



Tracking CEIS

CIFR and IDC in collaboration
with NCSI Fiscal Team.



Presenters



- Steve Smith, CIFR Team Lead
- Jennifer Thompson, Indiana DOE, IDEA Part B Grant Supervisor
- Terry Long, IDC Data Support Specialist

Coordinated Early Intervening Services (CEIS)



From the CIFR/IDC Quick Reference Guide on IDEA CEIS (<https://ideadata.org/resource-library/5679a968140ba0ad348b45d4/>):

- CEIS are services provided to children who are not currently identified as needing special education or related services but who need additional academic or behavioral support to succeed in general education.
- The 2004 reauthorization of IDEA allows local education agencies (LEAs) to use up to 15 percent—and in some cases requires LEAs to reserve the maximum 15 percent—of their IDEA Part B Sections 611 and 619 funds to provide scientifically based CEIS to children without disabilities in grades K–12.

CEIS *(continued)*



- Voluntary CEIS vs. required CEIS (due to LEA identified as having significant disproportionality).
- Reporting requirements are the same whether the CEIS are voluntary or required.
- Introduced February 2016, the proposed Equity in IDEA rule would expand the use of CEIS to students with and without disabilities from age 3 through grade 12. This expansion has been proposed and has not yet been implemented.

CEIS *(continued from slide 4)*



Regulatory language:

- An LEA may not use more than 15 percent of the amount the LEA receives under Part B of the Act for any fiscal year, less any amount reduced by the LEA pursuant to Sec. 300.205, if any, in combination with other amounts (which may include amounts other than education funds), to develop and implement coordinated, early intervening services, which may include interagency financing structures, for students in kindergarten through grade 12 (with a particular emphasis on students in kindergarten through grade three) who are not currently identified as needing special education or related services, but who need additional academic and behavioral support to succeed in a general education environment (34 CFR §300.226(a)).

CEIS Reporting Requirements



- States have annual reporting requirements for both CEIS and MOE, which are combined in a single data collection form in the *EDFacts* Metadata and Process System (*EMAPS*).
- States must report:
 - the amount of Part B funds that each LEA set aside for CEIS
 - whether CEIS are voluntary or required
 - if required, the reason for which the LEA was identified for substantial disproportionality
 - the number of children who received those services
 - the number of children who received CEIS and later received special education and related services

CEIS Reporting Requirements *(continued)*

- LEAs are responsible for tracking and reporting this information to the SEA.
- How are the LEAs in your state tracking and reporting CEIS fiscal and student data to you?

IDC and CIFR CEIS Tracker Tool



1. Would it be beneficial to your state to have an Excel-based CEIS Tracker Tool developed by IDC and CIFR for use with your LEAs or for use as a model for adding new functionality to your current data system(s)?
2. If you answered “yes” to question 1, would your state (a) use the Excel-based tool with your LEAs or (b) possibly use the tool as a model for adding new functionality to your current data system(s)?
3. Describe one or two features that would be most helpful to you in an Excel-based CEIS Tracker Tool.
 - Please answer these questions using your phone. Text TERRYLONG648 to 22333

Poll Questions



Backup links for use with poll questions if Poll Everywhere add-on cannot be used on the laptop provided by the IFF conference.

1. Would it be beneficial to your state to have an Excel-based CEIS Tracker Tool developed by IDC and CIFR for use with your LEAs or for use as a model for adding new functionality to your current data system(s)?
 - Response to question 1: (Yes=8 and No=1)
2. If you answered “yes” to question 1, would your state (a) use the Excel-based tool with your LEAs or (b) possibly use the tool as a model for adding new functionality to your current data system(s)?
 - Response to question 2: (a) use the Excel-based tool with your LEAs=1; (b) possibly use the tool as a model for adding new functionality to your current data system(s)=4; Both=4.
3. Describe one or two features that would be most helpful to you in an Excel-based CEIS Tracker Tool.

Indiana Department of Education's CEIS Tracking

Presenter: Jennifer Thompson,
Indiana DOE Grant Supervisor for IDEA Part B

Indiana CEIS Quarterly Monitoring Report — CEIS Information Form



| CEIS Quarterly Monitoring Report (Quarter 6) for FY 2016 Part B Grant (FFY 2015) | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| Report Expenses for October 1 - December 31, 2016 | | | | Grant Number: 14216- <input type="text"/> -PN01 | | | | | | | |
| Corporation or Charter Name: <input type="text"/> | | | | Corporation Number: <input type="text"/> | | | | | | | |
| Special Education Director: <input type="text"/> | | | | Special Ed. Director Email Address: <input type="text"/> | | | | | | | |
| Use of Part B Funds for CEIS for this grant period IS: (Select "Voluntary" or "Mandatory" from the drop-down box.) <input type="text"/> | | | | Total 611 Allocation for FY 16: <input type="text"/> | | | | | | | |
| How many students have received CEIS since the implementation of the program? <input type="text"/> | | | | Total 619 Allocation for FY 16: <input type="text"/> | | | | | | | |
| How many of these students were subsequently found eligible for special education during this reporting period? <input type="text"/> | | | | <p>*CEIS Maximum: \$0.00</p> <p><small>*If the use of funds for CEIS is <u>mandatory</u>, this is the total amount you MUST expend on activities for CEIS. If the use of funds for CEIS is <u>voluntary</u>, you must not expend any more than this amount on activities related to CEIS.</small></p> | | | | | | | |
| <p>I certify that all activity took place within the project period indicated above, that all funds reported reflect actual expenses utilized for CEIS activities only, and that this information is true and accurate to the best of my knowledge. The CEIS activities consist of services for students in kindergarten through grade twelve who are currently not identified as needing special education or related services, but who need additional academic or behavioral support to succeed in general education. (34 Code of Federal Regulations [CFR] 300.226) The signatures convey agreement with, and accuracy of, the information provided in this entire CEIS quarterly report.</p> | | | | | | | | | | | |
| Signature of Business Official: _____ | | | | Date: _____ | | | | | | | |
| Signature of Special Education Director: _____ | | | | Date: _____ | | | | | | | |
| <p>CEIS Information Form Quarterly Summary Quarterly Description (+)</p> | | | | | | | | | | | |

IN Quarterly Summary — Items 1-6



Corporation Name:

Corporation Number:

Grant Number: 14216-

-PN01

QUARTERLY SUMMARY FOR CEIS

Today's Date:

| Budget Categories: | Approved CEIS Budget | Expenses for this Reporting Period (October 1 - December 31, 2016) | Total CEIS Expenses to Date (Total of all Reporting Period: July 1, 2015 - December 31, 2016) | CEIS Balance |
|--------------------------|----------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------|
| 1 CERTIFIED SALARIES | | | | \$0.00 |
| 2 NON-CERTIFIED SALARIES | | | | \$0.00 |
| 3 EMPLOYEE BENEFITS | | | | \$0.00 |
| 4 PURCHASED SERVICES | | | | \$0.00 |
| 5 CONFERENCE AND TRAVEL | | | | \$0.00 |
| 6 SERVICES FROM ANOTHER | | | | \$0.00 |

IN Quarterly Summary — Items 7-Total



| QUARTERLY SUMMARY FOR CEIS | | | | |
|----------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------|
| Today's Date: | | | | |
| Budget Categories: | Approved CEIS Budget | Expenses for this Reporting Period (October 1 - December 31, 2016) | Total CEIS Expenses to Date (Total of all Reporting Period: July 1, 2015 - December 31, 2016) | CEIS Balance |
| 7 MATERIALS AND SUPPLIES | | | | \$0.00 |
| 8 BUILDINGS | | | | \$0.00 |
| 9 EQUIPMENT AND TECHNOLOGY | | | | \$0.00 |
| 10 INDIRECT COSTS | | | | \$0.00 |
| Totals | \$0.00 | The amount shown below is the amount that was spent on CEIS during the most recent reporting period. \$0.00 | \$0.00 | CEIS Balance \$0.00 |

IN Quarterly Description

Briefly describe the approved CEIS activities that occurred or were implemented during this reporting period.

If you have expended all of the funds for CEIS prior to the end of the mandated time frame, please describe how the activities will continue and what funds will be used to sustain the program for the remainder of the obligatory two year period.

(When typing, press "Alt" and "Enter" at the same time to insert a space between paragraphs or to go to the next line.)

IN CEIS Collection Template — CEIS Received in 2013-14 Tab

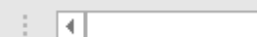


| | A | B | C | D | E | F | G | H | I | J | K | L |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|----|--------------------|-----------------------|----------------------------------------|------------------------------------------|-----------------------------------------------|-----------------------------------------------|---------------------------------------|---------------------------|
| 1 | Collection of CEIS Data on Students Who Received Coordinated Early Intervening Services (CEIS) | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | Corp Name | | | | Corp Number | | | | | | | |
| 4 | Amount used for CEIS | | | | Required/Voluntary | | | | | | | |
| 5 | | | | | | | | | | | | |
| 6 | <p>Directions: Please report the following: 1) All students who received CEIS during the 2013-2014 school year and 2) All students who received CEIS during the 2013-2014 school year who subsequently received special education and related services in the 2013-2014 school year; (3) Please report, of the students identified in 2013-2014 how many students were identified in the 2014-2015 school year.</p> | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| 10 | STN | Last Name | First Name | MI | Grade | Type of CEIS Activity | Date CEIS Services were first received | Qualified for special education services | Special education services began in 2013-2014 | Special education services began in 2014-2015 | Special Education Disability Category | Currently enrolled in LEA |
| 11 | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |

CEIS Received in 2013-2014

CEIS Received in 2014-2015

CEIS Received in 2015-2016



IN CEIS Collection Template — CEIS Received in 2014-15 Tab



| | A | B | C | D | E | F | G | H | I | J | K | L |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------|-----------|---------------------------|------------------------------|-----------------------------------------------|-------------------------------------------------|------------------------------------------------------|------------------------------------------------------|----------------------------------------------|----------------------------------|
| 1 | Collection of CEIS Data on Students Who Received Coordinated Early Intervening Services (CEIS) | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | Corp Name | | | | Corp Number | | | | | | | |
| 4 | Amount used for CEIS | | | | Required/Voluntary | | | | | | | |
| 5 | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
| 8 | <p>Directions: Please report the following: 1) All students who received CEIS during the 2014-2015 school year and 2) All students who received CEIS during the 2014-2015 school year who subsequently received special education and related services in the 2014-2015 school year. (3) Please report, of the students identified in 2014-2015 how many students were identified in the 2015-2016 school year.</p> | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | |
| 12 | STN | Last Name | First Name | MI | Grade | Type of CEIS Activity | Date CEIS Services were first received | Qualified for special education services | Special education services began in 2014-2015 | Special education services began in 2015-2016 | Special Education Disability Category | Currently enrolled in LEA |
| 13 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | |

IN CEIS Collection Template — CEIS Received in 2015-16 Tab



| A | B | C | D | E | F | G | H | I | J | K | L |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|----|---------------------------|-----------------------|----------------------------------------|------------------------------------------|-----------------------------------------------|-----------------------------------------------|---------------------------------------|---------------------------|
| Collection of CEIS Data on Students Who Received Coordinated Early Intervening Services (CEIS) | | | | | | | | | | | |
| Corp Name | | | | Corp Number | | | | | | | |
| Amount used for CEI | | | | Required/Voluntary | | | | | | | |
| <p>Directions: Please report the following: 1) All students who received CEIS during the 2015-2016 school year and 2) All students who received CEIS during the 2015-2016 school year who subsequently received special education and related services in the 2015-2016 school year. (3) Please report, of the students identified in 2015-2016 how many students were identified in the 2016-2017 school year.</p> | | | | | | | | | | | |
| | | | | | | | | | | | |
| STN | Last Name | First Name | MI | Grade | Type of CEIS Activity | Date CEIS Services were first received | Qualified for special education services | Special education services began in 2015-2016 | Special education services began in 2016-2017 | Special Education Disability Category | Currently enrolled in LEA |
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Small Group Activity



1. How are you collecting CEIS fiscal and student data from LEAs?
 - Online fiscal data system?
 - Online student data system?
 - Spreadsheets?
 - Other?

2. What works well?

3. What needs to be improved?

Session Summary

Questions?

Thank you for participating in our session!

Contact Information for Presenters



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CIFR and IDC are grateful to our collaborator



The contents of this presentation were developed under grants from the US Department of Education, #H373F140001 and #H373Y130002. However, those contents do not necessarily represent the policy of the US Department of Education, and you should not assume endorsement by the Federal Government. Project Officers: Matthew Schneer, Dan Schreier, Meredith Miceli, and Richelle Davis.