

Early Childhood Development Act Administrative Manual

**Revised February, 2013
Missouri Department of Elementary and Secondary Education
Chris Nicastro, Commissioner of Education**

**Early Childhood Development Act
Administrative Manual
for Parents as Teachers**

Quality parent and early childhood education has been a priority of the Missouri State Board of Education since 1972. In its special report Reaching for Excellence: An Action Plan for Educational Reform in Missouri (March 1984), the State Board of Education recommended that high-quality educational services be made available to every family and preschooler in the State of Missouri.

The 83rd General Assembly enacted Senate Bill 658, the Early Childhood Development Act (ECDA), which authorizes the administration of a program of services for children below kindergarten entry and their parents. This landmark legislation was broadly supported by many agencies, organizations, and individuals. The Department of Social Services, Department of Health and Senior Services, and the Department of Mental Health played a significant role in its development. We continue to be grateful for these and others who recognized the important benefits of parent education programs, screening services, and programs for the developmentally delayed.

The Early Childhood Education Act programs help to increase parents' confidence and improve their parenting skills. They can then better support their children's education and development before and after school entry. Periodic screenings increase parents' understanding of their children's developmental progress, as well as alert them to any possible delays. Early intervention for identified problems helps improve chances that children will enter school with "healthy minds and bodies."

GOALS AND OUTCOMES

The ECDA authorizes state funding to school districts that provide the following education programs and services to families expecting a child or have a child birth to kindergarten entry:

- Periodic development screening for all children birth to kindergarten entry; and
- Parent education for all families prenatal to kindergarten entry.

The general goals of these programs and services are:

- To provide appropriate and useful information and guidance to parents as their child's primary and most important teachers;
- To inform parents of possible delays in their child's development, as well as normal progression; and
- To prepare children for success in school and in life.

Expected outcomes from these programs and services include:

- Increased parental confidence and involvement in the educational development of their child;
- Early establishment of positive partnerships between home and school;
- Joint cooperation among school districts, agencies, and organizations in providing services to young children, thereby reducing duplication of services and increased cost;
- Increased readiness for kindergarten;
- Increased academic achievement in elementary school; and
- Reduction of more expensive remedial and special education services and retentions.

1. Parents as Teachers (PAT) Requirements

1.1 Administration

- 1.1.1 School districts must designate a PAT supervisor who is familiar with the program and can provide leadership for the district's program. Supervisors must complete a supervisor training approved by the Missouri Department of Elementary and Secondary Education (DESE).
- 1.1.2 School districts must provide, at a minimum, the four components of a PAT program including family personal visits, group connections, developmental screenings and access to a resource network.
- 1.1.3 School districts, regardless of contractual agreements, must provide a systematic method for storing all required documentation and make it readily available for review by DESE.
- 1.1.4 All school districts, regardless of contractual agreements, must submit to DESE an Compliance Plan, Invoices, a Final Report, and any other reports deemed necessary by DESE.
- 1.1.5 Reimbursement by the state for PAT services rendered and not expended must be reported as Unexpended State Funds. State funds reimbursed for PAT services rendered may be used only to provide PAT services.
- 1.1.6 All school districts contracting PAT services with another school district, public agency, or state-approved not-for-profit agency are required to have available, for review by DESE, a contract outlining the agreement. Please see section 2.1 for specific requirements.

1.2 Community Advisory Committee

- 1.2.1 Parents as Teachers programs must establish a Community Advisory Committee. This committee should meet every six months, or at a minimum, annually to support and advise the activities of the program.

1.3 Qualifications and Renewal of Parent Educators

- 1.3.1 All individuals being considered for a parent educator position must meet the minimum requirements to be employed. Please see section 2.3 for specific requirements.
- 1.3.2 Parent educators must be trained in the Foundational and Model Implementation, renew annually through the Parents as Teachers national office and develop a professional growth plan cooperatively with their program supervisor annually. See section 2.3 for specific training requirements.

1.4 Curriculum

- 1.4.1 Parent educators must have completed either the Born to Learn Curriculum or the Foundational and Model Implementation training provided by the Parents as Teachers national office. By July 1, 2014, every parent educator must be trained in the Foundational Curriculum and Model Implementation.

1.5 Description of Services

- 1.5.1 PAT services should be available for 12 months to better accommodate the needs of families. At a minimum, PAT services must be available throughout the school year.
- 1.5.2 All participating families must be provided family personal visits, developmental screenings for children, access to group connections and a resource network.
- 1.5.3 The program must evaluate the effectiveness of parent education and screening services annually.

1.6 Family Personal Visits

- 1.6.1 Parent educators providing family personal visits must utilize the curriculum for which they have been trained by the Parents as Teachers national office. By July 1, 2014, all family personal visits will be provided using the Foundational Curriculum and implementing the PAT approach.
- 1.6.2 Family personal visits must, at a minimum, be 50 minutes in length and be provided by a certified parent educator.
- 1.6.3 All participating families may be offered, at minimum, monthly family personal visits during the program year. Families who meet one or more high needs characteristic should be offered at least twice monthly family personal visits.
- 1.6.4 Teen families who are participating in PAT services may be provided family personal visits in a group setting with other teen families.

1.7 Developmental Screenings

- 1.7.1 All children of participating families between the ages of 3 months to kindergarten entry should receive a complete screening, including health, hearing, vision, dental and general development.
- 1.7.2 Screenings must be provided using a DESE approved screening instrument by a trained educational professional. Results of those screenings must be shared with parents through a face to face conference in addition to a written summary of the results.
- 1.7.3 Screenings outside the public school system must include a consent form completed by the parents that allows the information to become part of the child's school record.

1.8 Group Connections

- 1.8.1 The program should offer at least 12 group connections annually.
- 1.8.2 Group connections are, at a minimum, 50 minutes in length and provide families with parent education information.
- 1.8.3 Group connections should focus on parent-child interaction, development-centered parenting, and family well-being throughout the year. Meetings incorporate child development information for children under the age of kindergarten entry.

1.9 Resource Network

- 1.9.1 A network of resources must be identified listing the current contact information for programs and services within the community that provide information and/or services to families.
- 1.9.2 Parent educators connect families to resources that help them reach their goals and address their needs.

1.10 Verification and Retention of Records

- 1.10.1 Programs must maintain Family Files to verify reimbursement for services provided.
- 1.10.2 Once a child is eligible for kindergarten the program must transfer a Cumulative File to the child's elementary attendance building. Cumulative Files must be maintained until the child completes third grade.
- 1.10.3 Program Files include Group Connection Records, Summary of Services Records and Community Advisory Records. These records must be maintained for 5 years.
- 1.10.4 All information collected through the Parents as Teachers program must maintain confidentiality of the participating families.
- 1.10.5 Any information that is being shared by programs outside the public school system must have a release of information form from the parents/guardians.

1.11 Reporting and Reimbursements

- 1.11.1 Programs may be reimbursed up to a total of 12 family personal visits for non high needs families and 25 family personal visits for high needs families per program year.
- 1.11.2 Families who are expecting a child may be provided up to 5 prenatal family personal visits. High needs families who are expecting a child may be provided up to 10 prenatal family personal visits.
- 1.11.3 Programs may be reimbursed for a complete screening per child per program year.

2. Supporting Guidance

2.1 Administration

All programs must designate a supervisor who is responsible for providing leadership and direction for the program including supervision and support of parent educators; and evaluation of services and staff. The supervisor should be knowledgeable of the available funding, reporting requirements and reimbursement rates for services. This supervisor must participate in training outlined by the Early Learning Section of DESE.

All public schools will provide PAT services to families including, but not limited to family personal visits, developmental screenings, group connections and access to a resource network. These services are required to be provided by each school district either directly or through a contractual agreement with another school district, public agency, or state approved not-for-profit agency.

Each PAT program must establish a systematic method of storing records on site at the district.

Contracted Services

If a school district is unable to offer one or more approved programs/services as authorized by the ECDA, the district must seek to contract for the services with another district, public agency, or state-approved not-for-profit agency.

The contract must ensure that services will be provided as outlined in the program guidelines and as stated in the district's Compliance Plan. Each district is responsible and accountable for services provided through the contract.

It is the district's responsibility to:

- Enter into a valid contract with such school district or agency;
- Monitor the service provisions under the contract to assure program guidelines are being met;
- Ensure adequate record keeping, as required by DESE, to justify reimbursements;
- Provide space for program records at the school district;
- Submit to DESE a program Compliance Plan including the name of the contractor;
- Submit to DESE any reports, including invoices and a final report, which may be required to enable DESE to fulfill its responsibilities; and
- Pay the contractor the amount due for the services rendered under the contract. All correspondence and payments from DESE will be sent to each individual district.

2.2 Community Advisory Committee

A critical component of a successful program is the collaboration with the community. Therefore, all programs must establish a Community Advisory Committee. The Community Advisory Committee includes key stakeholders in the community such as families, early childhood providers, school administration, school board members and other community leaders. The purpose of the Advisory Committee is to support and promote PAT services, and to assist with the planning and evaluation of those services. It is required that this committee meet at least annually but is encouraged to meet more frequently to ensure the effectiveness of their role as an advisory committee.

Members of the committee should represent the following:

- Local board of education;
- Mental health agency;
- Social service agency;
- Healthcare providers (agencies/individuals);
- Church/Ministerial Alliance;
- Civic service groups;
- PTA/PTO;
- Participating parents;
- Senior citizens group;
- Colleges, community and junior colleges, and university personnel;
- Private preschool/child care directors;
- Head Start directors; and
- Local and state level elected officials.

Primary responsibilities of the Community Advisory Committee should include, at a minimum, the following:

- Form relationships with community partners who are providing parent education or other early childhood services and programs to families;
- Personal contact with community members to promote the Parents as Teachers services;
- Recruit prospective parents for participation;
- Survey available community resources and gather needed information;
- Review the evaluation of services and make recommendations for improvements;
- Advise options for coordination of services between the community and the school; and
- Serve as a resource to the administrator.

Required Documentation for the Community Advisory File must include:

- Membership List;
- Agenda(s);
- Minutes; and
- Sign-In Sheet(s) for attendance.

2.3 Qualifications and Renewal of Parent Educators

Individuals must qualify for training as a parent educator by meeting one of the following criteria:

- Certification and/or a four year degree in either Early Childhood Education, Early Childhood Special Education, Elementary Education, Vocational Home Economics, Family and Consumer Sciences or Child Development and demonstrated ability in working with young children and their parents;
- A two-year associate degree or two-year certificate program in Early Childhood Education, Child Development, or Nursing and demonstrated ability in working with young children and their parents;
- Sixty semester hours or more of credit from an academic degree granting institution which is contained within the United States Department of Education's *Directory of Post-Secondary Institutions* and two years of successful experience in a program working with young children and their parents as approved by DESE;
- Five years of successful experience in a program working with young children and their parents as approved by DESE and a high school diploma or equivalent.

Individuals must have successfully completed the DESE approved training in parent education regardless of previous training and experience according to the following schedule prior to delivering family personal visits:

- Successful completion of the week long Foundational Curriculum and Model Implementation training; and
- A family personal visit observation of an experienced parent educator.

All parent educators must complete the professional development hours below as well as renew annually with the Parents as Teachers national office. In addition, each parent educator must develop a professional growth plan cooperatively with their program supervisor annually.

First year parent educators must complete 20 hours as follows:

- 1 hour observation of an experienced parent educator;
- 5 hours of Health, Hearing and Vision Training;
- 5 hours of ASQ/ASQ:SE Training;
- 3 hours of Family Personal Visit Consultation provided by DESE; and
- 6 hours of DESE and/or Parents as Teachers national office professional development.

Second year parent educators must complete 15 hours of professional development.

Third year and beyond must complete 10 hours of professional development.

Professional development for parent educators can come from a variety of sources such as DESE, Parents as Teachers national office, conferences and college coursework related to early childhood and local or in-district training related to the work of a parent educator. Please note that no more than 5 hours of training may occur in-district.

Parent Educators must complete the required number of professional development hours between October 1st and September 30th. Each parent educator must renew with the Parents as Teachers national office annually.

2.4 Curriculum

In Missouri, Parents as Teachers holds firm to the belief that all children will learn, grow, and develop to reach their full potential, and that parents are their children's first and most influential teachers. DESE has a unique relationship with the Parents as Teachers national office and recognizes this history of providing an evidence-based, research-informed model and training. Parents as Teachers programs funded by DESE should implement the Parents as Teachers evidence-based home visitation model when providing home visiting services.

Parent educators trained after December, 2010 must implement the PAT approach using the Foundational Curriculum.

Parent educators trained prior to December of 2010 must complete retraining and be implementing the PAT approach using the Foundational Curriculum by July 1, 2014.

Districts using a curriculum other than the recommended curriculum for the parent education program must submit a description of the curriculum with the program Compliance Plan. The description must include current research validating the curriculum, an outline of the curriculum goals and objectives, and samples of the materials to be used with parents. Curriculum must be submitted for approval prior to implementation.

2.5 Description of Services

Parental influence in a child's life is so important for later learning, a strong program of parent education must be offered to families with children under the age of kindergarten entry, including prenatal families. PAT services shall include, at a minimum, family personal visits, developmental screenings, group connections and access to a resource network. These services are available to families who are expecting a child or have young children under the age of kindergarten entry.

Parent education services should be available 12 months to better accommodate the needs of families. At a minimum, parent education services must be available throughout the school year.

Family personal visits should be offered monthly during the program year. Families who meet one or more high needs characteristic should be provided at least twice monthly family personal visits.

Developmental screenings including health, hearing, vision and dental must be provided annually for all children whose families participate in PAT and serve as the foundation of educational guidance. The developmental screening must be provided using DESE approved screening instruments as indicated on the program's PAT Compliance Plan.

Group Connections should be provided with a recommendation of at least 12 meetings annually. Programs are encouraged to partner with other programs and local agencies to provide these opportunities.

A resource network identifying services in the community must be available for all participating families. Parent educators will use these resources to connect families to additional services beyond the parent education program such as library information, conservation programs, playgroups as well as social service programs.

Evaluation of services is required to ensure services are being provided effectively and in the best manner possible to meet the needs of participants.

Evaluation of parent education services must include one or more of the following methods:

- Degree of increase of participation compared to previous participation;
- Degree of participation from the total eligible population;
- Degree of participation of high needs families;
- Evaluation from the Internal Coordination Committee and/or Advisory Committee;
- Parent Questionnaire;
- Affiliate Quality Assessment

Evaluation of screening services must include one or more of the following methods:

- Accuracy with which possible developmental delays and physical problems are identified;
- Degree of increase of participation compared to previous participation;
- Degree of participation from the total eligible population;
- Degree of participation of high needs families;
- Evaluation from the Internal Coordination Committee and/or Community Advisory Committee;
- Follow-up on referrals;
- Parent Questionnaire;
- Affiliate Quality Assessment

2.6 Family Personal Visits

All family personal visits must be provided by a certified parent educator who has been trained in and uses a parent education curriculum that is approved by DESE. Families participating in PAT services should be provided family personal visits that occur in the home setting. Services in the home can provide the parent educator with more information to better serve those involved and provide the family with a comfortable and familiar environment. The family

personal visit allows the parent educator to individualize the educational guidance to each family, observe the child and the parent-child interactions, provide timely information on the child's development and parent-child activities using items available in the home, and to respond to each parent's concerns. Exceptions can be made when families prefer to meet outside the home such as a child care center or public library. This exception should be made only upon the family's request.

Please note that due to the design of the family personal visit it is important for the child to be present. There may be instances where this is not possible due to court mandated participation by a parent who does not actually have direct contact with the child. These special incidences must be approved by DESE prior to delivery of the services.

High Needs Families

High needs families are defined as families meeting one or more department approved high needs characteristic(s). These families may receive more frequent services based on their need for additional support.

Teen Visits

Teen families, are defined as a parent who is under the age of 20 years old, can be unique in how they participate in services. For teen parents who begin the year meeting the age requirement and have their 20th birthday mid-year, they may continue receiving services as a teen family for the remainder of the year. While it is important to see the parent-child interaction that occurs during a family personal visit it is sometimes difficult to accommodate teens and their schedules. Programs must attempt to provide at a minimum 2 family personal visits. Additional family personal visits may occur in a group setting with other teens.

Prenatal Visits

Families who are expecting a child may begin to receive services prior to the birth of their child.

Parent educators must keep educational records of each family personal visit. The following information outlines the required information/forms for documenting services for reimbursement.

Required Family Personal Visit documentation must include:

- The **Family Personal Visit Record** should cover the content of the visit, outline issues raised by the parents, give specific observations in all areas of the child's development (language, social, intellectual, and physical development), and setting the appointment for the next family personal visit. Such records are essential for monitoring child and family progress and serve as background material for staff discussion on providing appropriate educational guidance to each family. The Family Personal Visit Record should be completed within 24 hours of the family personal visit. Only visits that have a completed Family Personal Visit Record will be counted for reimbursement.

Additional recommended records:

- The **Planning Guide** should be maintained for all family personal visits beyond the first 8 Foundational Plans. This is recommended only for programs that have been trained in the Foundational Curriculum and are implementing the PAT approach.
- **Milestones** should be maintained for each child and updated following each family personal visit.

Programs will indicate which method(s) are used for evaluation on the district Compliance Plan. The district must provide documentation to support each method of evaluation indicated on the Compliance Plan.

2.7 Developmental Screenings

Periodic monitoring of a child's development is the foundation of educational guidance to parents. A review with each participating family of their child's developmental profile significantly reduces the possibility that the child will go through the preschool years with an undetected developmental delay. Skills and abilities are developing rapidly during this time. Since many causes of slow development can be treated effectively and efficiently if detected early, it is important they are identified as early as possible. In addition, the recurrent monitoring and review can signify to parents that their child is progressing and can also give direction on how to support and encourage continued growth.

The outcome of screening is not to label some children as delayed but to identify areas of development where delays may exist. As families progress through the continuum of services, the collection of information through periodic screenings and parent education should provide an increasingly clear picture of a child's relative strengths and areas of concern. The most critical aspect of the screening process is the sharing of accurate and helpful information with parents. The sharing of information should take place immediately following the screening or shortly thereafter. The conference should be approached as a developmental review, mutual sharing of the child's achievements, as well as any areas of concern. In addition to the personal conference parents must receive a written summary of their child's screening results, with suggestions of fostering learning in the home. In addition, all parents must be informed of other available services for which they are eligible.

All children ages 3 months to kindergarten entry are eligible for screening services. For screening and funding purposes, children should be reported according to their age at the time the screening is completed. Children being screened may be counted only once during the program year for reimbursement purposes.

Screening services must be available to all children participating in the program. Programs may choose to deliver these services in a variety of ways including large mass screenings, scheduled appointments throughout the year or as a part of the family personal visits. Screenings provided as part of the family personal visit must be provided over the course of several visits. If a complete screening is delivered in the home during a single family personal visit it can be reported only as a screening and not a family personal visit.

Developmental screenings shall include, but need not be limited to, the following areas:

- Conventional Knowledge
- Physical Development
- Symbolic Development
- Communication
- Mathematical/Physical Knowledge
- Working with Others
- Learning to Learn

The health portion of the screening includes health questionnaire, hearing, vision and dental checks.

Parents must be informed that the health and physical development portion of screening is not a substitute for regular physical examinations by a health care provider. Language

development, because of its strong relationship to school success, should receive special emphasis.

Adequate coverage of developmental skill areas may be obtained through the use of a single, well rounded screening instrument or through a combination of more narrowly designed tests. Since the ages of the children being screened vary, the instruments and procedures also vary. No single screening test is equally effective for all ages or all areas of development.

Screening instruments must meet minimal guidelines and be approved by DESE prior to use in the program.

Educational professionals providing screenings must be knowledgeable in child development and development concerns, skilled in interpreting screening results, and able to communicate results effectively to parents.

Programs will indicate which method(s) are used for evaluation on the district Compliance Plan. The district must provide documentation to support each method of evaluation indicated on the Compliance Plan.

Required documentation for screening services

1. Individual Child Information:

- **Health Questionnaire** or **Health Record** includes Health, Hearing and Vision information as well as immunizations and height and weight measurements;
- **Screening Protocol** from a DESE approved screening instrument;
- **Screening Summary** that provides results of the screening and must be shared through a personal conference with the parent/guardian; and
- **Screening Recommendations Record** must also be included for children needing further assessment or intervention. Programs may also use their own district's referral form to record the necessary information.

2. Permission to Exchange Information

- Any screening information released by the school to a third party requires the prior written consent of the parent, guardian, or other custodian of the child. Districts collaborating with other programs, such as Head Start or local child care facility, must have this written consent in order to share screening information between programs. Districts are not financially obligated for non-district services rendered as a result of recommendations, except for evaluation covered under state and federal statutes and regulations concerning handicapped children.

3. Verification of Services Records must include the number of children:

- Screened by age divisions;
- With indicated delays in:
 - Development (language and motor);
 - Vision;
 - Hearing; and
 - Health and Physical;
- Referred for further evaluation; and
- With completed evaluations.

2.8 Group Connections

The primary goal for a group connection is to provide child development information to families in a setting that will encourage them to share with other families with similar aged children and to discuss parenting issues. The intent is to provide parents with meaningful information regarding the growth and development of their child or children. It is recommended that programs provide at least 12 group connections and have a planned format for delivering parent education for all families attending and be focused on parent-child interaction, development-centered parenting, and family well-being throughout the year. Handouts, posted information or instructions are beneficial for parents but do not stand alone as the only tool for delivering parent education.

Required Group Meeting/Connections Records:

- **Group Connection Planner and Record** that documents the title, date, location and the process for delivering the parent education;
- **Handouts** provided during the meeting that provide additional parent education;
- **Sign-In Sheet** for all parents to document attendance;
- **Group Connections Feedback Form** that includes issues raised and possible changes for future use of the group meeting topic; and
- **Brief Enrollment Form** for all families attending who are not already enrolled in the program.

2.9 Resource Network

The Resource Network is the information regarding current community resources available to provide supports for the well being of families receiving services. The network should include both formal and informal services that would allow families to make social connections with other families such as the library, child care or play group information but also connections to support families in time of need such as WIC or food pantries. The PAT program is not intended to be the only service for families but a strong piece of the community network that supports families.

Administrators and parent educators should take an active role in developing collaborations with the resources available in the community. These collaborations can help a community provide a strong and effective network of support for all families.

2.10 Organization, Retention and Release of Required Documentation

The organization of the required documents can be categorized into two types of files, Family Files and Program Files.

Family Files

- **Recruitment and Enrollment Record** includes name of family and child and contact information, birth date of child, entry date into the program, exit date from program, etc.;
- **Individual Service Record or computerized tracking system** supports the number of family personal visits, group meetings/connections, screenings and resources/referrals provided at any given time;
- Family Personal Visit Documentation including the **Family Personal Visit Record** (the Planning Guide and Milestones are recommended);
- Individual child screening forms including the **Health Record, Screening Protocol, Screening Summary and Screening Recommendations Record** (as needed); and
- **Exit Record** includes entry and exit dates along with a summary of the services provided. This form is to be completed once the child is no longer eligible for PAT or services are discontinued.

Additional Record that are recommended

- Goal Setting includes a timeline, action plan and review of progress.

Once a child becomes enrolled in kindergarten the PAT program must transfer a cumulative file to the child's elementary attendance building. This will allow for pertinent information to be accessed by elementary teachers for a smooth transition of services to the child and family. If the child is not attending an elementary building within the district the PAT program must store the cumulative file and be prepared to transfer records to another district upon parent request.

Cumulative Files (must be maintained until the child completes third grade)

- Exit Report forms;
- Health Record;
- Screening Protocols (most current, or protocols that indicate a concern); and
- Screening Summaries.

Program Files (must be maintained for 5 years)

- Group Connections Records;
- Summary of Services Record or a computerized tracking system which provides a listing of all families participating in the program along with the number of family personal visits, group meetings/connections and resources/referrals provided; and
- Community Advisory Records.

Additional Records that are recommended

- Professional Development and Supervision Records

Storage of Files

Districts must provide storage space for electronic and paper records that would allow them to be readily accessible, fire-safe, and available for review and verification of services.

All family files and program files may be maintained through an electronic process. The only exception may be sign in sheets and screening protocols. Electronic files must be organized in such a manner that would allow for easy review and verification of services.

Confidentiality and Release of Information

Many programs are utilizing computerized databases to manage record keeping and reporting requirements. All programs are responsible for maintaining this information and must maintain the confidentiality of families. Parents have the right to review their family files and may request information be transferred or shared with others. The transfer of files can only occur when the parent has completed a release of information form (**Permission to Exchange Information**). All family files are considered confidential and that information cannot be released unless there is a signed release form from the parent.

2.11 Reporting and Reimbursements

Compliance Plan

Each school district must submit an Compliance Plan to DESE in such form as required and prepared by DESE. The district will be required to furnish information assuring intended compliance with the program standards stated in these guidelines.

Invoicing

Programs should submit monthly **Invoices** reporting all of the services provided to date to DESE in such form as required and prepared by DESE. This means that each invoice submitted will reflect an accumulation of services since the start of the year. The last day for submitting an Invoice is April 14th.

Final Report

Each district must submit a Final Report by May 15th reporting all the services provided during the program year. The Final Report will be available April 15th through May 15th and will serve as the last request for payment for the year.

Allocations

Each district will be provided with an allocation for both parent education and screening services. Districts must provide services to meet their allocations and will maintain a waiting list for a particular service only if the district allocation has been met. Districts are strongly encouraged to provide all families with monthly family personal visits and more frequent services to families who meet one or more high needs characteristics.

Reimbursements

Parent Education Services

Each school district will be required, when submitting the Invoices and Final Report to assure compliance with the DESE Program Requirements and the district's current approved Compliance Plan. The department will determine the priorities for funding and provide payment based on those priorities.

Districts may be reimbursed for up to 25 family personal visits for families meeting at least one high needs characteristic. Reimbursement for 10 prenatal visits for families with high needs, with a maximum of 25 family personal visits for the program year, may be provided to districts.

Teen families who are participating in PAT services may be provided with group connections specific to teen parenting issues. This contact for teens will be reported as a family personal visit for reimbursement.

Districts may be reimbursed for up to 12 family personal visits for non high needs families which includes 5 prenatal visits.

Districts may receive double reimbursement when providing families with more than one child under the age of kindergarten entry a family personal visit if no more than two parent child activities are shared, the visit lasts a minimum of 1 hour and 45 minutes and the family personal visit documents information for both children. In FY15 the double reimbursement for families with multiple children will no longer be available. It is recommended that programs begin planning for this change by limiting the number of visits reported for double reimbursement.

Screenings Services

During the program year reimbursement may be provided for one complete screening for each child whose family is participating in the PAT program. Programs are also encouraged to work with other programs in the community, such as Head Start, community child care, crisis shelters, etc., to provide screening services to children not enrolled in PAT.