare for an average of 26 hours per week.

The percentage of enrolled children that meet both the Federal and State poverty levels was forty-two percent. Motor and communication delays were the most commonly reported special needs of children. Approximately one-third had siblings who also have a disability. More than 80% of children entered the early intervention program and remained enrolled until the child was 3; 5% left the system voluntarily before the child's third birthday.

Sixty-three percent of all enrolled children exited the New Jersey Early Intervention system into preschool special education in 1999-2000. Eleven percent exited to home, Head Start, and other early childhood programs.

Thirteen staff are assigned to the Early Intervention System under DHSS, with a combined full-time equivalent of 12.25. Staffing includes a Part C Coordinator, Projects Coordinator, Procedural Safeguards Coordinator, Coordinator of the Comprehensive System of Personnel Development, Program Officer, Contract Administrator, Analyst, Network Services Administrator, Management Information System Technician and clerical support.

From July 1, 1998 through December 31, 1999, there were three due process hearings, two mediations, and no Part C State complaints.

### Part B

The New Jersey State Department of Education (NJSDE), Office of Special Education Programs, supports school districts to provide education programs for children and youth with disabilities ages 3 through 21. NJSDE staff provide training to school staff, district administrators, and others on important issues and current instructional practices; provide current information on State and federal laws relating to the education of students with disabilities; monitor districts' compliance with those laws; help resolve conflicts between school districts and families of students with disabilities; and provide additional technical assistance to school districts as needed.

The New Jersey statewide assessment system is emerging as a measure of all students' progress toward achieving and mastering the core curriculum content standards. High participation rates for children with disabilities on the statewide assessments were experienced during the 1999-2000 school year. The Elementary School Proficiency Assessments (ESPA) are administered in grades four and five and the Grade Eight Proficiency Assessment (GEPA) is administered in grade eight. Each eleventh and twelfth grade student is currently required to take and pass the High School Proficiency Test 11 (HSPT11) for graduation unless the student's IEP states that he or she is exempt. Students with and without disabilities will also be eligible to graduate if they pass the Special Review Assessment (SRA), an alternative assessment for the High School

Proficiency Test 11. The High School Proficiency Assessment will be aligned with the Core Curriculum Content Standards and replace the High School Proficiency Test 11.

**A. Prior OSEP Monitoring – Part B (Note: OSEP did not monitor Part C before 1999).**

Between 1993 and 1998, the U.S. Department of Education, Office of Special Education Programs (OSEP), conducted three onsite monitoring visits to New Jersey for the purpose of determining compliance with Part B of the Individuals with Disabilities Education Act (IDEA). These onsite visits were conducted in March 1993, December 1995 and June 1998. As a result of each visit, OSEP issued a monitoring report that included findings that serious noncompliance existed with respect to the provision of a free appropriate public education in the least restrictive environment for children with disabilities served in New Jersey. The areas of noncompliance that OSEP consistently identified included a lack of: general supervision, placement in the least restrictive environment, full continuum of placement options, participation with nondisabled peers, provision of extended school year services, transition statements in IEPs for secondary age students, and a failure to provide special education and related services.

During the 1998 visit, OSEP determined that the New Jersey Department of Education (NJSDE) had made progress in some previously identified areas of noncompliance. However NJSDE remained in noncompliance, most notably in its continued failure to exercise general supervisory authority over local education agencies across the state in ensuring that local education agencies correct identified deficiencies in a timely manner. As a result of this failure by the NJSDE serious deficiencies existed for a number of years thus impacting the delivery of services to children with disabilities. As a result of the 1998 visit the OSEP issued a Monitoring Report in February 1999 identifying the following areas of noncompliance:

**General Supervision**

- failure to implement an effective system for monitoring to identify and correct deficiencies in local school districts
- failure to implement and maintain consistent standards for County Supervisors of Child Study to follow in monitoring, correcting deficiencies, and providing technical assistance to local school districts and receiving schools
- failure to provide supervision, guidance and training to County Supervisors of Child Study

**Placement in the Least Restrictive Environment**

- failure to ensure that public agencies removed students from the regular education environment only when the nature or severity of the disability was such that education in the regular education environment with the use of supplementary aids and services cannot be achieved satisfactorily
- failure to ensure that the education placement of each child with a disability was based on his or her individualized education program (IEP)
- failure to ensure that each student with a disability was educated with nondisabled students, including participation in nonacademic and extracurricular services and activities, to the maximum extent appropriate to meet the needs of the student

- failure to ensure that for children placed in separate, self-contained settings, participation in nonacademic and extracurricular services and activities with non-disabled students was an individualized decision based upon an IEP

#### **Free Appropriate Public Education**

- failure of NJSDE's monitoring system to identify noncompliance with respect to the provision of extended school year services in any of the agencies monitored by NJSDE and visited by the OSEP
- failure of NJSDE's monitoring system to identify noncompliance with respect to the provision of counseling as a related service as a component of a free appropriate public education in any of agencies visited

#### **Provision of Needed Transition Services**

- failure to ensure compliance with the transition requirements

As a result of these findings of noncompliance, OSEP required that NJSDE take action to ensure that the State's long-standing, serious noncompliance was effectively and promptly corrected throughout the State and that NJSDE develop a comprehensive corrective action plan (CAP) with specific steps and timelines to ensure that within one year from the date of the Report (February 16, 1999) all deficiencies were fully corrected.

Based upon NJSDE's longstanding failure to exercise its general supervisory responsibility and ensure that public agencies within the State complied with Part B and that there was a high risk that systemic violations would continue unless changes took place in the State's implementation of Part B of IDEA, NJSDE was designated as a high-risk grantee and Special Conditions were imposed for FY 1999. NJSDE was directed to:

- carry out the Corrective Action Plan accepted by OSEP; and
- meet its general supervisory responsibility under 34 CFR §300.600 and demonstrate that its revised monitoring system is effective in identifying and ensuring the correction of noncompliance across the state in the provision of least restrictive environment (34 CFR §300.130 and 34 CFR §§300.550-556); needed transition services (34 CFR §300.347(b)); provision of psychological counseling as a related service, as needed, to benefit from special education (34 CFR §300.300 and §300.24(b)(9)) and that students receive extended school year services, if necessary, to receive a free appropriate public education (34 CFR §300.300 and 34 CFR §300.309).

As OSEP continued to monitor the NJSDE's progress toward addressing the Special Conditions imposed during FY 1999 and as NJSDE continued to work toward completing the required corrective action plan, OSEP determined that for the FY 2000 grant award, the State would continue to be subject to special conditions to secure compliance with the requirements of IDEA. Special Conditions for FY 2000 required that the NJSDE:

- take appropriate action, including any necessary enforcement actions, to ensure that, as soon as possible but no later than June 30, 2001, all public agencies correct noncompliance within the corrective action timelines prescribed by the NJSDE's monitoring reports;
- submit quarterly reports to the OSEP on October 20, 2000, January 19, 2001, April 20, 2001, and June 22, 2001 in which the NJSDE must: submit final monitoring reports and approved corrective action plans for each LEA monitored during 1999-2001; identify the public agencies that have not corrected noncompliance; and identify what enforcement action NJSDE has taken to ensure correction of noncompliance.

In the spring of 1999, the OSEP advised the NJSDE of the OSEP's intent to conduct an onsite visit to New Jersey during the week of September 25, 2000. The purpose of the visit was threefold: (1) verification of the status of implementation and effectiveness of the NJSDE in correcting the deficiencies noted in the OSEP's February 1999 Monitoring Report; (2) determination of NJSDE's ability to meet the Special Conditions imposed on NJSDE's IDEA Part B Grant awards for FY 1999 and 2000; and (3) verification and validation of issues identified by the NJSDE in its Self-Assessment (as part of the OSEP's Continuous Improvement Monitoring process) and input collected by OSEP from public input meetings conducted during the week of February 14, 2000 in New Jersey.

#### **B. Validation Planning – Part B and Part C**

Validation Planning began in the summer of 1999. In response to OSEP's Continuous Improvement Monitoring Process, NJSDE and DHSS proceeded to conduct a statewide self-assessment regarding the State's provision of early intervention services, special education and related services. The process began with the formation of a Steering Committee consisting of the primary stakeholders involved in early intervention services and special education within New Jersey. Each stakeholder organization was invited to send a representative to represent his/her constituency and be able to devote a substantial amount of time to this activity. OSEP provided a framework to guide the self-assessment process across cluster areas of both Part B and Part C (e.g., general supervision, free appropriate public education (FAPE), parent involvement, least restrictive environment (LRE), statewide assessment and personnel development). New Jersey adopted OSEP performance requirements and, with input from the State Steering Committee, refined the statewide indicators. A committee of State personnel developed a five-phase process to guide the steering committee in completing the statewide self-assessment. The process was implemented during a series of six full-day Steering Committee meetings, commencing in September 1999 and ending January 2000. The Steering Committee meetings were designed to actively engage all committee members and secure their diverse opinions and experiences. As described in the New Jersey Self-Assessment, the phases of this process included:

**Phase I: Developing/Validating the Self-Assessment Core Document: Adoption of the OSEP cluster areas as the NJSDE's core self-assessment document.**

Phase II: Reviewing the Perceived Current Status: Gathering a concise list of shared impressions of the Steering Committee for each cluster.

Phase III: Gathering Information: Identifying and obtaining quantitative and qualitative data.

Phase IV: Analyzing the Data: Reviewing and analyzing the available data and the Steering Committee's shared impressions.

Phase V: Generating a Report: A comprehensive and fair view of the current status of special education and early intervention services as reported by the New Jersey Office of Special Education Programs, the DHSS and their constituents.

The State designed the self-assessment process to incorporate the federal requirements, associated statewide indicators, the perceptions of the constituents as represented by the individual Steering Committee members, and the available data. The process resulted in an assessment of the State's current status in meeting the requirements of the Individuals with Disabilities Education Act as well as providing direction in the development of a State Improvement Plan.

The document generated as a result of this process contained the federal cluster areas of performance and the associated performance requirements; statewide indicators developed in collaboration with the Steering Committee; shared impressions of the Steering Committee; and data sources and analysis summaries.

Five public input meetings were held during the week of February 14, 2000 in East Orange, East Windsor and Sewell. Separate public input meetings were conducted for Parts C and B at each of these sites. Because of the potential for large numbers of participants, varied sites were selected so as to ensure the use of auditoriums for large group introductory remarks and the availability of rooms for conducting the group input meetings. Sign language interpreters and Spanish translators were provided for each meeting. More than 900 individuals participated in the public input meetings.

Discussions at the public input meetings centered around the nine cluster areas of IDEA identified by OSEP as leading to better results for infants, toddlers and children with disabilities. The Part B cluster areas are: Parent Involvement, Free Appropriate Public Education in the Least Restrictive Environment, Secondary Transition and General Supervision. The Part C cluster areas are Child Find and Public Awareness, Family Centered Systems of Services, Early Intervention Services in Natural Environments, Early Childhood Transition, and General Supervision.

The use of facilitators and notetakers for each session was critical to the success of the public input meetings. Steering Committee members took notes. After each session, facilitators conducted debriefings with NJSDE, DHSS and OSEP staff to determine whether or not the strategies used were effective in obtaining needed information about the State's systems of early intervention services and special education. New Jersey staff provided alternate formats for public input meeting participants to provide input. The state provided a form for child-specific

complaint issues to be forwarded to the state staff responsible for investigating child-specific complaints and a second form for direct feedback to OSEP on systemic noncompliance issues. Many participants took advantage of this alternate format to provide feedback. The participants' comments and the outcomes of the NJSDE's Self-Assessment were consistent.

### **C. Validation Data Collection**

OSEP visited New Jersey during the week of September 25, 2000 for the purpose of:

- collecting data to verify the implementation and status of NJSDE's effectiveness in correcting the deficiencies noted in OSEP's February 1999 Monitoring Report;
- meeting the Special Conditions imposed by OSEP on New Jersey's FY 1999 and FY 2000 IDEA - Part B Grant award; and
- verifying and validating data gathered for Part C and Part B programs by New Jersey in its Self-Assessment and data collected by OSEP from public input meetings conducted during the week of February 14, 2000.

OSEP Part C Staff visited four counties located in three Regional Collaboratives: Essex County, Hudson County, Camden County, and Cumberland County. OSEP conducted interviews with personnel responsible for the implementation of Part C of IDEA, including local service providers, service coordinators, interagency collaborators and administrators. OSEP staff also interviewed groups of parents at each site. In Cumberland and Essex Counties, OSEP Part C and Part B Staff held interviews with personnel responsible for early childhood transition from both early intervention and local education agencies. Concurrent with interviews at the county level, OSEP conducted interviews with DHSS staff, Regional Collaborative staff, and members of the Interagency Coordinating Council. OSEP Part C and Part B staff also conducted interviews with DHSS and NJSDE staff responsible for early childhood transition.

OSEP Part B Staff visited a total of eight local education agencies: East Orange, Passaic, Wayne Township, Trenton, Hillsborough Township, Toms River, Vineland and Camden. The team also visited a model inclusion program in Metuchen. In these local education agencies, OSEP staff visited four elementary schools, three middle schools, six high schools and a preschool, covering a varied range of program options and disability categories. Concurrent with the visits to the schools, OSEP staff also conducted interviews with NJSDE staff in Trenton on key State systems, including State monitoring, complaint investigations, impartial due process hearings, mediation, comprehensive system of personnel development, and on early childhood and secondary transition, statewide assessments, parent involvement and the provision of a free appropriate public education in the least restrictive environment.

The OSEP team, led by Lois Taylor, consisted of the following individuals: Maral Taylor, New Jersey Part B State contact, and Part B team members Delores Barber, Michael Slade, Marie Mayor, Deborah Jennings, Sheila Friedman and Lena Mills; Sheryl Parkhurst, New Jersey Part C State contact and Part C team members Mary Louise Dirrigl, Alma McPherson, Jackie Twining-Martin and Rhonda Ingel. Ruth Ryder, Director of the Monitoring and State Improvement Planning Division, participated as a member of both teams.

**D. OSEP Follow-up Visit – June 2001**

OSEP conducted a follow-up onsite visit to New Jersey in June, 2001 to verify the status of corrective actions taken by NJSDE as required by the special conditions identified in the OSEP FFY Part B 2000 grant awards. The special conditions required that NJSDE demonstrate that its revised monitoring system is effective in ensuring that all identified noncompliance, including any noncompliance previously identified by OSEP (OSEP's 1996 and 1999 New Jersey monitoring reports) regarding (a) placement of students with disabilities in unnecessarily restrictive placements; (b) denial of needed transition services, to assist youth with disabilities in making a successful transition from secondary education to post-secondary employment and education; (c) denial of needed psychological counseling services and extended school year services; and (d) lack of an effective system for monitoring that enables NJSDE to identify and correct deficiencies in local districts, resulting in ongoing noncompliance across the State.

OSEP visited four local districts, two of which had completed corrective action plans approved by NJSDE in March 2001. OSEP conducted file reviews and staff interviews in four school buildings (one elementary school, one middle school, and two high schools). OSEP also interviewed NJSDE monitoring staff team leaders for two State regional monitoring teams and met with the SEA director to discuss the status of NJSDE's progress toward meeting the OSEP FFY 2000 Part B grant award special conditions.

**E. Improvement Planning**

Through the collaborative efforts of NJSDE, DHSS, and the Steering Committees for Part B and Part C and OSEP, the State has begun to address some areas of improvement identified in the Self-Assessment document. NJSDE and DHSS in collaboration with major stakeholder groups consisting of the State Advisory Committee, the State Interagency Coordinating Council and others are developing a State Improvement Plan. As described in the Part B General Supervision Section of this report, NJSDE's improvement planning activities included a major re-structuring of its monitoring system for identifying and correcting noncompliance in all local education agencies to focus on improved results for children with disabilities. Throughout the improvement planning process, key stakeholder groups will provide input and review drafts of the improvement plan.

Approximately 60 days after the issuance of this report, OSEP will revisit New Jersey to work with the NJSDE and DHSS to finalize an improvement plan that will include targeted activities and methodologies, provision of technical assistance, projected timelines for completion, and methods to evaluate the impact on results for children and families.