



**SPECIAL EDUCATION
EARLY CHILDHOOD
DATA DICTIONARY
School Year 2011/12**

The purpose of this handbook is to provide guidance to special education early childhood staff on the coding and entering of special education student data into APSCN. The special education early childhood data are collected through APSCN and are a component of the special education module. In the guide we attempt to be as inclusive as possible as it relates to Federal reporting requirements; however, not all situations will be covered here. If there are questions about how to code a student after consulting this data dictionary, please contact the Arkansas IDEA Data & Research Office at 501-683-7219.

DATA FIELDS required for Federal reporting**General Information Page 1** (with Federal reporting cycles)**FIELD: Social Security Number (4, 7)**

The nine-digit Social Security number of the student. If a student's SSN cannot be obtained, then use the ADE assigned number as required by Arkansas Code Ann. 6-18-208. This number should remain the same throughout the student's school career.

FIELD: First Name (4, 7)

The student's legal first name, as printed on the student's birth certificate, social security card, or other legally binding document.

FIELD: Middle Name (4, 7)

The student's legal middle name, as printed on the student's birth certificate, social security card, or other legally binding document.

FIELD: Last Name (4, 7)

The student's legal last name, as printed on the student's birth certificate, social security card, or other legally binding document.

FIELD: Date of Birth (4, 7)

The student's date of birth.

* Please, make sure that the student's birth date is accurate. Some common errors include using the current year as the student's year of birth and entering years such as '2093' or '0993' instead of '1993.'

FIELD: Age (4, 7)

Derived from the student's date of birth as of December 1

FIELD: Race (4, 7)**H Hispanic or Latino**

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

N American Indian or Alaskan Native

A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

- A Asian**
A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, including, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- B Black or African American**
A person having origins in any of the black racial groups of Africa.
- W White**
A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- P Native Hawaiian/Pacific Islander**
A person having origins in any of the original people of Hawaii, Guam, Samoa or other Pacific Islands.

FIELD: Gender (4, 7)

- M Male**
F Female

FIELD: Resident District LEA (4, 7)

The first four digits of the student's resident district lea number. Add 3 zeros behind the district LEA number.

FIELD: English Language Learner (4, 7)

English is not the student's first language or the language spoken at home. Select
Y Yes
N No

FIELD: Primary Disability (4, 7)**AU Autism**

"... a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 3, that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance, as defined in paragraph (b)(4) of this section." [taken from 34 Code of Federal Regulations §300.7(c)(1)(i)]

DB Deaf-Blindness

"... concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness." [taken from 34 Code of Federal Regulations §300.7(c)(2)]

HI Hearing Impairment

Deafness: “. . . a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects a child’s educational performance.” [34 Code of Federal Regulations §300.7(c)(3)]

Hearing Impairment: “. . . an impairment in hearing, whether permanent or fluctuating, that adversely affects a child’s educational performance but that is not included under the definition of deafness in this section.”[taken from 34 Code of Federal Regulations §300.7(c)(5)]

MD Multiple Disabilities

“. . . concomitant impairments (such as mental retardation-blindness, mental retardation-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blindness.” [taken from 34 Code of Federal Regulations §300.7(c)(7)]

OI Orthopedic Impairments

“. . . a severe orthopedic impairment that adversely affects a child’s educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).” [taken from 34 Code of Federal Regulations §300.7(c)(8)]

OHI Other Health Impairments

“(9) Other health impairment means having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that--
 (i) Is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, and sickle cell anemia; and
 (ii) Adversely affects a child’s educational performance.”[taken from 34 Code of Federal Regulations §300.7(c)(9)]

PS Preschool Disabled (Non-Categorical)

The category includes a child “. . . (1) who is experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and (2) who, by reason thereof, needs special education and related services.” [taken from 34 Code of Federal Regulations §300.7(b)(1)(2), 300.313(b)]

SI Speech/Language Impairment

“ . . . a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child’s educational performance.” [taken from 34 Code of Federal Regulations §300.7(c)(11)]

TBI Traumatic Brain Injury (TBI)

“ . . . an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child’s educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma.” [34 Code of Federal Regulations §300.7(c)(12)]

VI Visual Impairments

“ . . . an impairment in vision that, even with correction, adversely affects a child’s educational performance. The term includes both partial sight and blindness.” [34 Code of Federal Regulations §300.7(c)(13)]

FIELD: Educational Environment (Cycles 4,7)

The educational environment as proposed and defined under federal guidelines. (Child Count – December 1 – Early Childhood)

Codes A1, A2, B1, and B2: Regular Early Childhood Program is a program that includes a majority (at least 50 percent) of nondisabled children (i.e., children not on IEP’s). This category may include, but is not limited to: Head Start; kindergartens; preschool classes offered to an eligible pre-kindergarten population by the public school system’ private kindergartens or preschools/ and group child development center or child care.

A1 Reg EC program 10+ hrs a week w/majority of sped services in EC program

The child is receiving the majority of hours of special education and related services in a Regular Early Childhood Program and the student is attending at least 10 hours per week.

A2 Reg EC program 10+ hrs a week w/majority of sped services in other location

The child is receiving the majority of hours of special education and related services in some other location and the child attends a Regular Early Childhood Program at least 10 hours per week.

B1 Reg EC program <10 hrs a week w/majority of sped services in EC program
The child is receiving the majority of hours of special education and related services in the Regular Early Childhood Program and the child attends a Regular Early Childhood Program *less than* 10 hours per week.

B2 Reg EC program <10 hrs a week w/majority of sped services in other location
The child is receiving the majority of hours of special education and related services in some other location and the child attends a Regular Early Childhood Program *less than* 10 hours per week.

Codes RS, SP, and SS: Special Education Program includes less than 50 percent nondisabled children (i.e., children not on IEP's).

RS Residential
Children attending a Special Education Program, not in any regular early childhood program, and who receive all of their special education and related services in publicly or privately operated residential schools or residential medical facilities on an inpatient basis.

SP Separate Class
Children attending a Special Education Program in a class with less than 50% nondisabled children, not in any regular early childhood program, and who receive all of their special education and related services in educational programs designed primarily for children with disabilities housed in regular school buildings or other community-based settings. This may include, but is not limited to: special education classrooms in regular school buildings; special education classrooms in child care facilities, hospital facilities, on an outpatient basis, or other community-based settings; and special education classrooms in trailers or portables outside regular school buildings.

SS Separate School
Children attending a Special Education Program, not in any regular early childhood program who receives all of their special education and related services in educational programs in public or private day schools specifically designed for children with disabilities.

Codes HM and IO: If the child attends neither a Regular Early Childhood Program nor a Special Education Program as defined below, the child is to be reported as HM or IO, dependent upon whether the child receives special education and related services at home or in the service provider location or some other location as described below.

HM Home
Preschoolers who receive all of their special education and related services in the principal residence of the child's family or caregivers, and who attended neither a Regular Early Childhood Program nor a Special Education Program provided in a separate class, separate school, or residential facility. Include children who receive special education both at home and in a service provider location or some other location that is not in any other category listed below under Itinerant Service. The term caregiver includes babysitters.

IO Itinerant Service Outside Home

Preschoolers who receive all of their special education and related services at a school, hospital facility on an outpatient basis, or other location for a short period of time (i.e., no more than 3 hours per week). These services may be provided individually or to a small group of children. This may include, but is not limited to: speech instruction up to 3 hours per week in a school, hospital, or other community-based setting.

General Information Page 2 (with Federal reporting cycles)**EARLY CHILDHOOD OUTCOMES (Cycle 7)**

The functional level of the student for each outcome upon entry to special education and exit from special education.

FIELD: Entry Assessment Date (Required Field)

The date which the entry functional assessment scores were determined

FIELD: Entry Social Emotional Functional Score (Required Field)

The functional level determined by the IEP team within 30 days of entry based on the Early Childhood Outcome Centers 7-point scale.

FIELD: Entry Knowledge/Skills Functional Score (Required Field)

The functional level determined by the IEP team within 30 days of entry based on the Early Childhood Outcome Centers 7-point scale.

FIELD: Entry Self Help Functional Score (Required Field)

The functional level determined by the IEP team within 30 days of entry based on the Early Childhood Outcome Centers 7-point scale.

FIELD: Assessment 1 Date (Optional Field)

The date the assessment 1 functional assessment scores were determined (May be utilized when assessment is done between the entry assessment and the exit assessment).

FIELD: Assessment 1 Social Emotional Functional Score (Optional Field)

The functional level determined by the IEP team, at the time of assessment 1, based on the Early Childhood Centers 7-point scale. (May be utilized when assessment is done between the entry assessment and the exit assessment).

FIELD: Assessment 1 Social Emotional Functional Improvement (Optional Field)

Indicate if the child's functional level has improved from entry to assessment 1.

FIELD: Assessment 1 Knowledge/Skills Functional Score (Optional Field)

The functional level determined by the IEP team, at the time of assessment 1, based on the Early Childhood Outcome Centers 7-point scale (May be utilized when assessment is done between the entry assessment and the exit assessment).

- FIELD: Assessment 1 Knowledge/Skills Functional Improvement (Optional Field)**
Indicate if the child's functional level has improved from entry to assessment 1.
- FIELD: Assessment 1 Self Help Functional Score (Optional Field)**
The functional level determined by the IEP team, at the time of assessment 1, based on the Early Childhood Outcome Centers 7-point scale. (May be utilized when assessment is done between the entry assessment and the exit assessment).
- FIELD: Assessment 1 Self Help Functional Improvement (Optional Field)**
Indicate if the child's functional level has improved from entry to assessment 1.
- FIELD: Assessment 2 Date (Optional Field)**
The date the assessment 2 functional assessment scores were determined (May be utilized when assessment is done between the entry assessment and the exit assessment).
- FIELD: Assessment 2 Social Emotional Functional Score (Optional Field)**
The functional level determined by the IEP team, at the time of assessment 2, based on the Early Childhood Centers 7-point scale. (May be utilized when assessment is done between the entry assessment and the exit assessment).
- FIELD: Assessment 2 Social Emotional Functional Improvement (Optional Field)**
Indicate if the child's functional level has improved from entry to assessment 2.
- FIELD: Assessment 2 Knowledge/Skills Functional Score (Optional Field)**
The functional level determined by the IEP team, at the time of assessment 2, based on the Early Childhood Outcome Centers 7-point scale (May be utilized when assessment is done between the entry assessment and the exit assessment).
- FIELD: Assessment 2 Knowledge/Skills Functional Improvement (Optional Field)**
Indicate if the child's functional level has improved from entry to assessment 2.
- FIELD: Assessment 2 Self Help Functional Score (Optional Field)**
The functional level determined by the IEP team, at the time of assessment 2, based on the Early Childhood Outcome Centers 7-point scale. (May be utilized when assessment is done between the entry assessment and the exit assessment)
- FIELD: Assessment 2 Self Help Functional Improvement (Optional Field)**
Indicate if the child's functional level has improved from entry to assessment 2
- FIELD: Exit Assessment Date (Required Field when exiting program)**
The date which the exit functional assessment scores were determined
- FIELD: Exit Social Emotional Functional Score: (Required Field when exiting program)**
The functional level determined by the IEP team with in 30 days of entry based on the Early Childhood Outcome Centers 7-point scale.

FIELD: Exit Knowledge/Skills Functional Score (Required Field when exiting program)
The functional level determined by the IEP team within 30 days of entry based on the Early Childhood Outcome Centers 7-point scale.

FIELD: Exit Self Help Functional Score (Required Field when exiting program)
The functional level determined by the IEP team within 30 days of entry based on the Early Childhood Outcome Centers 7-point scale.

FIELD: Social Emotional Improvement (Required Field when exiting program)
Indicate if the child's functional level has improved from entry to exit.

FIELD: Knowledge/Skills Improvement (Required Field when exiting program)
Indicate if the child's functional level has improved from entry to exit.

FIELD: Self Help Improvement (Required Field when exiting program)
Indicate if the child's functional level has improved from entry to exit.

(OSEP Reporting Categories for Early Childhood Outcomes)

- A. Child did not improve functioning
- B. Child improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.
- C. Child improved functioning to a level nearer to same-aged peers
- D. Child improved functioning to reach a level comparable to same-aged peers
- E. Child maintained functioning at a level comparable to same-aged peers

General Information Page 3 (with Federal reporting cycles)**FIELD: Temporary Student (Cycle 4)**

Enter Y if student has a temporary IEP in order to receive services while going through the evaluation process.

FIELD: Program Type (Cycles 4, 7)

A ABC
E Early Start
H Head Start
HI HIPPY
P Licensed Preschool
DC Licensed Family Day Care Home
O Other (Itinerant/Home/Clinic)

FIELD: Transition Conference Date (Kindergarten) (Cycle 7)

Enter the date that the last transition to kindergarten conference was held

FIELD: Transition Code (Kindergarten) (Cycle 7)

Enter the Transition Code that describes the outcome of the transition conference

NS Transitioned with no services to Kindergarten
TK Transitioned to Kindergarten with Special Education re-evaluation required
KW Kindergarten Waiver

FIELD: Transition Conference LEA

Enter the LEA district number with whom (the particular school district) the early childhood program held the kindergarten conference.

Entry/Withdrawal Screen (with Federal reporting cycles)**FIELD: Entry Date (Cycles 4, 7)**

The date the student entered your program

FIELD: Exit Date (Cycle 7)

The date the student withdrew/exited your program

FIELD: Exit Status (Cycle 7)

Indicate why the student is no longer receiving special education early childhood services

KE Kindergarten Eligible
NS No Longer Requires Services
PR Parent Refused Services
MA Reached Maximum Age (6yrs)
NP Not Placed
US Unknown Status
DI Died
MK Moved known to be continuing with EC Special Ed Services