

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

APR Process

The process to develop Hawai'i's APR for FFY 2012 included:

1. The Hawai'i Department of Health (HDOH), Early Intervention Section (EIS) which is identified as the Part C Lead Agency (LA) worked with the Lead Agency Quality Assurance and Training (LAQuAT) Team to address specific indicators as identified in the approved State Performance Plan (SPP).
2. On-going meetings with the identified LAQuAT Team members were held to prepare them to facilitate workgroups at the statewide Annual Stakeholders' Meeting.
3. There was broad dissemination regarding the Stakeholders' Meeting to determine interest by agency, Hawai'i Early Intervention Coordinating Council (HEICC), and community members to ensure appropriate input into the review process.
4. Groups were separated based on the specific indicator. Each group was provided with copies of the Indicator targets, FFY 2011 APR data, draft FFY 2012 APR data, and other relevant data so the group could determine:
 - Whether the target was met.
 - The extent of progress/slippage for each indicator.
 - Possible reasons for progress or slippage.
 - Suggested improvement Activities focused on addressing root causes to support improved data.
5. Final recommendations by indicator were presented to all stakeholders.
6. Recommendations were reviewed by the identified members of the LAQuAT Team and the Part C LA.
7. The APR and SPP were drafted by members of the LAQuAT Team and the Part C LA.
8. The APR and SPP drafts were reviewed and revised, as necessary, by the Children with Special Health Needs Branch Chief since the Part C Coordinator position is vacant.
9. The APR was reviewed and approved by the HEICC. As authorized by the HEICC, the HEICC Chairperson reviewed and signed the APR certification form.
10. The APR and SPP were sent to the Director of Health to review, approve, and sign the cover letter to accompany the APR and SPP to the Office of Special Education Program (OSEP). While the report does not need to be signed by the Director of Health, it has been an on-going policy to have the Director review the report prior to submission to OSEP to ensure that she is knowledgeable of the status of the Part C program.
11. The APR and SPP were submitted to OSEP as required.
12. The APR and SPP were posted on the HDOH EIS website.

Broad Representation

A stakeholder group of approximately 60 individuals provided recommendations to the development of the APR and changes to the SPP. Because of Hawai'i's broad eligibility and geography, it was important that there was broad representation that included: Part C early intervention (EI) service providers and

family members from all islands, from urban and rural areas, as well as the different ethnic and cultural groups that represent Hawai'i's population. The following stakeholders from the islands of Oahu, Hawai'i, Maui, Kauai, and Molokai were invited:

- Members of the HEICC
- HDOH administrators, care coordinators (Hawai'i's terminology for service coordinators), direct service providers, quality assurance specialists, data staff, personnel training staff, and contracted providers from:
 - Family Health Services Division (FHSD)
 - Children with Special Health Care Needs Branch (CSHNB)
 - Public Health Nursing Branch (PHNB)
 - EIS
- Department of Human Services (DHS) administrators
- Department of Education (DOE) Section 619 District Coordinators
- Community Members, including representatives from:
 - Early Head Start/Head Start
 - Parent Training Institute (Learning Disability Association of Hawai'i)
- Parents

Reporting to the Public

The APR has been posted on the HDOH EIS website (<http://hawaii.gov/health/health/family-child-health/eis/index.html>). In addition, information about how to access the APR will be included in various newsletters that reach providers and families (e.g., Special Parent Information Network (SPIN) newsletter, and newsletters of Part C providers (e.g., Easter Seals Hawai'i, Imua Family Services).

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.</p> <p>Account for untimely receipt of services, including the reasons for delays.</p>
<p>Applied:</p> <p>143 infants and toddlers with IFSPs received the early intervention services on their IFSPs in a timely manner</p> <p>206 infants and toddlers with IFSPs</p> <p>Percent = 143/206 = 69%</p>

FFY	Measurable and Rigorous Target
FFY 2012	100%

Definition of Timely Services:

Hawaii’s definition of timely services is consistent with OSEP’s direction as included in the Frequently Asked Questions (FAQ) document of 10/13/06. Timely services are defined as: “within 30 days from when the parent provides consent for the IFSP service or as projected based on the date provided in the IFSP and identified by the IFSP team.”

Actual Target Data for FFY 2012:

Data for the percent of infants and toddlers with IFSPs who receive the EI services on their IFSPs in a timely manner was from on-site monitoring data (refer to the section below for a description of the “Monitoring Process”).

- 143 of 206 (69%) of infants and toddlers monitored received EI services on their IFSPs in a timely manner.
- Exceptional Family Circumstances. 40 of the 206 (19%) infants and toddlers monitored did not receive timely services due to exceptional family circumstances as defined by IDEA Part C. This number is included in both the above numerator and denominator. The following are the three predominate family circumstances that impacted the scheduling of timely services:

- No shows
 - Child/Family sick
 - Cancelled appointment
- Program Reasons. 63 of the 206 (31%) infants and toddlers monitored did not receive timely services, due to program reasons. The predominate program reason that impacted the scheduling of timely services is that there was no documentation of a reason why services were late.

The improvement activity regarding documentation will continue.

- Identifying Noncompliance. Of the 63 children where services were not initiated in a timely manner due to program reasons, 3 children left the program’s jurisdiction before the service was implemented; for 2 children the service was discontinued before it was initiated; and the remaining 60 children’s services on their IFSP were initiated, although late.

Range of Days to Initiate Services (For the 63 children not receiving services on their IFSP in a timely manner)		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	36	57.1%
31-60 days	8	12.7%
61-90 days	4	6.3%
> 90 days	10	15.9%
Service Discontinued	2	3.2%
Left Program’s Jurisdiction	3	4.8%

- The state accounted for all instances of noncompliance as identified through on-site monitoring (refer to the section below for a description of the “Monitoring Process”). There were 15 programs serving the 63 children who did not receive services in a timely manner.
 - 7 of the 15 programs were issued findings in FFY 2013, based on FFY 2012 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (i.e. date of written notification).
 - 3 of the 15 programs were not issued a finding due to on-going non-compliance (program did not demonstrate correction from the finding issued in FFY 2012, based on FFY 2011 data).
 - 5 of the 15 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to written issuance of findings (e.g., all individual child noncompliance was corrected although late and updated data was used to confirm that the program was correctly implementing the timely services requirement for all children (100%)).
 - The data demonstrates the programs provided the required service(s), although late, unless the child was not under the program’s jurisdiction. The programs are now correctly implementing the timely services requirement.

- Related Requirements

Refer to Indicator 9, Table 1b (Indicator 2b, 4e) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Monitoring Process:

A total of 309 records were selected for on-site monitoring within the time period 7/1/12- 6/30/13 across all 20 Part C programs. The EI Self Assessment Monitoring (SAM) Tool which was developed by Part C LA with feedback from EI providers was utilized to gather data.

For FFY 2012, the LAQuAT Team completed the SAM tool for each of the EIS programs.

Identification of Children. To ensure a random selection of children for review with the SAM Tool, the following criteria were followed:

- Names of all children with an Initial, Review or Annual IFSP between 7/1/12 – 3/31/13 were obtained by Part C LA from each program. The timeframe was chosen to ensure that there were 3 months to confirm that services were provided in a timely manner within FFY 2012.
- Part C LA identified 10% of children at each program/section based on the 12/1/12 child count, or a minimum of fifteen (15) children to be monitored, unless there were an insufficient number of children who met the above criteria. If there were an insufficient number of children, all were chosen to ensure as complete monitoring as possible. This resulted in a review of 309 charts.
- An Initial, Review, or Annual IFSP for each selected child was reviewed to determine if new services were timely. If the Review or Annual IFSP was the identified IFSP and there were no new services, N/A was noted for this indicator. Therefore, for this indicator the results were based on new and timely services for 206 children as 103 children had no new services identified on either their Review or Annual IFSP.

Determination of Timeliness: The SAM Tool was completed for each child selected using the specified IFSP (Initial, Review, Annual), following the guidelines developed by Part C LA to determine if services were timely, consistent with Hawaii's definition for timely services.

For each service, the following documentation was required to confirm the service was both provided and timely:

- If the service was provided by the program providing service coordination, documentation must be included in anecdotal notes in the official child's record.
- If the service was provided by a Part C program not providing service coordination, the provider must verbally inform the service coordinator of the date services were initiated or provide copy of written documentation.
- If the service was provided by a contracted fee-for-service provider, documentation must be via the required Service Log developed by Part C LA.
- If the service was not timely due to an "exceptional family reason," there must be confirmation of the family reason via an anecdotal note in the official child's record (e.g., child was sick; family on vacation).
- If the service was late, and there was no documentation of an exceptional family reason (only a date of when the service occurred), it was considered a program reason and therefore did not meet the definition of timely services.
- If there was no documentation that the service was provided, it was considered a program reason and therefore did not meet the definition of timely services.

Self-Assessment Results

- Raw data was gathered by Part C LA.
- Part C LA inputted the data into the SAM database, which was developed by Part C LA.
- Part C LA analyzed the data for noncompliance with Timely Services (see Table 1b in Indicator 9 for findings from last year's APR). The data was given to each program/section as part of the notification of FFY 2013 findings based on data from FFY 2012.

Verification of Data: The following activities occurred to verify the Self-Assessment results.

- The SAM results were reviewed to identify any possible inconsistencies.
- Program Managers/Supervisors were contacted, as necessary, for additional data to confirm results.
- The SAM results were revised, if necessary, based on additional data received.

Demonstrating Correction based on the 09-02 Memo, page 2

The state accounted for all instances of noncompliance through on-site monitoring (refer to preceding section on "Monitoring Process"). All Programs were notified in writing of any noncompliance. Programs are required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

Prong 1

For FFY 2007 through FFY 2012 the Part C LA verified that each of the EI Programs with findings of noncompliance for not initiating services in a timely manner, initiated all services, although late, unless the child was no longer within the jurisdiction of the EI Program. The status of child specific correction was included in previous APR's target data. It included the percentage of children who received all services listed on their IFSP, though late, unless the child was no longer within the jurisdiction of the EI Program. At the time of the on-site monitoring, "Worksheet A" from the SAM tool was completed by the monitors. The actual start date of each service was documented on Worksheet A and verified at the time of the on-site monitoring. If the service(s) did not occur prior to the monitoring date, the Program had to immediately correct by providing those services(s) on the IFSP, though late, and submit documentation to Part C LA that indicated when the service(s) was initiated.

Prong 2

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance was correctly implementing the requirements at 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(i). Programs with identified noncompliance were required to complete "Worksheet A" from the SAM tool for every child who had an Initial IFSP, 6-month Review, and Annual IFSP. The Programs were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

- 95% - 100%: 1 month of data that shows 100% with a minimum of 2 records total
- 90% - 94%: 1 month of data that shows 100% with a minimum of 4 records total
- 80% - 89%: 2 months of data that show 100% with a minimum of 6 records total
- 70% - 79%: 2 consecutive months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months of data that show 100% with a minimum of 10 records total

The Part C LA verified what the Programs submitted and ensured that the Program submitted required evidence of correction documentation based on the percentage of noncompliance.

Status of Correction

FFY 2011

- 6 programs were notified of findings for Timely Services in FFY 2011. These findings were based on FFY 2010 data that was used in the FFY 2010 Self-Assessment process. (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 6 findings were verified as corrected within one year of notification.

Root causes

- Insufficient Documentation

Part C LA implemented the following to address insufficient documentation:

- Documentation module was embedded in the Part C EI Orientation and the Annual EI refresher training.

The table below summarizes the correction of Noncompliance for Indicator 1.

Correction of Noncompliance for Indicator 1 – Timely Services						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	6	1	5	6	0
FFY 2006	FFY 2007	26	17	9	26	0
FFY 2007	FFY 2008	2	2	0	2	0
FFY 2008	FFY 2009	4	4	0	4	0
FFY 2009	FFY 2010	9	8	1	9	0
FFY 2010	FFY 2011	6	6	0	6	0
FFY 2011	FFY 2012	To be reported in the FFY 2013 APR to be submitted in 2015				

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Explanation of Slippage:

The current data on provision of Timely Services shows a 16% slippage from FFY 2011 to FFY 2012 from 85% to 69%.

	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Compliance	69%	71%	78%	84%	88%	86%	85%	69%

Slippage may be a result of the following:

- Staff vacancies
 - Improvement activities to collaborate with academic institutions and to explore factors that can improve staff retention will continue.
 - Improvement activity to participate in targeted technical assistance provided by the Early Childhood Personnel Center has been developed.
 - Improvement activity to utilize flip videos has been revised to include exploration of tele-health options.
 - Improvement activity regarding gap report will continue.
- Communication among staff regarding due dates – scheduling of appointments
 - Improvement activity to work with Programs that were below 80% or have on-going non-compliance to refine their scheduling procedures will continue.
- Documentation
 - Improvement activity to develop a mechanism to monitor the quality of documentation has been developed.

Completed Improvement Activities

Refer to Appendix A for improvement activities that are still in process.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100%.

Continuing and New Improvement Activities:

Refer to Appendix A for continuing, revised and new improvement activities that were developed to support compliance for Timely Services.

Resources:

There are no changes to resources.

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Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

(20 U.S.C. 1416(a)(3)(A) and 1442)

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.</p>
<p>Applied:</p> <p>1686 infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.</p> <p>1814 infants and toddlers with IFSPs</p> <p>Percent = 1686/1814 = 93%</p>

FFY	Measurable and Rigorous Target
2012	90%

Actual Target Data for FFY 2012:

- Based on Section 618 Child Count data of 12/1/12.
- The State target of 90% was surpassed by 3%.
- Programs that did not meet the target were not issued a finding since this is a performance indicator; however, they were required to develop strategies in their CAP to address this indicator.
- Related Requirements

Refer to Indicator 9, Table 1b (Indicator 2d) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Not applicable since the data demonstrates progress in this area and the target was surpassed.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2012.

Not applicable since the data demonstrates progress in this area and the target was surpassed.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Outcomes:

- A. Positive social-emotional skills (including social relationships)
- B. Acquisition and use of knowledge and skills(including early language/communication); and
- C. Use of appropriate behaviors to meet their needs

Progress categories for A, B, and C:

- a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

Summary Statements:

- 1. Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Percent=# of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and toddlers reported in progress

category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

2. The percent of infants and toddlers who were functioning within age expectation in each Outcome by the time they turned 3 years of age or exited the program.

Percent=# of infants and toddlers reported in progress category (d) plus # of infants and toddlers reported in progress category (e) divided by the [total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100.

Measurable and Rigorous Target for FFY 2012		
Summary Statement		Target
Outcome A: Positive social-emotional skills (including social relationships)		
1	Of those children who entered and exited the program below age expectations in Outcome A, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	58.5%
2	Percent of children who were functioning within age expectations in Outcome A, by the time they exited.	82.5%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1	Of those children who entered and exited the program below age expectations in Outcome B, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	70.5%
2	Percent of children who were functioning within age expectations in Outcome B, by the time they exited.	77.5%
Outcome C: Use of appropriate behaviors to meet their needs		
1	Of those children who entered and exited the program below age expectations in Outcome C, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	74.5%
2	Percent of children who were functioning within age expectations in Outcome C, by the time they exited.	74.5%

Actual Target Data for FFY 2012:

Actual Data for Part C Children Exiting in FFY 2012:

Summary Statement		FFY 2012
Outcome A: Positive social-emotional skills (including social relationships)		
1	Of those children who entered and exited the program below age expectations in Outcome A, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	56.3%
2	Percent of children who were functioning within age expectations in Outcome A, by the time they exited.	79.0%

Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1	Of those children who entered and exited the program below age expectations in Outcome B, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	70.6%
2	Percent of children who were functioning within age expectations in Outcome B, by the time they exited.	64.6%
Outcome C: Use of appropriate behaviors to meet their needs		
1	Of those children who entered and exited the program below age expectations in Outcome C, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	73.3%
2	Percent of children who were functioning within age expectations in Outcome C, by the time they exited.	81.2%

PROGRESS DATA FOR FFY 2012						
Measurement	A. Social Emotional Skills		B. Acquiring and Using Knowledge and Skills		C. Taking Appropriate Action to Meet Needs	
	#	%	#	%	#	%
a. Percent of infants and toddlers who did not improve functioning	3/1402	0.2%	5/1402	0.3%	4/1402	0.3%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	218/1402	15.5%	279/1402	19.9%	170/1402	12.1%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	74/1402	5.3%	212/1402	15.1%	89/1402	6.3%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	211/1402	15.0%	469/1402	33.5%	389/1402	27.7%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	896/1402	63.9%	437/1402	31.2%	750/1402	53.5%

- Programs that did not meet the target for each specific Child Goal were not issued a finding since this is a performance indicator; however, they were required to complete the Local Contributing Factor Tool and develop strategies in their CAP to address the specific Child Goal.
- Related Requirements
Refer to Indicator 9, Table 1b (Indicator 1a, 1b, 2a) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Description of Process

Tool:

The EI Goals Measurement tool is based on the Early Childhood Outcomes (ECO) Center's Child Outcomes Summary Form (COSF). The Design Team revised the COSF on the basis of parent and provider input.

Measurement:

- Initial Rating: The initial data on child status is recorded at the Initial IFSP meeting.
- Exit Rating: The exit data on child status is collected at the Exit IFSP or within three months preceding exit from the program.

On-Going Data collection:

For each of the three EI Goals, the IFSP team assigns an initial and exit rating to each child. A rating compares the child's status to typical development and progress is calculated by comparing entry and exit ratings.

The rating is based on a combination of the following sources:

1. the developmental evaluation or assessment(s);
2. professional opinion;
3. parent input; and
4. level of achievement of IFSP objectives relevant to the outcome

Reporting:

EI programs enter EI Goals ratings into their respective agency databases on a monthly basis. The agencies provide summarized data annually or as requested by the Part C LA. Data is then compiled by the Part C LA.

How data are analyzed:

The Part C LA uses the ratings for each goal area for each child who received services for at least six months to analyze the change in development from entry to exit. The calculator developed by ECO is used to determine each goal area:

1. If the "Yes/No" question (which asks whether the child's functioning improved at from the last rating occasion) on the COSF has never been answered as "Yes" at exit, then the child is counted in category (a).

2. If the “Yes/No” question (which asks whether the child’s functioning improved at all from the last rating occasion) on the COSF has been answered “Yes” at exit, but not enough to move the child’s functioning closer to typically developing peers, the child is counted in category (b).
3. If ratings of child functioning compared to typically developing same aged peers are higher at exit than ratings at entry (but not at age level expectations), then they will be counted in category (c).
4. If ratings of child functioning compared to typically developing same aged peers at entry are below age expectations, but at exit they are at age level expectations, then the children will be counted in category (d).
5. If ratings of child functioning compared to typically developing same aged peers at entry and exit are both at age level expectations, then children will be counted in category (e).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Explanation of Slippage

The current data on Child Outcomes shows slippage for Outcome A, Summary Statement 1, Outcome B, Summary Statement 2, and Outcome C, Summary Statement 1 from FFY 2011 to FFY 2012:

Summary Statement		FFY 2011	FFY 2012
Outcome A: Positive social-emotional skills (including social relationships)			
1	Of those children who entered the program below age expectations in Outcome A, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	59.5%	56.3%
2	Percent of children who were functioning within age expectations in Outcome A, by the time they exited.	77.6%	79.0%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
1	Of those children who entered the program below age expectations in Outcome B, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	67.8%	70.6%
2	Percent of children who were functioning within age expectations in Outcome B, by the time they exited.	69.0%	64.6%
Outcome C: Use of appropriate behaviors to meet their needs			
1	Of those children who entered the program below age expectations in Outcome C, the percent that substantially increased their rate of growth in [outcome] by the time they exited.	78.4%	73.3%
2	Percent of children who were functioning within age expectations in Outcome C, by the time they exited.	78.0%	81.2%

- Positive social emotional skills
 - a. Increased their rate of growth by exit decreased by 3.2% and the State target was not met.
 - b. Functioning within age expectation by exit increased by 1.3% but the State target was not met.

- Acquisition and use of knowledge and skills
 - a. Increased their rate of growth by exit increased by 2.7% and the State target was met.
 - b. Functioning within age expectation by exit decreased by 4.4% and the State target was not met.

- Use of appropriate behaviors to meet needs
 - a. Increased their rate of growth by exit decreased by 5.1% and the State target was not met.
 - b. Functioning within age expectations by exit increased by 3.2% and the actual data surpassed the State target.

Slippage may be a result of the following:

- Inconsistency in team rating due to who is participating in team ratings.
 - Improvement activity to conduct refresher training session for completing EI Goals in unison with the Battelle Developmental Inventory -2 (BDI-2) will continue.
 - Improvement activity to determine staff competency in completing the child outcomes summary process will continue.

Completed Improvement Activities

Refer to Appendix A for improvement activities that are still in process

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013.

Proposed Targets

The proposed targets indicated in the SPP for FFY 2013 will remain the same.

Continuing and New Improvement Activities:

Refer to Appendix A for continuing improvement activities that were developed to support compliance for EI Child Goals.

Resources:

There are no changes to resources.

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Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

<p>Measurement:</p> <ul style="list-style-type: none"> A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100. B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100. C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.
<p>Applied:</p> <ul style="list-style-type: none"> A. 514 families participating in Part C reported that early intervention services have helped the family know their rights. 598 families responded to the question regarding knowing their rights Percent = 514/598 = 86% B. 509 families participating in Part C reported that early intervention services have helped the family effectively communicate their children's needs. 598 families responded to the question regarding communicating their child's needs Percent = 509/598 = 85% C. 495 families participating in Part C reported that early intervention services have helped the family help their child develop and learn. 598 families responded to the question regarding helping their child develop and learn. Percent = 495/598 = 83%

FFY	Measurable and Rigorous Target		
2012	A. 92%	B. 94%	C. 94%

Actual Target Data for FFY 2012

- Family Survey Results

Statewide Family Survey Results July 2012 – June 2013		
Family Goal	# *	%
A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights.	514/598	86%
B. Percent of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs.	509/598	85%
C. Percent of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn.	495/598	83%

* Each of the three outcome areas are derived from Section B of the new ECO Family Outcomes Survey: "Helpfulness of Early Intervention. Each section is made up of multiple questions which are added together to come up with a mean score. For a family's response to be considered in agreement with the outcome, the mean score must be 4 or above. "Knowing Your Rights" is made up of five questions, and "Communicating Your Child's Needs," and "Helping Your Child Develop and Learn" are each made up of six questions. If a family did not answer a minimum of four questions regarding "Knowing Your Rights," and five questions for "Communicating Your Child's Needs," and "Helping Your Child Develop and Learn", their response was not part of the overall score.

- Of the 1426 surveys that were distributed, 598 surveys were completed and returned for a 42% statewide return rate.
- Programs that did not meet the target for each specific Family Goal were not issued a finding since this is a performance indicator; however, they were required to complete the Local Contributing Factor Tool and develop strategies in their CAP to address the specific Family Goal.
- Additional Data – Length of Time in Early Intervention

When comparing the survey results by the length of time the child was enrolled in early intervention services, the data suggests that families' perceptions improved based on the amount of time their child was in early intervention.

Length of Time in Service	#	Family Goal		
		Know Their Rights	Effectively Communicate their children’s Needs	Help Their Children Develop and Learn
<i>Time not Specified</i>	5	80%	80%	80%
0-6 months	187	89%	85%	83%
6 months-1 year	235	83%	86%	82%
1 -2 years	135	84%	82%	84%
2 -3 years	36	94%	94%	94%
Total	406	85%	86%	84%

This year’s data showed that as a family’s time in Early Intervention increased, the scores for all three indicators also increased. This would support the theory that the longer a family receives services and is familiar with Early Intervention, they have a better understanding of what their rights are, how best to advocate for their child as well as what they need to do to help their child develop and learn.

- Related Requirements

Refer to Indicator 9, Table 1b (Indicators 4a, 4b, and 4c) for findings made and timely correction under the Hawai’i Monitoring Priorities related to this Indicator.

Representative of the State’s Population

Three factors were considered when determining whether the returned surveys were representative of the early intervention population:

- Ethnicity
- County of residence
- Age of the child

Comparison by Ethnicity:

When analyzing data for representativeness by ethnicity, we followed the same strategy as last year and compared the two largest ethnic groups, which was Asian and Two or More Ethnicities, with child count data. Comparing responses in these categories and subtracting out those surveys that did not report an ethnicity resulted in the following observations:

- Percentage of mixed race families that completed the family surveys was equal to the percentage reported in Child Count.
- A slightly smaller percentage of Asian families completed their surveys in comparison to Child Count.

Ethnicity	FFY 2012		
	Family Survey	Child Count	Difference
Two or More	37%	37%	0%
Asian	25%	27%	-2%
African American	2%	1%	0%
American Indian	.2%	0%	.2%
Caucasian	16%	15%	1%
Hispanic/Latino	14%	9%	6%
Native Hawaiian	5%	11%	-6%

When looking at the data responses by ethnicity, we again followed what we did with representativeness, and focused on our two largest groups—Two or more Ethnicities and Asians since this made up over 60% of responses.

- Both ethnic groups had similar perceptions for each survey question. The difference by question never exceeded 5%.
- Both ethnic groups had similar results when compared with the statewide total with the difference never exceeding 3%.

Family Goal	Two or More (n=224)	Asian (n=148)	Statewide Total (n=598)
Know their rights	85%	89%	86%
Effectively communicate their children's needs	88%	83%	85%
Help their children develop and learn	84%	86%	83%

Comparison by County of Residence

When comparing the proportions of Family Survey return rates with the Child Count Data based on the County the child lives in, it appears that the proportion of surveys returned were spread among all islands in a generally consistent manner.

Based on the surveys returned:

- All three neighbor island counties (Hawai'i, Kauai, and Maui) were all underrepresented.
- The county of Hawai'i was the most under-represented, with only 5% of the surveys being returned, although they represent nearly 10% of the Child Count population.
- Kaua'i represented 3% of the surveys returned, while accounting for 5% of the Child Count numbers.
- 12% of children in Child Count are from Maui County, while only 8% of the Family Surveys returned were from Maui County families.
- Honolulu was overrepresented. The proportion of surveys returned was 84% while Honolulu made up 74% of the Child Count.

County	Family Survey		Child Count		Difference
	#	%	#	%	%
Hawai'i	30	5%	181	10%	-5%
Honolulu	503	84%	1357	74%	10%
Kauai	17	3%	89	5%	-2%
Maui	48	8%	219	12%	-4%
Statewide	598	100%	1846	100%	

When comparing the survey results by county of residence and by the statewide total, it is evident that there were some differences in perception based on the residence of the family:

- Maui County scored higher than all the other three counties all three outcome areas.
- Kauai County had the lowest results in all three outcome areas. This is in contrast to last year's data, in which Kauai County scored higher than the other three counties in two out of the three outcome areas. But it should also be noted that they had the lowest return rate, with only 17 surveys being returned as a result of program manager changes and one time issues related to data reporting. This can have a significant impact on results, as each survey is weighed much heavier.

Family Goal	Hawai'i	Honolulu	Kauai	Maui	Statewide
Know their rights	83%	86%	77%	92%	86%
Effectively communicate their children's needs	80%	85%	77%	94%	85%
Help their children develop and learn	83%	83%	82%	90%	83%

Comparison by Age

When comparing the proportions of Family Surveys returned with the Child Count Data based on the age of the child, the difference was minimal for all age ranges. Family Survey responses appear to be representative of the population served when looking at it by age of child at the time of survey. The biggest difference was in the 2-3 year age group, which could be due to a number of families going through transition. The families may not have had time to complete the survey or simply forgot in the process of transitioning their child out of Early Intervention.

Age	Family Survey		Child Count		Difference
	#	%	#	%	
Not Reported	5	1%	0	0%	1%
Birth-1	50	8%	142	8%	0%
1-2	199	33%	556	30%	3%
2-3	344	58%	1148	62%	-4%
Total	598	100%	1846	100%	

When comparing the survey responses by age at the time of survey completion, there were similar responses for all 3 age groups by question with very little variance:

Age	#	Know Their Rights	Effectively Communicate their children's Needs	Help Their Children Develop and Learn
Not Reported	5	60%	60%	60%
Birth-1	50	86%	86%	82%
1-2	199	87%	86%	84%
2-3	344	86%	85%	83%
Total	598	86%	85%	83%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2012:

Explanation of Slippage

The current data for Family Goals A, B, and C all showed slippage and the state targets were not met. Possible reasons for slippage:

- There have been a high number of staff vacancies across Early Intervention, especially in key supervisory positions. Because of this, staff often covered several positions, often over multiple islands, including managerial and direct service positions. This can have a direct impact on a family's perception of how much Early Intervention is able to help their family help their child.
- The surveys for one program had to be removed from the sample due to possible compromised data. The Program Manager was informed and has since gone over the correct procedure with her staff for survey distribution and completion.
- For the past several years, Honolulu County survey results reported satisfaction a little lower than statewide percentages. This has not been problematic in the past since the proportion of family survey returned for Honolulu County was slightly lower when compared to Child Count. However, for 2013, Honolulu's Child Count was reported at a little over 10% lower than the return percentage of surveys. Therefore, with the increase in Family Surveys from Honolulu County, and with results once again lower than statewide averages, this could contribute to the slippage.

Family Goal	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights.	78%	91%	89%	90%	92%	94%	87%	86%
B. Percent of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs.	74%	93%	91%	92%	92%	94%	88%	85%

APR Template – Part C (4)

Family Goal	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
C. Percent of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn.	89%	93%	93%	92%	92%	94%	86%	83%

NOTE: The survey tool was changed in FFY 2011.

Completed Improvement Activities

Refer to Appendix A for improvement activities that are still in process.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines / Resources for FFY 2013.

Proposed Targets

The proposed targets indicated in the SPP for FFY 2013 will remain the same.

Improvement Activities:

Refer to Appendix A for continuing improvement activities that support meeting EI Family Goals.

Resources:

There are no changes to resources.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

<p>Measurement: Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.</p>
<p>Applied: 142 of infants and toddlers birth to 1 with IFSPs 18,106 population of infants and toddlers birth to 1 Percent = 142/18,106 = 0.78%</p>

FFY	Measurable and Rigorous Target
2012	1.03%

Actual Target Data for FFY 2012:

- The actual data of 142 infants and toddlers birth to 1 with IFSPs is consistent with 618 data submitted.
- Compared to National Data (based on OSEP 2012 data tables):
 - The national average for all states including Washington D.C. is 1.06%. Hawai'i was below the national average for infants and toddlers birth to 1 with IFSPs by 0.28%.
 - Hawai'i was ranked 37th, as it served 0.78% (142/18,106) of infants and toddlers birth to 1 with IFSPs.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Explanation of Slippage

The current data on percent of infants and toddlers birth to 1 with IFSPs compared to the national data shows slippage of 0.28% from FFY 2011 to FFY 2012, from 0.94% to 0.78%.

Listed below is the data for children with a developmental delay or biological risk:

	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Data	2.41%	1.97%	1.26%	1.26%	1.27%	0.96%	0.94%	0.78%

The slippage (decrease by 0.28%) may be due to the following:

- Some populations (i.e., homeless, immigrants) may not be aware of early intervention if they are not connected with social services.
 - The improvement activity to extend the breadth of public awareness by connecting with additional agencies and programs will continue.
- Mechanisms of public awareness have not been expanded to utilize technology; therefore may not be accessible to young parents or those contemplating parenthood.
 - The improvement activity to utilize social media (e.g., Facebook, Twitter) for public awareness will continue.
- Public Awareness position has been vacant for over a year.
 - A Public Awareness Coordinator was hired in November 2013, after the position had been vacant for over a year.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Review Hawai'i's Part C eligibility criteria for continued appropriateness.	<ol style="list-style-type: none"> 1. Hawai'i Part C eligibility was changed, effective May 15, 2009 to remove the environmentally at-risk category, as a result of the public hearing process. The revised eligibility was submitted with the grant application to OSEP on May 15, 2009. 2. Public hearings were held January 11-14 and March 3, 2010 to revise eligibility for infants and toddlers with developmental delays from any level of delay to: 33% in chronological/adjusted age or 2 Standard Deviations below the norm in one area; or 25% in chronological/adjusted age or 1.5 Standard Deviations below the norm in two or more areas; or informed clinical opinion by a multi-disciplinary team. As a result of the public hearings it was recommended that eligibility be revised to: 33% delay in age in one area; 25% delay in age in 2 areas; 1.5 Standard Deviations below the norm in any one area; or Informed clinical opinion by a Part C multi-disciplinary team. The change to 1.5 S.D. in any one area makes Part C eligibility consistent with Part B. 3. It was determined that Administrative Rules must be completed and approved and additional public hearing be held on the changes. The Administrative Rules have been finalized and awaiting signature from the Governor.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
	4. Public hearings held for Administrative Rules. 5. Administrative Rules approved and implemented on October 21, 2013, including changes in eligibility.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2013:

Proposed Targets

The proposed target indicated in the SPP for FFY 2013 will remain the same.

Continuing and New Improvement Activities:

Refer to Appendix A for continuing improvement activities to support Child Find.

Revised Resources:

There are no changes to resources.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

<p>Measurement: Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.</p>
<p>Applied: 1,846 of infants and toddlers birth to 3 with IFSPs. 54,033 population of infants and toddlers birth to 3 Percent = 1,846/54,033=3.42%</p>

FFY	Measurable and Rigorous Target
2012	2.82%

Actual Target Data for FFY 2012:

- The actual data of 1,846 infants and toddlers birth to 3 with IFSPs is consistent with 618 data submitted.
- Compared to National Data (based on OSEP 2012 data tables)

The following compares Hawai'i's percentage served with national data:

- The national average for all states including Washington D.C. is 2.77%. Hawai'i surpassed the national average for infants and toddlers birth to 3 by 0.7%.
 - Hawai'i was ranked 15th as it served 3.42% (1,846/54,033) of infants and toddlers birth to 3 with IFSPs.
- The State target of 2.82% was surpassed by 0.6%.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Not applicable since the state target was surpassed.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2013:

Not applicable since the state target was surpassed.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed for whom an initial IFSP was required to be conducted)] times 100.</p> <p>Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.</p>
<p>Applied:</p> <p>1,861 infants and toddlers received an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline.</p> <p>1,981 infants and toddlers with IFSPs</p> <p>Percent = 1,861/1,981=94%</p>

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

Statewide data for eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline was collected from Agency data systems for the period 7/1/12 – 6/30/13. The timelines were from the date of referral to the initial IFSP meeting and were based on actual, not an average, number of days.

- 1,861 of 1,981 (94%) of infants and toddlers received an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline.
- Exceptional Family Circumstances: 444 of the 1,981 (22%) infants and toddlers did not have an initial evaluation, initial assessment and initial IFSP meeting within Part C’s 45-day timeline due to exceptional family circumstances as defined by IDEA Part C. This number is included in both the numerator and denominator. The following are the two predominate exceptional family circumstances:
 - Family cancelled appointment
 - Family request

- Program Reasons. 120 of the 1,981 (6%) infants and toddlers did not have an initial evaluation, initial assessment and initial IFSP meeting within Part C’s 45-day timeline due to program reasons. The following are the two predominate program reasons:
 - Late MDEs
 - Program schedule full
- Identifying Noncompliance. Of the 120 infants and toddlers who did not receive an initial evaluation and initial assessment and an initial IFSP meeting within Part C’s 45-day timeline, 120 (100%) infants and toddlers received an initial evaluation and initial assessment and had an initial IFSP meeting, although untimely.

Range of Days Beyond the 45-day timeline to Receive an Initial Evaluation and Initial Assessment and Initial IFSP (For the 120 late IFSPs)		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	66	55%
31-60 days	31	26%
61-90 days	16	13%
> 90 days	7	0.1%

- The state accounted for all instances of noncompliance identified via the EI Agency Database. There were 12 programs serving the 120 children who did not receive an initial evaluation and initial assessment and an initial IFSP meeting within Part C’s 45-day timeline.
 - 7 of the 12 programs were issued findings in FFY 2013, based on FFY 2012 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (e.g. date of written notification).
 - 5 of the 12 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to the written issuance of findings. The data demonstrates that all infants and toddlers had received initial IFSPs, although late, unless the child was not under the program’s jurisdiction. The programs are correctly implementing the Timely Evaluation and Assessments and initial IFSPs requirement for all children (100%).
- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicators 2a, 2b, 2c, 2d, 4d, and 4e) for findings made and timely correction under the Hawai’i Monitoring Priorities related to this Indicator.

Demonstrating Correction based on the 09-02 Memo, page 2

The state accounted for all instances of noncompliance through on-site monitoring (refer to preceding section on “Monitoring Process”). All Programs were notified in writing of any noncompliance. Programs are required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

Prong 1

For FFY 2008 through FFY 2012, the Part C LA verified that each of the EI Programs with findings of noncompliance for not conducting an initial evaluation, initial assessment and initial IFSP within Part C's 45-day timeline, completed all evaluations, assessments and initial IFSPs, although late. The status of child specific correction was included in previous APRs target data. It included the percentage of children that received an initial evaluation, initial assessment and initial IFSP, though late, unless the child was no longer within the jurisdiction of the EI Program. The report from the database includes the actual date of the Initial IFSP and calculates how many days late it was from the 45 day timeline. If the Initial IFSP did not occur prior to the date the data was pulled and the child is still enrolled in Part C, the Program/Section must immediately correct by completing the initial IFSP, though late and submit a copy of the signature page of the IFSP.

Prong 2

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance is correctly implementing the requirements at 34 §§ CFR 303.321(e), 303.322(e)(1), and 303.342(a). Programs/Sections with identified noncompliance were required to submit a copy of the signature page of all the Initial IFSPs completed along with the list from the database the includes the 45-day timeline. The Programs/Sections were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

- 95% - 100%: 1 month of data that shows 100% with a minimum of 2 records total
- 90% - 94%: 1 month of data that shows 100% with a minimum of 4 records total
- 80% - 89%: 2 months of data that show 100% with a minimum of 6 records total
- 70% - 79%: 2 consecutive months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months of data that show 100% with a minimum of 10 records total

The Part C LA verified what the Programs submitted and ensured that the Program submitted required evidence of correction documentation based on the percentage of noncompliance.

Status of Correction

FFY 2011

- 9 programs were notified of findings for Timely Initial Evaluation and Initial Assessment and Initial IFSPs in FFY 2011 based on FFY 2010 data (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicators and Hawaii'i Monitoring Priorities in Indicator 9).
 - 9 findings were verified as corrected within one year of notification.

Root Causes

- Staff Vacancies

Part C LA and/or Agency implemented the following to address staff vacancies:

- Developed a mechanism for Programs to utilize staff as Primary Providers in the Transdisciplinary approach to service delivery.
- Staff at EIS deployed to EI Programs to provide direct services and participate as an evaluator.

The table below summarizes the Correction of Noncompliance for Indicator 7.

Correction of Noncompliance for Indicator 7 – Initial Evaluation and Initial Assessment and Initial IFSP within 45-days						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	8	8	0	8	0
FFY 2006	FFY 2007	16	16	0	16	0
FFY 2007	FFY 2008	7	7	0	7	0
FFY 2008	FFY 2009	9	9	0	9	0
FFY 2009	FFY 2010	8	7	1	0	0
FFY 2010	FFY 2011	9	9	0	9	0
FFY 2011	FFY 2012	To be reported in the FFY 2013 APR to be submitted in 2015				

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Explanation of Slippage:

The current data on timely initial evaluations and initial assessment and initial IFSP meetings decreased by 3% from FFY 2011 to FFY 2012.

	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Compliance	98%	98%	97%	97%	98%	98%	97%	94%

Slippage may be a result of the following:

- State budget cuts, furloughs, and Reduction in Force (RIF) have placed an additional strain on Programs, which impacted direct service hours. Furthermore, when a position becomes vacant, the State hiring process may take months to fill a position, which is also a result of the State budget cuts and RIF.
 - Improvement activity to use flip videos has been revised to explore tele-health options.
 - Improvement activity to explore options to have centralized database accessible to all staff through available technology (i.e., icloud) will continue.
 - Improvement activity to implement a revised Gap Report will continue.
- Staff vacancies
 - Improvement activities to collaborate with academic institutions and to explore factors that can improve staff retention will continue.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Develop a Family Assessment Workgroup to explore possible Family Assessment Tools.	<ol style="list-style-type: none"> 1. Part C providers have been informed of the new regulations. 2. Providers were invited to participate in the Family Assessment (FA) Workgroup. 3. Part C LA met with the FA Workgroup to outline tasks. 4. The FA developed and presented a final draft of the Family Assessment tool at the EIS Program Manager Meeting in December of 2012. 5. Part C LA developed a Family Assessment section to the EI Procedural Guidelines.

Refer to Appendix A for improvement activities that are still in process.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2012.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100%.

Continuing and New Improvement Activities:

Refer to Appendix A for continuing and revised improvement activities to support Timely Initial Evaluations, Initial Assessment and Initial IFSPs.

Revised Resources:

There are no changes to resources.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services.

(20 U.S.C. 1416(a)(3)(B) and 1442)

<p>Measurement:</p> <ul style="list-style-type: none"> A. Percent = [(# of toddlers with disabilities exiting Part C who have an IFSP with transition steps and services at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100. B. Percent = [(# of toddlers with disabilities exiting Part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and LEA occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100. C. Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties not more than nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100. <p>Account for untimely transition planning under 8A, 8B, and 8C, including reasons for delays.</p>
<p>Applied:</p> <ul style="list-style-type: none"> A. 1,068 children exiting Part C who have an IFSP with transition steps and services that were developed at least 90 days and at the discretion of all parties, not more than nine months, prior to the toddler’s third birthday. <p style="margin-left: 40px;">1,083 children who exited Part C</p> <p style="margin-left: 40px;">Percent 1,068 /1,083 = 99%</p>

<p>B. 726 children exiting Part C and potentially eligible for Part B where timely notification to the LEA occurred</p> <p>809 children exiting Part C who were potentially eligible for Part B</p> <p>Percent = $726/809 = 90\%$</p> <p>C. 427 children exiting Part C where the <u>timely</u> transition conference occurred</p> <p>484 children exiting Part C where the transition conference occurred</p> <p>Percent = $427/484 = 88\%$</p>
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FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

Statewide data for the timely Transition Plan, Transition Notice and the Transition Conference for all children who exited Part C in FFY 2012 was collected from the EI Database for the period 7/1/12-6/30/13.

- Transition Plan
 - 1,068 of 1,083 (99%) children exiting Part C had a timely and complete Transition Plan in their IFSP that was completed at least 90 days prior to the child’s third birthday. Children referred fewer than 45 days from their 3rd birthday were not included in the calculation.
 - 15 of the 1,083 (1%) children exiting Part C did not have a timely and complete Transition Plan in their IFSP, based on Hawai’i’s requirements for a complete Transition Plan. To be considered “complete,” Hawai’i requires the Transition Plan to include all the steps and services listed in the IDEA, Part C regulations. Hawai’i requires the Transition Plan to be updated at each IFSP meeting.
 - There were 6 programs serving the 15 children who did not have a timely and complete Transition Plan in their IFSP with steps and services.
 - 1 of the 6 programs was issued a finding in FFY 2013, based on FFY 2012 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (e.g. date of written notification).
 - 2 of the 6 programs were not issued a finding due to on-going non-compliance (one program did not demonstrate correction from the finding issued in FFY 2012, based on FFY 2011 data and one program did not demonstrate correction from the finding issued in FFY 2010, based on FFY 2009 data).
 - 3 of the 6 programs were not issued a finding because the program submitted required data that was verified by Part C LA to demonstrate correction prior to written issuance of findings. The data demonstrated that all infants and toddlers had a complete transition plan, although late unless the child was no longer under the program’s jurisdiction. Up-dated data was used to verify that the Program is now correctly implementing the timely and complete transition plan requirement for all children (100%).

- Transition Notice
 - 726 of 809 (90%) children exiting Part C and potentially eligible for Part B services exited with timely notification to the LEA. The Part B and C programs mutually decided that any child served by Part C with a developmental delay was “potentially eligible for Part B services.” Therefore it is a requirement that, at a minimum, directory information on all children exiting Part C with a developmental delay be forwarded to Part B unless the family opts out of this requirement. Children referred fewer than 45 days from their 3rd birthday were not included in the calculation.
 - Opt Out Option: 378 children exiting Part C and potentially eligible for Part B services exited without providing notification to the LEA due to the family exercising the “opt out” policy. The “opt out” policy was presented to the community at a public hearing held May 4, 2009. The policy was officially forwarded to OSEP as part of the Part C Grant Application mailed to OSEP on May 14, 2009 and is officially on file. These children are not included in either the above numerator or denominator. Due to the high number of “opt outs” for the Transition Notice, the database was revised to track reasons why families were “opting out” of the Transition Notice. The predominate reason why families “opted out” of the Transition Notice was that they were not interested in having their child referred to DOE.

The improvement activity to explore how to address the high rate of Transition Notice “opt outs” will continue.

- Program Reasons: 83 of 809 (10%) children exiting Part C and potentially eligible for Part B exited without timely notification to the LEA due to program reasons. It is Hawaii’s policy that the transition notice must be sent to the LEA at least 90 days prior to the child’s 3rd birthday. The timeline is in place to support DOE’s Child Find efforts to ensure that all children who are potentially eligible for DOE can receive a timely evaluation and start the Part B program by their 3rd birthday.
- Of the 83 children exiting without timely notification to the LEA, notification was provided to the LEA for 43 of these children, although untimely; 40 children left the jurisdiction of Part C prior to issuing the notification to the LEA.

Range of Days for Notification to LEA (For the 83 children that exited without a timely notification to LEA)		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	34	41.0%
31-60 days	7	8.4%
61-90 days	2	2.4%
>90 days	0	0%
No notice to LEA prior to leaving the jurisdiction of Part C	40	48.2%

- There were 18 programs serving the 83 children who exited Part C with either untimely notification to the LEA or insufficient documentation that notification to the LEA was provided:

- 12 of the 18 programs were issued findings in FFY 2013, based on FFY 2012 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (e.g. date of written notification).
- 2 of the 18 programs were not issued a finding due to on-going non-compliance (programs did not demonstrate correction from the finding issued in FFY 2012, based on FFY 2011 data).
- 4 of the 18 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to the written issuance of findings. The data demonstrated that transition notices for all infants and toddlers were provided to the LEA unless the family “opted out” or child was not under the program’s jurisdiction. Updated data was used to verify that the Programs are now correctly implementing the requirement of notifying the LEA of all children who are potentially eligible for DOE (100%).

- Transition Conference

Hawaii’s policy is to offer a Transition Conference for all children exiting from Hawaii’s Part C program, as they are all potentially eligible for Part B services.

- 427 of 484 (88%) children exiting Part C where the timely transition conference occurred. Children referred fewer than 90 days from their 3rd birthday were not included in the calculation.
- 682 families declined a Transition Conference and are not included in either the above numerator or denominator. Due to the high number of declines for a Transition Conference, the database was revised to track reasons why families were declining Transition Conferences. The two predominate reasons why families declined the Transition Conference were:
 - Families are familiar with the options
 - Families already decided on a setting/placement

Improvement activities to explore how to address the high rate of Transition Conference declines will continue.

- Exceptional Family Circumstances: 47 of 484 (10%) children exiting Part C did not have a timely Transition Conference due to exceptional family circumstances. They are included in both the above numerator and denominator. The two predominate exceptional family circumstances were:
 - Family requested a date beyond the due date
 - Family missed appointment.
- Program Reasons: 57 of 484 (12%) children exiting Part C did not have a timely Transition Conference due to program reasons. The predominate program reasons were:
 - Staff vacancies
 - Staff forgot to schedule within the required timeline.

- Of the 57 families that did not receive a timely Transition Conference, 13 received a Transition Conference, although untimely and 44 children left the jurisdiction of Part C prior to having a Transition Conference.

Range of Days for the Transition Conference (For the 57 children that exited without a timely Transition Conference)		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	10	18%
31-60 days	3	5%
61-90 days	0	0%
No Transition Conference prior to leaving the jurisdiction of Part C	44	77%

- There were 13 programs serving the 57 children who exited Part C with an untimely Transition Conference or having no Transition Conference prior to exiting Part C.
 - 9 of the 13 programs were issued findings in FFY 2013, based on FFY 2012 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (e.g. date of written notification).
 - 2 of the 13 programs were not issued a finding due to on-going non-compliance (one program did not demonstrate correction from the finding issued in FFY 2012, based on FFY 2011 data and one program did not demonstrate correction from the finding issued in FFY 2011, based on FFY 2010 data).
 - 2 of the 13 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to the written issuance of findings. The data demonstrates that all children received a transition conference, although late, unless the family declined a transition conference or the child was no longer under the program’s jurisdiction. Up-dated data was used to verify that the Programs are now correctly implementing the transition conference requirements for all infants and toddlers (100%).
- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicator 3a) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Demonstrating Correction based on the 09-02 Memo, page 2

The state accounted for all instances of noncompliance through on-site monitoring (refer to preceding section on “Monitoring Process”). All Programs were notified in writing of any noncompliance. Programs are required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

Prong 1

For FFY 2008 through FFY 2012, the Part C LA verified that each of the EI Programs with findings of noncompliance for not including a transition plan in the IFSP, providing timely notification to the LEA of

potentially eligible children for Part B services, and conducting timely transition conferences, all children had a complete transition plan, notification to the LEA, and had a transition conference, although late, unless the child was no longer within the jurisdiction of the EI Program. The status of child specific correction was included in previous APRs target data. It included the percentage of children that had a complete transition plan included in their IFSP prior to exit, notification to the LEA, and/or a transition conference, though late, unless the child was no longer within the jurisdiction of the EI Program. The report from the database includes the transition due date (at least 90 days prior the child exiting Part C), if a complete transition plan was included in the IFSP prior to exit, actual date the notification to the LEA was sent, and the actual date of the transition conference. It also includes if it was late, how many days late it occurred.

Prong 2

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance is correctly implementing the requirements at 34 CFR §§ 303.148(b)(4) (for 8A); 34 CFR § 303.344(h) for 8B); and 34 CFR § 303.148(b)(2)(i) (as modified by IDEA sections 637(a)(9)(A)(ii)(II)) (for 8C). Programs/Sections with identified noncompliance were required to submit a copy of the transition plan, documentation of when the transition notice was sent to the LEA, and documentation of the transition conference along with a list from the database of children that exited Part C that included the child's name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). The Programs/Sections were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

- 95% - 100%: 1 month of data that shows 100% with a minimum of 2 records total
- 90% - 94%: 1 month of data that shows 100% with a minimum of 4 records total
- 80% - 89%: 2 months of data that show 100% with a minimum of 6 records total
- 70% - 79%: 2 consecutive months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months of data that show 100% with a minimum of 10 records total

The Part C LA verified the data submitted by the Program and ensured that the Program submitted required evidence of correction documentation based on the percentage of noncompliance.

Status of Correction

Transition Plan

FFY 2011

- 1 program was notified of findings for the Transition Plan in FFY 2011 (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 1 finding was verified as corrected within one year of notification.

FFY 2010

- 7 programs were notified of findings for the Transition Plan in FFY 2010 (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 6 findings were verified as corrected within one year of notification
 - 1 finding remaining

The table below summarizes the Correction of Noncompliance for Indicator 8A.

Correction of Noncompliance for Indicator 8A: Transition Plan with Steps and Services						
Year Findings of Noncompliance Issued	Monitoring Data Year	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2006	FFY 2005	3	3	0	3	0
FFY 2007	FFY 2006	8	8	0	8	0
FFY 2008	FFY 2007	8	8	0	8	0
FFY 2009	FFY 2008	1	1	0	1	0
FFY 2010	FFY 2009	7	6	0	1	1
FFY 2011	FFY 2010	1	1	0	1	1
FFY 2012	FFY 2011	To be reported in FFY 2013 APR to be submitted in 2015				

Transition Notice

FFY 2011

- 10 programs were notified of findings for the Transition Notice in FFY 2011 (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 10 findings were verified as corrected within one year of notification.

FFY 2010

- 10 programs were notified of findings for the Transition Notice in FFY 2010 (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 8 findings were verified as corrected within one year of notification.
 - 2 findings subsequently verified as corrected after one year of notification.

The table below summarizes the Correction of Noncompliance for Indicator 8B.

Correction of Noncompliance for Indicator 8B: Transition Notice						
Year Findings of Noncompliance Issued	Monitoring Data Year	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2006	FFY 2005	0	0	0	0	0
FFY 2007	FFY 2006	8	7	1	8	0

FFY 2008	FFY 2007	2	2	0	2	0
FFY 2009	FFY 2008	11	11	0	11	0
FFY 2010	FFY 2009	10	8	2	10	0
FFY 2011	FFY 2010	10	10	0	10	0
FFY 2012	FFY 2011	To be reported in FFY 2013 APR to be submitted in 2015				

Transition Conference

FFY 2011

- 11 programs were notified of findings for the Transition Notice in FFY 2011 (See Table 1b, Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 10 finding were verified as corrected within one year of notification
 - 1finding remaining

The table below summarizes the Correction of Noncompliance for Indicator 8C.

Correction of Noncompliance for Indicator 8C: Transition Conference						
Year Findings of Noncompliance Issued	Monitoring Data Year	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2006	FFY 2005	0	0	0	0	0
FFY 2007	FFY 2006	14	14	0	14	0
FFY 2008	FFY 2007	4	4	0	4	0
FFY 2009	FFY 2008	8	8	0	8	0
FFY 2010	FFY 2009	8	8	0	0	0
FFY 2011	FFY 2010	11	10	0	10	1
FFY 2012	FFY 2011	To be reported in FFY 2013 APR to be submitted in 2015				

It is one agency (overseeing two programs) that has the on-going non-compliance regarding timely transition planning: transition plan, transition notice, and transition conference.

The following actions have been taken with the Program regarding on-going non-compliance:

1. Conference call with the Program Manager, Data Clerk, Agency Director and Lead Agency staff.
2. Program is required to submit CAP reports and required evidence to demonstrate correction on a daily basis.
3. The Agency Director is cc'd on all e-mails between the Lead Agency and the Program Manager.
4. Step by step walk through of the process and how to utilize the data base was provided to the Program Manager, Data Clerk, and Agency Director.

- 5. Technical assistance was provided for the new Program Manager hired by the Agency on November 18, 2013.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Transition Compliance	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Plan	99%	99%	97%	99%	98%	99.7%	98%	99%
Notice	100%	100%	99%	91%	96%	91%	92%	90%
Conference	94%	96%	97%	94%	93%	93%	89%	88%

Explanation of Slippage:

Transition Notice

- The current data on Timely Transition Notices shows a decrease of 2% from FFY 2011 to FFY 2012, from 92% to 90%.

Slippage may be a result of staff shortages and Care Coordinators having high caseloads.

- The improvement activities to explore factors to improve staff retention and explore use of technology to support staff in meeting timelines will continue.

Transition Conference

- The current data on Timely Transition Conferences shows a decrease of 1% from FFY 2011 to FFY 2012, from 89% to 88%.

Slippage may be a result of staff shortages and Care Coordinators having high caseloads. Staff and families may also not fully understand the purpose of the Transition Conference.

- The improvement activities to explore factors to improve staff retention and explore use of technology to support staff in meeting timelines will continue.
- The improvement activity to develop a handout that explains the purpose of the transition conference and updates to technical assistance documents will continue.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Revise transition module to strengthen section on developing a complete transition plan.	Training Coordinator revised Transition module.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2013.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100%.

Continuing and New Improvement Activities:

Refer to Appendix A for continuing improvement activities to support Timely Transition Planning.

Resources:

There are no changes to resources.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

<p>Measurement:</p> <p>Percent of noncompliance corrected within one year of identification:</p> <p style="margin-left: 20px;">a. # of findings of noncompliance.</p> <p style="margin-left: 20px;">b. # of corrections completed as soon as possible but in no case later than one year from identification.</p> <p>Percent = [(b) divided by (a)] times 100.</p> <p>States are required to use the “Indicator 9 Worksheet” to report data for this indicator.</p>
<p>Applied:</p> <p>190 findings of noncompliance</p> <p>179 corrections completed as soon as possible but in no case later than one year from identification</p> <p>Percent = 179/190 = 94%</p>

FFY	Measurable and Rigorous Target
2012	100%

Definition of Finding:

Programs are issued a finding of noncompliance if targets for SPP/APR Indicators and Hawai'i State Priority Areas are not met. All Programs are notified in writing of any noncompliance and that they must demonstrate correction of all noncompliance (e.g., child specific and updated data) as soon as possible not but no later than one year of identification (i.e., date of written notification).

Actual Target Data for FFY 2012:

- The following findings were issued in FFY 2011, based on FFY 2010 data.

Table 1a. Summary of Correction of Noncompliance of Findings Issued in FFY 2011	
a. No. of Findings of Noncompliance Issued (FFY 2011)	190
b. No. of Findings Verified as Corrected within One Year of Notification	179

c. Percent Verified as Corrected within One Year of Notification	94% (179/190)
d. No. of Finding Subsequently Verified as Corrected after one year of notification	8
e. No. of Findings Closed due to Program Closing	0
f. Total No. of Findings Verified as Corrected or closed by FFY 2011 APR Submission	187
g. Percent Verified as Corrected by APR Submission	98% (187/190)

- The following findings were issued in FFY 2010, based on FFY 2009 data.

Table 1a. Summary of Correction of Noncompliance of Findings Issued in FFY 2010	
a. No. of Findings of Noncompliance Issued (FFY 2010)	341
b. No. of Findings Verified as Corrected within One Year of Notification (FFY 2010)	316
c. Percent Verified as Corrected within One Year of Notification (FFY 2010)	93% (316/341)
d. No. of Finding Subsequently Verified as Corrected after one year of notification	22
e. No. of Findings Closed due to Program Closing	1
f. Total No. of Findings Verified as Corrected or closed by FFY 2012 APR Submission	339
g. Percent Verified as Corrected by APR Submission	99% (339/341)

- The table 1b below, as required by OSEP, provides data, by each SPP/APR compliance indicator and each Hawai'i monitoring priority indicator, on:
 - whether the findings were identified through Hawai'i's monitoring process (i.e., self-assessment, data review) or by a dispute resolution process (e.g., complaints or hearings)
 - the number of EI programs issued findings in FFY 2011
 - the number of findings of noncompliance identified in FFY 2011
 - the number of findings verified as corrected within one year of notification.

Table 1b. Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Hawaii Monitoring Priorities				
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # Findings of Noncompliance Identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Notification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	Monitoring Activities: On-site Monitoring	6	6	6
	Dispute Resolution: Complaints, Hearings	0	0	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.	Monitoring Activities: On-site Monitoring	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
3. Percent of infants and toddlers with IFSPs who demonstrate improved: A. Positive social-emotional skills (including social relationships); B. Acquisition and use of knowledge and skills (including early language/communication); and C. Use of appropriate behaviors to meet their needs.	Monitoring Activities: On-site Monitoring	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family: A. Know their rights; B. Effectively communicate their children's needs; and C. Help their children develop and learn.	Monitoring Activities: On-site Monitoring	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0

Table 1b. Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Hawaii Monitoring Priorities				
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # Findings of Noncompliance Identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Notification
5. Percent of infants and toddlers birth to 1 with IFSPs compared to national data.	Monitoring Activities: On-site Monitoring	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
6. Percent of infants and toddlers birth to 3 with IFSPs compared to national data.	Monitoring Activities: On-site Monitoring	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline	Monitoring Activities: Data Review	9	9	9
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has: A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;	Monitoring Activities: Data Review	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has: B. Notified (consistent with any opt-out	Monitoring Activities: Data Review	10	10	10

Table 1b. Correction of Noncompliance Identified in FFY 2011 by SPP/APR Indicator and Hawaii Monitoring Priorities				
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # Findings of Noncompliance Identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Notification
policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has: C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.	Monitoring Activities: Data Review	11	11	10
	Dispute Resolution: Complaints, Hearings	0	0	0
SUB-TOTAL (SPP/APR Indicators)			37	36

Hawai'i State Priorities	General Supervision System Components	# EI Programs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # Findings of Noncompliance Identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Notification
1a. 1 st Review IFSP within 6 months of Initial IFSP.	Monitoring Activities: Data Review	5	5	5
	Dispute Resolution: Complaints, Hearings	0	0	0
1b. 1 st Annual IFSP within 1 year of Initial IFSP.	Monitoring Activities: Data Review	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
2a. Complete present levels of development	Monitoring Activities: Data Review	5	5	5
	Dispute Resolution: Complaints, Hearings	0	0	0
2b. Frequency, intensity, method, location, & payment	Monitoring Activities: On-site Monitoring	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
2c. IFSP objectives complete	Monitoring Activities: On-site Monitoring	4	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
2d. Justification for services in non-natural environments	Monitoring Activities: On-site Monitoring	3	3	2
	Dispute Resolution: Complaints, Hearings	0	0	0
3a. Completed EI Goals Initial Ratings	Monitoring Activities: On-site Monitoring	4	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
3b. Completed EI Goals Exit Ratings	Monitoring Activities: On-site Monitoring	8	8	7
	Dispute Resolution: Complaints, Hearings	0	0	0
4a. FERPA notice explained and	Monitoring Activities: On-site Monitoring	4	4	4

provided/offered to the family	Dispute Resolution: Complaints, Hearings	0	0	0
4b. “Dear Family” explained and provided/offered to the family	Monitoring Activities: On-site Monitoring	4	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
4c. Written Prior Notice provided to the family	Monitoring Activities: On-site Monitoring	9	9	8
	Dispute Resolution: Complaints, Hearings	0	0	0
4d. Consent for MDE	Monitoring Activities: On-site Monitoring	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
4e. Written consent prior to the initiation of services	Monitoring Activities: On-site Monitoring	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
5a. Appropriate individuals invited to Transition Conference	Monitoring Activities: On-site Monitoring	5	5	4
	Dispute Resolution: Complaints, Hearings	0	0	0
DV1-22. Data Validation	Monitoring Activities: On-site Monitoring	19	97	91
	Dispute Resolution: Complaints, Hearings	0	0	0
SUB-TOTAL (Hawaii State Priority Areas)			153	143
TOTAL			190	179

Demonstrating Correction based on the 09-02 Memo, page 2

Prong 1

When any child specific noncompliance occurred, the Part C LA verified that each individual case of noncompliance was corrected. If the noncompliance was related to a timeline, the EI Program was directed to take the required action although late (e.g. complete the evaluation/assessment, provide the required service, and implement the transition conference). Refer to the “Demonstrating Correction based on the 09-02 Memo, page 2” section of Indicators 1, 7, and 8 for explanations of how child specific correction is demonstrated for each Indicator.

Prong 2

Current data is also reviewed to ensure that programs are correctly implementing the requirement found to be in noncompliance. Refer to the “Demonstrating Correction based on the 09-02 Memo, page 2” section of Indicators 1, 7, and 8 for an explanation of how correction of all noncompliance is demonstrated for each Indicator.

Programs that had noncompliance were required to develop written CAPs that included strategies, benchmarks, timelines, and root causes and submit the CAP to their respective EI Agency for approval. Programs are required to make changes to policies, procedures, and/or practices when appropriate. Once approved, the program CAPs were submitted to their respective EI Agency on a monthly basis with current data to support their CAP requirement, including progress on strategies to change program protocol so that timelines were met. The EI Agencies submitted their CAP Summary Reports to the Part C LA for verification that Programs were correctly implementing the specific regulatory requirement.

Once received, Part C LA reviewed the CAP Summary Reports to determine if any follow-up was needed or if the reports were accepted as complete. If, however, there were concerns related to the CAP Summary Report, the Part C LA would contact the EI Agency and/or the EI Program for additional information.

Monitoring Process

The monitoring process and how findings are issued described in last year’s APR has not changed. A description of the monitoring process, which includes the process for selecting children for monitoring, called the PART C LA Continuous Quality Improvement System (CQIS), can be found in the SPP.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Although the target of 100% was not met, there was progress for Indicator 9. And on-going non-compliance continues from one program. The Program has new Program Manager who has made progress in completing on-going noncompliance.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Develop a process to verify monitoring results to assure accurate results.	Randomly verifying monitoring results was initiated for on-site monitoring in FFY 2011.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2012.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100%.

Continuing and New Improvement Activities:

Refer to Appendix A for continuing improvement activities to support General Supervision.

Resources:

There are no changes to resources.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

Applied: Not applicable, as Part B due process procedures were not adopted.

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

- Not applicable, as Part B due process procedures were not adopted.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Not Applicable

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2012:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2010

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

Applied: Not applicable, as there were no mediation requests in FFY 2012.

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

- There were no mediation requests during FFY 2012.
- Data is consistent with Table 4 that was previously submitted to DAC.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Not applicable since there were no mediation requests filed in FFY 2012.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2012.

Not applicable since there were no mediation requests filed in FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

As stated in the Indicator Measurement Table, States may, but are not required, to report data for this indicator. OSEP will use the Indicator 14 Data Rubric to calculate the State’s data for this indicator. States will have an opportunity to review and respond to OSEP’s calculation of the State’s data.

Applied:

- a. State reported data, including 618 data, State performance plan, and annual performance reports was submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution).
- b. State reported data, including 618 data, State performance plan, and annual performance reports was accurate in all areas.

Percent = 100%

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

The following required tables demonstrate that Hawaii’s Part C program was at 100% compliance for timely and accurate data.

Part C Indicator 14 - SPP/APR Data			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2

Part C Indicator 14 - SPP/APR Data			
APR Indicator	Valid and Reliable	Correct Calculation	Total
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8a	1	1	2
8b	1	1	2
8c	1	1	2
9	1	1	2
12	1	1	2
13	1	1	2
Subtotal			26
APR Score Calculation	Timely Submission Points - If the FFY 2012 APR was submitted on-time, place the number 5 in the cell on the right.		5
	GRAND TOTAL		31

618 Data - Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/6/13	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/6/13	1	1	1	1	4
Table 3 - Exiting Due Date: 11/6/13	1	1	1	N/A	3
Table 4 - Dispute Resolution Due Date: 11/6/13	1	1	1	N/A	3
				Subtotal	14
618 Score			Grand Total (subtotal x 2.2)		30.8

Indicator #14 Calculation	
A. APR Grand Total	31.00
B. 618 Grand Total	30.80
C. APR Grand Total (A) + 618 Grand Total (B) =	61.80
Total NA in APR	0.00
Total NA in 618	2.00
Base	61.80
D. Subtotal (C divided by Base) =	1.00
E. Indicator Score (Subtotal D x 100) =	100.00

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

Not applicable since data demonstrates the target of 100% has been met.

Revisions, with Justification, to Proposed Targets/Improvement Activities/Timelines/Resources for FFY 2012.

Not applicable since data demonstrates the target of 100% has been met.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
Collaborate with academic institutions to investigate the possibility of developing a program of EI certification.	1	T/PD			X	X	X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> Initiated conversations with University of Hawai'i Department of Special Education Program to explore developing an EI Certification. <p>Plan:</p> <ol style="list-style-type: none"> Initiate conversations with Community Colleges to explore the possibility of including an EI Certification as part of their Early Childhood Program. Explore on-line EI Certifications. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
<u>NEW</u> Participate in the Early Childhood Personnel Center's targeted technical assistance project.	1	PD									X		
Utilize flip video to support consultations. <u>Revision:</u> Explore tele-health options for service delivery.	1	QA & PP					X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> EIS has flip videos to support timely and cost effective consultations. Part C LA met with the Professional Support Unit that provides support to Programs statewide to explore how flip videos could be used. A program on the neighbor island has agreed to pilot the use of the flip videos. New computers were purchased a provided to all EIS programs that can support the use of the flip videos. <p>Plan:</p>	<p><u>REVISE</u></p> <p>Broaden activity to tele-health instead of just flip videos.</p> <p><u>EXTEND TIMELINE</u></p> <p>Continue revised activity</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												<ol style="list-style-type: none"> 1. Explore confidentiality/secure networks when sharing videos between providers. 2. Consult with Medicaid if services provided via tele-health are reimbursable. 3. Develop necessary forms (e.g. consent forms) 	to address area of concern.
Explore factors that can improve staff retention (i.e., POS staff reimbursement)	1, 7	PD							X	X	X	<p>Completed to date:</p> <ol style="list-style-type: none"> 1. Social work practicum students are provided internships at EI programs. Good students are often hired when openings occur. <p>Plan:</p> <ol style="list-style-type: none"> 1. Explore the possibility of providing shortage differential pay. 2. Create a Recognition/Acknowledgement incentive program within each EI Program. 3. Explore the possibility of using practicum students in EI. 4. Explore the possibility of creating and utilizing a “floating team” of therapists who can travel to different programs to fill in when needed. 5. Explore the possibility of creating a pool of former EI staff who can be “on call” similar to substitute teachers. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Investigate reasons for continued issues regarding documentation.	1	QA & PP						X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. EI Programs were surveyed regarding documentation concerns, how Program Managers ensure staff are documenting appropriately, etc. 2. A workgroup has been developed to address documentation issues. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												Plan: 1. Explore revising the database to calculate initial service due dates. 2. Develop a mechanism to monitor documentation.	
Up-date a list of community resources.	1, 7	QA & PP								X		Plan: 1. H-KISS will up-date the list of community resources.	<u>REMOVE</u> Other agencies have an up-dated list of community resources that EI Providers can access.
Resurrect and revise GAP report.	1, 7, 9	QA & PP								X	X	Completed to Date: 1. EI Programs were surveyed regarding gaps and how Program Managers were tracking gaps in service. 2. A workgroup has been developed to develop a statewide GAP Report. Plan: 1. Develop GAP report. 2. Pilot GAP report in at least two Programs. 3. Implement GAP report across all Programs. 4. Analyze data from GAP reports.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Explore the use of technology to support staff in meeting timelines, utilize resources, etc. (i.e., cell	1, 7, 8	QA, PP, IT								X	X	Plan: 1. Explore if resources are available and if it is the vision of the Department. 2. Explore possibility of obtaining grant funding (i.e., HMSA).	<u>EXTEND TIMELINE</u> Due to staff shortages this

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
phones, ipads/tablets, i-cloud, etc.)													activity is still in process.
<p>Target technical assistance to programs in the following situations to help them determine root causes so they can develop appropriate strategies to support increased services in natural environments.</p> <ul style="list-style-type: none"> • When programs do not meet the state target. • When programs report slippage between 2 reporting years. 	2	NE				X	X	X	X	X		<p>Plan:</p> <ol style="list-style-type: none"> 1. Additional investigation is ongoing for programs experiencing difficulties in increasing their percentage of children served in natural environments. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Ensure documentation accurately reflects where services are being provided and the EIS database captures appropriate information	2	NE							X	X		<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. IFSP instructions revised and distributed to clarify how to document when services are provided in multiple locations. 2. Data validation of where services are primarily being provided was included as part of the SAM tool. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
regarding natural environments.												Plan: 1. Develop and implement QA activity to verify that services are being provided in the location documented on the IFSP.	
Collaborate with community providers for children in EI to participate in inclusive settings.	2	NE							X	X		Completed to Date: 1. MOA with Early Head Start completed 11/2012. Plan: 1. Develop a mechanism to track Programs efforts to work with community providers.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Revise the evaluation report form to include a section that provides information on the 3 child outcome goals in addition to data on developmental status.	3	QA & PP					X	X	X	X	X	Completed to Date: 1. The Evaluation Workgroup has met and has explored how the implementation of the Battelle as the State's evaluation tool will impact the written report Plan: 1. The Outcomes Coordinator will participate in the Evaluation Report Workgroup.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Explore the possibility of using the Battelle to collect child outcome data.	3	CFO						X	X	X	X	Completed to Date: 1. The Child Goals Ratings form was revised to include a section to note ratings generated by the BDI-2 to gather data. 2. Staff was trained how to calculate the BDI-2 generated ratings. BDI-2 generating ratings are used as a starting point for the teams in their discussion when determining ratings. Team ratings will still be used at this time for the actual Child Goals Ratings.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												3. The Outcomes Coordinator has discussed the use (pros and cons) of the BDI-2 to determine child ratings with ECO and Riverside (BDI-2). Plan: 1. Examine BDI-2 generated ratings and the actual team ratings. Analyze data.	
Explore and develop a system to determine staff competency in completing the child outcomes summary process.	3	CFO							X	X	X	Plan: 1. Outcomes Coordinator will consult with ECO and explore what other States are doing in this area.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Conduct refresher training sessions for all programs on completing the EI Goals in unison with the BDI.	3	T								X	X	Plan: 1. Outcomes Coordinator will consult with ECO and provide training to all staff.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Consider revising distribution options that would automatically capture demographic information (e.g., ethnicity, length of time in EI) for families based on data currently in the database.	4	CFO						X	X	X	X	Plan: 1. Outcomes Coordinator to follow up with vendor for upcoming family survey distribution..	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
Provide technical assistance to support Programs in using survey results for program improvement.	4	CFO							X	X	X	Plan: 1. Outcomes Coordinator will develop a process to share survey results with the Programs and how the information may be used for program improvement.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Explore possibility of having family survey available as an on-line survey.	4	CFO								X	X	Completed to date: 1. Obtained a quote to have surveys available on-line. Plan: 1. Submit a request to pay for additional option of completing surveys on-line.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Explore creating a new survey or adding to the exiting family survey to include additional questions on how to improve services, etc.	4	CFO								X	X	Plan: 1. Review existing surveys from Programs. 2. Explore possibility of partnering with LDAH to help design, distribute, analyze survey data.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Explore conducting parent focus groups for what's working and not working.	4	CFO, QA								X	X	Plan: 1. Explore possibility of partnering with LDAH to conduct focus groups.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
Review Hawai'i's Part C eligibility criteria for continued appropriateness.	5 6	QA & PP		X	X	X	X	X	X	X		<p>Completed to Date:</p> <ol style="list-style-type: none"> Hawai'i Part C eligibility was changed, effective May 15, 2009 to remove the environmentally at-risk category, as a result of the public hearing process. The revised eligibility was submitted with the grant application to OSEP on May 15, 2009. Public hearings were held January 11-14 and March 3, 2010 to revise eligibility for infants and toddlers with developmental delays from any level of delay to: 33% in chronological/adjusted age or 2 Standard Deviations below the norm in one area; or 25% in chronological/adjusted age or 1.5 Standard Deviations below the norm in two or more areas; or informed clinical opinion by a multi-disciplinary team. As a result of the public hearings it was recommended that eligibility be revised to: 33% delay in age in one area; 25% delay in age in 2 areas; 1.5 Standard Deviations below the norm in any one area; or Informed clinical opinion by a Part C multi-disciplinary team. The change to 1.5 S.D. in any one area makes Part C eligibility consistent with Part B. It was determined that Administrative Rules must be completed and approved and additional public hearing be held on the changes. The Administrative Rules have been finalized and awaiting signature from the Governor. Public hearings held for Administrative Rules. Administrative Rules approved and implemented on October 1, 2013, including changes in eligibility. 	<u>COMPLETED</u>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
<p>Provide information on early intervention services to pre-natal teenage mothers and teenage mothers in the following geographical areas: Oahu - Waianae Coast, Waimanalo, Waipahu, Makiki, Chinatown and Kalihi; Island of Hawai'i – Kona, Oceanview, Waikaloa, Nalehu, Pahala and Puna; and all of Maui</p>	5	PR & CF				X	X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> It is estimated that nearly 500 pregnant teens and teen parents participated in public awareness events targeting pregnant teens and teen parents at the following locations: <ul style="list-style-type: none"> Oahu: Waianae Coast, Makiki and Kalihi. Hawai'i Island: Kona, Nalehu, Pahala, Puna, Oceanview, Waikaloa. Maui: Island-wide A presentation including information on child development and the availability of early intervention services was made by EIS staff for 25 participants of a Teen Court program in Kapolei. (March 2011) Kailua Easter Seals Hawaii EIP provided EI information and education for Mothers of Preschoolers PCDC Waianae distributed information and talked with parents and parents-to-be about child development and early intervention at the Waianae Family Resource Fair. <p>Plan:</p> <ol style="list-style-type: none"> The other areas still needing follow-up will be the focus of the coming calendar year in addition to the areas where successful outreach occurred. The geographic areas still needing follow up are: <ul style="list-style-type: none"> Oahu: Chinatown, Waipahu, Waimanalo 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
Provide information on EI services to OB/GYNs and midwives across the state so EI brochures can be placed in their office lobbies and distributed to expectant mothers.	5	PR & CF				X	X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> Informational brochures are provided, on a regular basis and as requested, for distribution to families, professionals, and community members at conferences, health fairs, physician's offices, childcare centers, community health centers, and EI program offices. Specific requests filled from Hilo WIC ; Tutu & Me, Hi'ilei Kauai Perinatal Program <p>Plan:</p> <ol style="list-style-type: none"> Public Awareness/Child Find Coordinator will develop mechanism to ensure community partners/primary referral sources are aware of EI and have EI brochures to share with families. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Partner with non-Part C programs to increase their awareness about Part C so they will refer potentially eligible Part C children to EI.	5	PR & CF				X	X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> EIS has partnered with the following non-Part C programs and organizations to educate both the organizations and the communities they serve regarding Early Intervention Services: <ul style="list-style-type: none"> Participated at student health fairs sponsored by local community colleges and universities, such as at Brigham Young University – Hawaii. Participated at the Children & Youth Day sponsored by the Legislature. Attended meetings with members of the Micronesian Cultural Awareness Project. Attended local neighborhood board meetings to discuss early intervention 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												<p>services.</p> <ul style="list-style-type: none"> • Participated in language access and other community outreach fairs sponsored by Non-Part C State agencies. • Participated in health and human service conferences sponsored by non-governmental and non-profit organizations, such as the Special Parent Information Network Conference (2010 and 2011). • Participated in teacher in-services with community preschools • Participated in community outreach fairs such as the Palolo Valley Family Health Fair. (April 30; partner: Easter Seals Hawaii), Wahiawa Pineapple Festival (May 14-15; partner PCDC Wahiawa) • Participated in health and human service conferences, such as the “Coping in Crisis Conference 2011” sponsored by Department of Health Developmental Disabilities Division and CARE Hawaii, Inc. • Participated in teacher in-services with community preschools • Provided in-service lecture on EI and family centered care philosophy to Pediatric OT Asst. students at Kapiolani Community College. <p>Plan:</p> <ol style="list-style-type: none"> 1. Link with the Interagency Council, Planned Parenthood, and Home Visitation and Executive Office of Early Learning to extend the breadth of public awareness to include 	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												<p>populations such as the homeless and immigrants.</p> <p>2. Reinforce links to FASD, Boys and Girls Club, DOE Health Classes (PEP) to integrate with Teen Pregnancy Prevention Programs.</p>	
Educate referral sources (e.g., pediatricians) about Hawaii's early intervention system, especially regarding transdisciplinary services, so that they provide accurate information to families about how services are provided	5	PR & CF					X	X	X	X	X	<p>Completed to date:</p> <p>1. EI information and various EI brochures were displayed and distributed at the AAP-HI Convention. (April 2011)</p> <p>2. HKISS and Developmental Checklists sent to physicians requesting – Kaiser Pediatrics, Dr. Yamashiroya.</p> <p>3. HKISS and Developmental Checklists sent to health clinics as requested – Hawaii Island: Keaau, Hilo, Keawe; Hickam AFB -Family Health Clinic; MCBH – KB Branch Medical Clinic; Ko'olauloa Community Health & Wellness Center</p>	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Develop a Public Awareness Committee comprised of various community members (e.g., pediatricians, EI providers, H-KISS, etc), to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate	5	PR & CF						X	X	X	X	<p>Plan:</p> <p>1. Explore the use of social media (e.g. Facebook, Twitter).</p> <p>2. Follow up to see if families read brochures.</p> <p>3. Community outreach to legislators, families, medical home, community providers.</p> <p>4. Invite University of Hawaii Medical Coordinator to the Stakeholder Meeting.</p> <p>5. Partner with DOE to develop public announcements to increase community awareness.</p>	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
methods of public awareness to increase referrals to EI. This may include DVDs, U-Tubes for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.													
Review and identify Public Awareness strategies used by other states that may be successful in Hawai'i.	5	PR & CF							X	X	X	Plan: 1. New Public Awareness Coordinator will develop a plan to address this improvement activity.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Identify programs that do screening and if they are referring children to Part C (e.g., CWS)	5	PR & CF							X	X	X	Completed to date: 1. An EI representative has been identified to participate in the EOEL workgroup that focuses on developmental screening. Plan: 1. Actively participate in the EOEL workgroup that focuses on developmental screening.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Programs must report on Child Find activities in a Quarterly Report.	5	PR & CF							X	X	X	Plan: 1. Revise quarterly report to include a section on Child Find/Public Awareness activities. 2. Develop procedures to track Child Find/Public Awareness activities.	<u>EXTEND TIMELINE</u> Due to staff shortages this

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
													activity is still in process.
Develop a Family Assessment Workgroup to explore possible Family Assessment Tools.	7	PR & CF							X	X	X	<p>Completed to date:</p> <p>5. Part C providers have been informed of the new regulation.</p> <p>6. Providers were invited to participate in the Family Assessment (FA) Workgroup.</p> <p>7. Part C LA met with the FA Workgroup to outline tasks.</p> <p>8. The FA developed and presented a final draft of the Family Assessment tool at the EIS Program Manager Meeting in December of 2012.</p> <p>9. Part C LA developed a Family Assessment section to the EI Procedural Guidelines.</p>	COMPLETED
Investigate the referral process and make necessary recommendations if needed.	5, 6, 7	PR & CF							X	X	X	<p>Plan:</p> <p>1. Develop reports to extract data from H-KISS database regarding referral date, date referred to an EI Program, referral sources, etc.</p> <p>2. Develop a system for H-KISS to share referral data with Part C LA.</p>	<p>EXTEND TIMELINE</p> <p>Due to staff shortages this activity is still in process.</p>
Address system issues with Child Welfare Services (CWS) to improve collaboration.	7	QA & PP								X	X	<p>Plan:</p> <p>1. Establish regular meetings with CWS to develop partnerships and opportunity to explain procedures from each respective agency.</p> <p>2. Explore the need for a MOA/MOU with CWS.</p>	<p>EXTEND TIMELINE</p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
A Quarterly Report will be developed for EI Programs to submit to Part C LA that includes an analysis of their Program data regarding Transition Notice Opt Outs.	8	QA & PP			X	X	X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> The EIS database was updated to include reasons why families chose to “opt out” of sending the Transition Notice to DOE. The data will be available for analysis prior to the submission of the FFY 2009 APR to be submitted in 2011. Reports generated by the EIS database have been developed and training has been provided to EIS Program Managers so that they can look at their Program data regarding number of Transition Notice Opt Outs and reasons for the Opt Outs. The Transition Notice Form and Procedures have been revised in collaboration with DOE to be in line with OSEP’s FAQs. The revised Transition Notice Form and Procedures was implemented effective 7/1/11. <p>Plan:</p> <ol style="list-style-type: none"> Part C LA will revise the Quarterly Report. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
A Quarterly Report will be developed for EI Programs to submit to Part C LA that includes an analysis of their Program data regarding Transition Conference Declines	8	QA & PP			X	X	X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> The Part C LA database was updated to include reasons why families declined the Part C Transition Conference. The data will be available for analysis prior to the submission of the FFY 2009 APR due in 2011. Reports generated by the EIS database have been developed and training has been provided to EIS Program Managers so that they can look at their Program data regarding number of Transition Conference declines and reasons for the declines. <p>Plan:</p>	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												1. Part C LA will revise the Quarterly Report.	
The STEPS State team will coordinate the development of a resource folder of both Part B and Part C information by district/complex/community areas, to be used by DOE Student Services Coordinators and DOH Care Coordinators and Program Managers.	8	QA & PP				X	X	X	X			<p>Completed to Date:</p> <p>1. The Windward Oahu STEPS team, Kamalapua O Koolau, developed a “Transition Resource Guide.” It includes information and resources in the Windward Oahu district.</p> <p>Plan:</p> <p>1. The State STEPS team is reviewing materials included in Kamalapua O Koolau’s “Transition Resource Guide” and gathering other tools/resources. A list of recommended tools/resources will be developed to share with other community STEPS teams to enhance existing Transition Resource Guides and/or develop one for their respective communities.</p>	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
The state STEPS team will update current technical assistance documents and hold state statewide training when the DOE and DOH MOA have been signed.	8	QA & PP & T							X	X	X	<p>Completed to Date:</p> <p>1. Transition Notice Form and Procedures have been revised based on OSEP FAQs.</p> <p>2. Revised MOA between DOE and DOH have been submitted and “on hold” until further review by OSEP.</p> <p>3. Part B Chapter 60 was up-dated.</p> <p>4. Training Coordinator and/or ECSU Supervisor have attended monthly State STEPS team meetings</p> <p>5. Statewide STEPS Transition Conference “Quality Transitions for Successful Child</p>	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												<p>Outcomes” was completed May 2012 with community transition teams, P3, EIS, DOE, University of Hawaii, and Stakeholders to network, exchange information on successful transition, and workgroup for community teams to develop annual transition plan.</p> <p>Plan:</p> <ol style="list-style-type: none"> 1. Training Coordinator to collaborate with State STEPS team and/or DOE regarding joint training schedule. 	
Develop a handout for families that explains the purpose of the Transition Conference (TC).	8	QA & PP							X	X	X	<p>Plan:</p> <ol style="list-style-type: none"> 1. Part C LA will develop a Transition Conference handout. 2. Part C LA will disseminate handout to EI Programs. 3. Part C LA will include handout in EI Procedural Guidelines and EI Part C Orientation. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Develop procedures for how and when the TC handout will be used. (e.g. mandatory for Programs that have a high number of declines for TC)	8	QA & PP							X	X	X	<p>Plan:</p> <ol style="list-style-type: none"> 1. Part C LA will develop procedures on use of the Transition Conference handout. 2. Part C LA will disseminate procedures to EI Programs. 3. Part C LA will include procedures in EI Procedural Guidelines and EI Part C Orientation. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Explore how to have Programs with a high number of TN opt outs and/or TC	8	QA & PP							X	X	X	<p>Plan:</p> <p>LA QA Coordinator will work with WRRC and ECTA Center to address this improvement activity.</p>	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
declines address the issue as part of their CAP.													shortages this activity is still in process.
Revise transition module to strengthen section on developing a complete transition plan.	8	T								X	X	Completed to Date: 1. Training Coordinator will revised Transition module.	COMPLETED
Develop and implement procedures to include HEICC and family members in the monitoring process.	9	QA & PP		X	X	X	X	X	X	X	X	Plan: 1. Discuss with HEICC members how HEICC and family members can best support the provision of quality early intervention services. 2. Identify appropriate activities for HEICC members and families (e.g., family members may interview families about their early intervention experiences.) 3. Explore possibility of a parent council/group at the program level to review materials and policies and provide feedback to LA and HEICC.	EXTEND TIMELINE Due to staff shortages this activity is still in process.
Explore recruitment and retention strategies that are at no cost to the State.	9	PD			X	X	X	X	X	X	X	Completed to Date: 1. An e-mail was sent to the Executive Directors of the Purchase of Service EI programs to identify reasons for vacancies. The following information was received from 4 of the 6 Executive Directors. a. <u>Salaries</u> . All respondents indicated that inadequate salaries were the major reason for vacancies. For example, one noted that they offer salaries of about \$56,000 for therapists; on the mainland they are	EXTEND TIMELINE Due to staff shortages this activity is still in process.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
												<p>making \$80-100,000. Therapists in the private section can make \$15-20,000 more.</p> <p>b. <u>10-Month Schedule for DOE therapists.</u> All respondents noted that in addition to the DOE therapists having higher salaries, they also have a 10-month schedule which allows them to do additional work during the summer months for extra pay.</p> <p>c. <u>Natural environment requirements.</u> One respondent reported increased hiring difficulty for his programs that serve families in low SES, drug-impacted areas, and low income housing. Although safety is paramount and no one is expected to put themselves in danger, when prospective employees are driven through the areas those programs serve, this is a deterrent for some potential staff to accept positions.</p> <p>2. Although the Executive Directors noted that one-time, non-recurring recruitment bonuses were effective, the reduction of the EI budget has eliminated providing these additional funds to programs. Also effective but eliminated was providing a “finder’s fee” for staff who identified individuals to fill vacant positions.</p> <p>Plan:</p> <p>1. Further discussion is needed on recruitment/retention strategies that incur no cost to the state.</p>	
Develop a process to verify monitoring results to assure accurate results.	9	QA & PP				X	X	X	X			<p>Plan:</p> <p>1. Randomly verifying monitoring results will be initiated for FFY 2011.</p>	<u>COMPLETED</u>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
Explore ways to refine the technical assistance process to support Programs understanding of the General Supervision process.	9	QA & PP							X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. Debriefing Monitoring Summary Report implemented for FFY 2011 monitoring. 2. Required Evidence of Change document revised to bullet format. 3. SW Team Leaders are included in Monitoring Meetings. 4. QA and Training Unit Supervisor has been added to the agenda for the monthly SW Team Leaders Statewide meetings. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Explore ways to address the issue of cycling in and out of compliance for the same Indicator(s).	9	QA & PP							X	X	X	<p>Plan:</p> <ol style="list-style-type: none"> 1. LA QA Coordinator will work with WRRC and ECTA Center to address this improvement activity. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>
Up-date EIS database manual and training to new data clerks.	9	IT & T								X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. Staff person identified to be responsible for updating Data base Manual. 2. Final draft of up-dated Database Manual submitted to Part C LA for review. <p>Plan:</p> <ol style="list-style-type: none"> 1. Revise Database Manual based on feedback. 2. Disseminate revised Database Manual in the Spring of 2014. 3. Offer trainings to Program Managers and Data Clerks. 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
Review previously developed videos and other materials (from HI and other states) to determine if and how they can be used to support training on Part C requirements for families and to increase parents' awareness of their procedural safeguards. Ensure that any video or materials developed are both culturally and linguistically appropriate for the intended audience.	13	T						X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> The title of the "Dear Family" brochure was changed to "Family Rights" so that families would immediately know the purpose of this brochure. The "Family Rights" brochure, which provides information on family rights, was translated into 9 languages. <p>Plan:</p> <ol style="list-style-type: none"> Research on other DVDs developed by other states or technical assistance will be initiated to identify public awareness strategies that are appropriate for Hawai'i's Part C families. The Training Coordinator will gather and review previously developed videos and materials for training purposes. Consult with local groups such as UH School of Social Work, Oleo, etc to help develop materials that are culturally appropriate of our population. The Part C LA will revise and/or develop materials regarding Procedural Safeguards. Post on EIS website. 	
Develop and implement training, including written guidelines, for all EI Program Managers and Supervisors to ensure they are aware and knowledgeable of	13	T						X	X	X	X	<p>Completed to date:</p> <ol style="list-style-type: none"> Content of the EI Part C Orientation and Annual Refresher Workshop was revised to be consistent with the EI Procedural Guidelines. <p>Plan:</p> <ol style="list-style-type: none"> The Part C LA will include a Procedural Safeguard section that includes dispute resolution, due process hearings, etc. in the EI 	<p><u>EXTEND TIMELINE</u></p> <p>Due to staff shortages this activity is still in process.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	Indicator	Area	'05	'06	'07	'08	'09	'10	'11	'12	'13	PROGRESS/STATUS	JUSTIFICATIONS
legal issues related to: dispute resolution, due process hearings, etc. Include any differences for state vs. private agencies.												Procedural Guidelines.	
Develop internal procedures for the Part C LA to follow to ensure that federal timelines for any written complaints, request for mediation, request for due process hearing are met.	13	QA & PP						X	X	X	X	Plan: 1. The Part C LA will include the federal timelines regarding due process in the EI Procedural Guidelines. 2. The federal timelines will be included in the EI Part C Orientation, Annual Refresher Workshop and training for the Mediation Center.	<u>EXTEND TIMELINE</u> Due to staff shortages this activity is still in process.
Regularly train Mediation Center staff on Part C requirements in case mediation is requested.	13	T			X	X	X	X	X	X	X	Completed to Date: 1. The Mediation Center has been contacted to provide mediation when requested by families. 2. A Purchase Order has been finalized (i.e., approved and signed) to provide funds to the Mediation Center if a family requests mediation. Plan: 1. The Training Coordinator will provide training for the Mediation Center staff.	

Area:

CF: Child Find
 NE: Natural Environment
 PP: Policies & Procedures

CFO: Child/Family Outcomes
 PA: Public Awareness
 QA: Quality Assurance

IT: Information & Technology
 PD: Personnel Development
 T: Training