

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

APR Process

The process to develop Hawai'i's APR for FFY 2009 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 2008 APR data, draft FFY 2009 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.
 - Whether target data, if a performance indicator, should be changed.
 - Whether current Improvement Activities focused on identifying root causes to support improved data.
 - Whether current Improvement Activities were appropriate as originally written or whether they needed to be revised, deleted, or if new activities were needed.
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 draft was reviewed and revised, as necessary, by the Part C Coordinator.
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 was sent to the Director of Health to review, approve, and sign the cover letter to accompany the APR 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 was submitted to OSEP as required.
12. The APR and SPP will be placed on the HDOH EIS website, once approved.

Broad Representation

A stakeholder group of approximately 70 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:
 - Exceptional Family Member Program (military support program)
 - Head Start
 - University of Hawai'i
- Parents

Reporting to the Public

The APR has been posted on the HDOH EIS website. 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).

Response to June 1, 2010 OSEP Letter and Enforcement Action Regarding Hawai'i's Needs Assistance 2 Determination

OSEP's June 1, 2010 letter required that Hawai'i's Part C LA complete several specific tasks, in accordance with sections 616(e) and 642 of the Individuals with Disabilities Education Act (IDEA), because Hawai'i continued to be a Needs Assistance Two state (NA2). All of the following requirements were met:

1. The Part C LA was required to notify the public that it continued to be a NA2 state. This requirement was met by:
 - Posting OSEP's June 1, 2010 letter on the EIS website, and
 - Distributing a copy of the letter to all participants at the Annual Stakeholders' meeting held on December 2, 2010.

2. The Part C LA was required to provide an update to OSEP by October 1, 2010 on the technical assistance provided to programs to address the areas of noncompliance and the status of on-going noncompliance.
 - The required letter was submitted to OSEP on September 28, 2010.
3. Hawai'i was required to report on the technical assistance sources that provided technical assistance and the actions that Hawai'i took as a result of that technical assistance.
 - Following is a list of the technical assistance sources that were accessed by Hawai'i's Part C program and the actions Hawai'i took as a result of the technical assistance for Indicator 1. Information is provided for this indicator as it was responsible for OSEP's determination of Hawai'i as a NA 2 state.

Technical Assistance Sources

- Monthly conference calls with OSEP, NECTAC, and WRRRC related to clarification of OSEP's 09-02 memo and the new requirements for the APR and the SPP.
- Attendance at the November 2010 WRRRC APR Clinic.
- Attendance at the August 2010 National Early Childhood Conference.
- Review of SPP/APR Calendar related to Investigative Questions related to Indicator 1.
- Individualized technical assistance by OSEP, NECTAC and WRRRC specifically related to correcting noncompliance.

Actions Taken as a Result of the Technical Assistance

- Revised the Corrective Action Plan (CAP) form to include a section on strategies.
- Increased the requirements for EI Programs that were in Year 3 noncompliance for Indicator 1 and required that Programs:
 - ✓ Utilize the Local Contributing Factor Tool to help identify root causes and strategies to address noncompliance;
 - ✓ Submit weekly data of each new child's receipt of timely services;
 - ✓ Hold mandatory weekly meetings to review appointment schedules; and
 - ✓ Initiate all new services within 30 days of the completion IFSP, regardless of the frequency on the IFSP, including quarterly consultation services.
- Supported the increased requirements and:
 - ✓ Provided weekly reminders for the two programs to submit their weekly reports; and
 - ✓ Provided recognition at EIS Program Managers' Meetings when programs made progress and corrected noncompliance.

As a result of the implementation of the above strategies, EIS programs were successful in subsequently correcting noncompliance for Indicator 1. Refer to Indicator 1 for more specific information.

Part C State Annual Performance Report (APR) for FFY 2008

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>205 infants and toddlers with IFSPs received the early intervention services on their IFSPs in a timely manner</p> <p>234 infants and toddlers with IFSPs</p> <p>Percent = 205/234 = 88%</p>

FFY	Measurable and Rigorous Target
FFY 2009	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 2009:

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”).

- 205 of 234 (88%) of infants and toddlers monitored received EI services on their IFSPs in a timely manner.
- Exceptional Family Circumstances. 37 of the 234 (16%) 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 two predominate family circumstances that impacted the scheduling of timely services:

- o Medical reasons (child or family member sick)
- o Did not return calls in a timely manner
- Program Reasons. 29 of the 234 (12%) infants and toddlers monitored did not receive timely services, due to program reasons. The following are the two predominate program reasons that impacted the scheduling of timely services:
 - o No documentation

An improvement activity to investigate why documentation continues to be an issue has been added
 - o Forgot to schedule

Training has been provided to the Program Managers on how to utilize the reports developed in the database as a tickler system.
- Identifying Noncompliance. Of the 29 children where services were not initiated in a timely manner due to program reasons, 1 child was determined to no longer need the service so it was removed from the IFSP prior to the service being provided, 1 child left the program jurisdiction before the service was implemented and the remaining 27 children’s services on their IFSP were initiated, although late.

Range of Days to Initiate Services (For the 27 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	15	56%
31-60 days	6	22%
61-90 days	4	15%
> 90 days	2	7%

- 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 14 programs serving the 27 children who did not receive services in a timely manner.
 - o 12 of the 14 programs were issued findings. 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).
 - o 2 of the 14 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.
 - o There were no programs with on-going noncompliance.
 - o 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 2d) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Monitoring Process:

A total of 234 children were monitored within the time period 7/1/09- 6/30/10 across the Part C programs, including the EIS - 21 programs and PHNB - 11 sections. 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 2009, the LAQuAT Team completed the SAM tool for each of the EIS programs while PHNB elected to have their Section Supervisors complete the tool for their respective 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 7/1/09 – 3/31/10 were obtained by Part C LA from each program/section. The timeframe was chosen to ensure that there were 3 months to confirm that services were provided in a timely manner within FFY 2009.
- Part C LA identified 10% of children at each program/section based on the 12/1/09 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 387 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 234 children as 153 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 Hawai'i'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 inform the service coordinator of the date services were initiated either through verbal confirmation of the written documentation or through receipt 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 submitted to 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 2010 findings based on data from FFY 2009.

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 and that they must 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

The status of child specific correction was included in previous APRs 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/Section had to immediately correct by providing those services(s) on the IFSP, though late, and submit to Part C LA the documentation 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)(1). Programs/Sections 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/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 Program Manager/Section Supervisor verified that the service occurred by reviewing the required documentation as specified by Part C LA. The Agency Administrators then verified the data submitted and ensured that the Program/Section submitted required evidence of correction documentation based on the percentage of noncompliance. Part C LA verified the data submitted in the Agency Monthly report.

Status of Correction

FFY 2007

- 26 programs were notified of findings for Timely Services in FFY 2007. These findings were based on FFY 2006 data that was used in the FFY 2007 Self-Assessment process. (See Table 2, Summary of Correction of Noncompliance of Findings Issued in FFY 2007 in Indicator 9).
 - 17 findings were verified as corrected within one year of notification.
 - 9 findings were subsequently verified as corrected.
 - 0 findings remaining

Root causes

- Insufficient Documentation

Part C LA implemented the following to address insufficient documentation:

- Developed and distributed guidelines on “Appropriate Documentation of Timely Services”
- Developed “Service/Attendance Log” for authorized Fee-for-Service (FFS) Providers and required monthly submission to the Care Coordinators on a monthly basis.

- Staff Vacancies

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

- Spoke with Purchase of Service (POS) Programs on their ability to increase salaries and provide recruitment bonuses
- Supported a legislative bill for a loan forgiveness program to encourage Hawai'i students on the mainland to return and work in Hawai'i after receiving their professional therapy degrees
- Contracted with a provider who recruits mainland therapists to work in Hawai'i
- Allowed staff to help other Programs experiencing staff shortages by serving children outside of their assigned geographic area

- Scheduling Difficulties (for programs with Year 3 on-going noncompliance)

Part C LA implemented the following to address scheduling difficulties:

- o Required weekly staff meetings so that the Program Managers could verify that all services due that week had been scheduled and all services due the previous week was provided
- Misunderstanding of Timely Services (for programs with Year 3 on-going noncompliance)

Part C LA and/or Agency met with Program staff to discuss the following:

- o Definition of timely services
- o Understanding of required documentation
- o Understanding of reporting requirements
- o Understanding and implementation of Transdisciplinary Approach
- o How scheduling of visits occur

FFY 2008

- Two programs were notified of findings for Timely Services in FFY 2008. These findings were based on FFY 2007 data that was used in the FFY 2008 Self-Assessment process. (See Table 1b, Correction of Noncompliance Identified in FFY 2008 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - o 2 findings were verified as corrected within one year of notification.
 - o 0 findings remaining

Root causes

- The root causes identified for FFY 2007 were also relevant for FFY 2008. As the activities were implemented, Programs were able to subsequently correct. In addition to what is noted above:
 - o The Guidelines on “Appropriate Documentation of Timely Services” that was previously distributed was embedded into the mandatory Part C EI Orientation

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	To be reported in the FFY 2010 APR to be submitted in 2012				

- Response to June 1, 2010 OSEP Letter and Enforcement Action Regarding Hawaii’s Needs Assistance 2 Determination

Refer to Introduction, pages 2-3.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:

Explanation of Progress:

The current data on provision of Timely Services shows improvement from FFY 2005 to the present, with an increase 4% from FFY 2008 to FFY 2009, from 84% to 88%.

- FFY 2005 compliance was at 69%
- FFY 2006 compliance was at 71%
- FFY 2007 compliance was at 78%
- FFY 2008 compliance was at 84%
- FFY 2009 compliance was at 88%

Progress is a result of the Part C LA providing clarification on the definition of timely services and guidelines for documentation. As a result of the clarification, programs improved in documenting when services have occurred. For the majority of the services that occurred, although late, there was insufficient documentation to determine why the program was late in initiating the service. Based on informal discussions, budget cuts and furloughs have been an additional strain on Programs which impacted documentation.

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
Explore staffing options (e.g., “loan” staff to other programs; collaborate with DOE/Head Start, etc).	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Part C LA partnered with Easter Seals Society to support a legislative bill for a loan forgiveness program to encourage Hawaii students on the mainland to return and work in Hawaii after receiving their professional therapy degrees. 2. Part C LA contracted with a provider who recruits Mainland therapists to come to Hawaii to work. 3. EI programs collaborated with each other, during periods of staff shortage, to help each other by allowing staff to serve children in other geographical areas. 4. Part C LA hired a full time vision specialist to support infants and toddlers who are visually impaired. 5. Part C LA is contracting with DOE Hearing Specialists to support children in who are deaf or have a hearing loss. 6. Part C LA recently developed a contract with a Hearing Specialist and is in the process of completing paperwork to hire the person as staff. 7. “Loaning” staff occurs across Programs within the same Agency; however staff can’t be shared across Agencies due to liability issues.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Develop guidelines, procedures, and billing parameters for programs to request and provide services for other programs due to staff shortage.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. A statement is included on every POS program’s contract whereby children can be served by a POS program if the state ECSP program is unable to serve the child. 2. Part C LA has given permission to POS programs to help serve children outside their geographic area during interim periods before a contract could be awarded. 3. Billing guidelines and procedures have been revised to allow POS programs to “loan” staff. 4. “Loaning” staff occurs across Programs within the same Agency; however staff can’t be shared across Agencies due to liability issues.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100% for FFY 2010, 2011, and 2012.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Review professional standard requirements in the current EI State Plan for adequacy in meeting service needs of Hawaii’s Part C population, and update if determined necessary.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Part C LA encouraged Programs to hire certified Occupational therapy assistants and Physical therapy assistants to increase staff to provide early intervention services. 2. Part C LA recommended programs use the transdisciplinary model of services as best practice with the focus on mentoring and coaching parents on how they can best support their child’s development. Programs were encouraged to hire teachers and paraprofessionals as primary service providers, as appropriate.
	Justification: Professional standards have been developed and the EI State Plan includes the various staff that can provide EI services.
Post documentation training module on the web.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. The CSPD position was filled 1/4/2010 so this activity can be initiated. 2. A draft has been completed.
	Justification: The information on the documentation is not a stand alone module. It has been developed to be embedded into the Part C EI Orientation and the EI Refresher Course.

Continuing and New Improvement Activities:

APR Template – Part C (4)

The following table includes continuing and new improvement activities that developed to support compliance for Timely Services.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Collaborate with academic institutions to investigate the possibility of developing a program of EI certification.			X	X	X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> PART C LA initiated conversations with University of Hawai'i Department of Special Education Program to explore developing an EI Certification. <p>Continuing</p> <ol style="list-style-type: none"> Part C LA will initiate conversations with Community Colleges to explore the possibility of including an EI Certification as part of their Early Childhood Program. Part C LA will explore on-line EI Certifications. 	<p>Extend Timeline</p> <p>Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>
Develop a training module to address required and acceptable documentation.				X	X	X			<p>Completed to Date</p> <ol style="list-style-type: none"> The CSPD position was filled 1/4/2010 so this activity can be initiated. A draft has been completed <p>Continuing</p> <ol style="list-style-type: none"> Will be included in the Part C EI Orientation 	
Embed the documentation training module into the mandatory EI Orientation Training.					X	X			<p>Completed to Date</p> <ol style="list-style-type: none"> The CSPD position was filled 1/4/2010 so this activity can be completed once the module is completed. A draft has been completed 	
Utilize flip video to support consultations.					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. 	<p>Extend Timeline</p> <p>The current computers some staff has are unable to support the use of flip videos. New computers have been ordered.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
									<p>Continuing</p> <ol style="list-style-type: none"> 1. Procedures need to be developed on acceptable use of the flip videos 2. New computers are being purchased that can support the use of the flip videos 3. A consent form needs to be developed 	
<p><u>New</u></p> <p>Explore factors that can improve staff retention (i.e., POS staff reimbursement)</p>							X	X		<p>Due to budget cuts, it has been extremely difficult to recruit staff. And it is even more challenging to retain staff once hired. Since financial incentives are not available to retain staff, other factors must be identified to increase staff retention.</p>
<p><u>New</u></p> <p>Explore possibility of developing a State Evaluation team.</p>							X			<p>Staff vacancies, budget cuts and furloughs continue to impact Programs. A State Evaluation Team may alleviate the strain on Programs and enable their staff to focus on providing on-going services to the children and families.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p><u>New</u> Investigate reasons for continued issues regarding documentation.</p>										<p>Insufficient documentation continues to be an issue.</p>

Part C State Annual Performance Report (APR) for FFY 2008

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><u>Early Intervention Section Programs</u>, upon which the target was based.</p> <p>1709 infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.</p> <p>1797 infants and toddlers with IFSPs</p> <p>Percent = 1709/1797 = 95%</p> <p><u>All Part C Children</u>, based on Section 618 Child Count data of 12/1/09</p> <p>1948 infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.</p> <p>2045 infants and toddlers with IFSPs</p> <p>Percent = 1948/2045 = 95%</p>

FFY	Measurable and Rigorous Target
2009	90%

Actual Target Data for FFY 2009:

- The target was originally set using data from EIS Programs rather than all Part C children. Therefore EIS data is provided as the applied measure for this target.
- The target of 90% was surpassed for EIS Programs (95%), PHNB (96%), and all Part C children (95%). See table below.

Early Intervention Services in Natural Environments Based on Child Count Data of 12/1/09		
Part C Agencies	#	%
EIS Programs	1709/1797	95%
PHNB Sections	239/248	96%
All Part C Children	1948/2045	95%

- 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 2009:

Explanation of Progress

The current data for EIS, related to the percent of infants and toddlers with IFSPs who primarily received early intervention services in the home or community-based settings shows a 2% progress from FFY 2008 to FFY 2009, from 93% to 95%.

- FFY 2005 data was at 81%
- FFY 2006 data was at 89%
- FFY 2007 data was at 87%
- FFY 2008 data was at 93%
- FFY 2009 data was at 95%

Progress is a result of discussions between Care Coordinators and families regarding the philosophy and benefits to receiving services where their child lives, learns, and plays.

Completed Improvement Activities

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Review and revise the EI brochure and other relevant service delivery materials to include natural environments as part of the EI philosophy.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. The following statement was added to the EI brochure, “The following services are provided in locations where your child lives, learns and grows.” 2. Removed from the EI brochure is the statement “Services are at no cost” because Hawai’i has revised the section on Finances in the State Plan to allow for family cost participation.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

The proposed target indicated in the SPP for FFY 2010 (90%) will remain the same for FFY 2010, 2011, and 2012; however statewide data, rather than EIS data only, will be used to determine if the state meets the target.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
<p>Create a DVD for families about EI that staff may use as part of the intake process.</p>	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. There have been preliminary discussions with the HEICC member, who is also a University of Hawaii, Department of Special Education faculty, on utilizing a student project to help develop a DVD. 2. There have also been discussions with the DOE to utilize State Improvement Grant II (SIG II) funds to support the development of a DVD to support the understanding of early intervention. 3. Further discussion has occurred with the executive director for the Learning Disabilities Association of Hawai'i to partner with them in production of this DVD.
	<p>Justification:</p> <p>Due to budget cuts, there are no available funds to support creating DVDs. A Public Awareness workgroup will be created and will explore needed materials and what resources are already available that could be used in Hawai'i. Programs will continue to be trained on explaining natural environments.</p>

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support serving children in natural environments.

Resources:

Inclusion Project was removed as it was abolished due to budget cuts.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<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. 				X	X	X	X		<p>Completed to Date</p> <p>a. Under the direction and guidance of the EIS Quality Assurance Coordinator, the statewide percentage of services provided in the natural environment has increased from 93% to 95%.</p> <p>Continuing</p> <p>1. Additional investigation is on-going for programs experiencing difficulties in increasing their percentage of children served in natural environments.</p>	<p>Extend Timeline</p> <p>Due to budget cuts and the RIF process, there were changes in staff that impacted roles and responsibilities; therefore, more time is needed to complete this activity.</p>
<p><u>New</u></p> <p>Ensure documentation accurately reflects where services are being provided and the EIS database captures appropriate information regarding natural environments.</p>							X	X	<p>Completed to Date:</p> <p>1. IFSP instructions revised and distributed to clarify how to document when services are provided in multiple locations.</p> <p>2. Data validation of where services are primarily being provided was included as part of the SAM tool.</p>	<p>Due to budget cuts and furloughs, more services are being provided in multiple locations so guidelines and training must be developed to ensure documentation accurately reflects where services are being provided.</p>

Part C State Annual Performance Report (APR) for FFY 2008

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 2009		
Summary Statement		Target
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.	58%
2	Percent of children who were functioning within age expectations in Outcome A, by the time they exited.	82%
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.	70%
2	Percent of children who were functioning within age expectations in Outcome B, by the time they exited.	77%
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.	74%
2	Percent of children who were functioning within age expectations in Outcome C, by the time they exited.	74%

Actual Target Data for FFY 2009:

Actual Data for Part C Children Exiting in FFY 2009

Summary Statement		FFY 2009
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.	62.3%
2	Percent of children who were functioning within age expectations in Outcome A, by the time they exited.	82.9%

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.	73.7%
2	Percent of children who were functioning within age expectations in Outcome B, by the time they exited.	77.9%
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.	74.8%
2	Percent of children who were functioning within age expectations in Outcome C, by the time they exited.	77.7%

PROGRESS DATA FOR FFY 2009						
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	1/1120	0.1%	1/1120	0.1%	4/1120	0.45%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	133/1120	11.9%	160/1120	14.3%	168/1120	15.0%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	57/1120	5.1%	87/1120	7.8%	78/1120	7.0%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	164/1120	14.6%	364/1120	32.5%	432/1120	38.6%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	765/1120	68.3%	508/1120	45.4%	438/1120	39.1%

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 first 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 describes the child's progress and/or current status relative to typical development in the specific outcome area.

The rating is based on:

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

Who will report data to whom, in what form, and how often:

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 to analyze the change in development from entry to exit. For each goal area:

1. If the "Yes/No" question (which asks whether the child's functioning improved at all 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 2009:

Explanation of Progress

The current data on Child Outcomes shows an improvement across all outcomes from FFY 2008 to FFY 2009:

- Positive social emotional skills
 - a. Increased their rate of growth by exit improved by 4.3%
 - b. Functioning within age expectation by exit improved by 0.9%
- Acquisition and use of knowledge and skills
 - a. Increased their rate of growth by exit improved by 3.7%
 - b. Functioning within age expectation by exit improved by 0.9%
- Use of appropriate behaviors to meet needs
 - a. Increased their rate of growth by exit improved by 0.8%
 - b. Functioning within age expectations by exit improved by 3.7%

Progress may be due to training to program staff on what to consider in deciding the most appropriate rating as well as program staff feeling more comfortable in having discussions with parents regarding the ratings. As this is the first year to look at progress and/or slippage, it is unknown if this is a trend or something specific to this year. Data will continue to be analyzed for additional information.

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
Create a workgroup to determine how programs can use the data results to increase program effectiveness.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. A workgroup was created to determine how to use data to increase program effectiveness. 2. The EI Goals workgroup decided to meet on a quarterly basis or as needed to address any issues around Indicators 3 & 4.
Provide training in facilitation of team child rating process to Part C care coordinators.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Embedded in the Part C EI Orientation 2. Programs were informed that technical assistance and additional staff training is available from the Outcomes Coordinator.
Provide additional training and support to increase the number of exit ratings.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Staff has been informed via EI Orientations and Program Managers' meetings on the importance of completing the exit rating. 2. Reports generated by the EIS Database have been developed so that Programs are able to identify if there are any children who did not have an exit rating completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010

Proposed Targets

The proposed targets indicated in the SPP for FFY 2010 will remain the same for FFY 2010, 2011, and 2012. As the State is changing evaluation tools from the Hawaii Early Learning Profile (HELP) to the Battelle Developmental Inventory II in preparation for the possible change in eligibility, it is unclear if the change will have an impact on child outcome goals, especially if the State decides to use the Battelle to generate the ratings. Therefore until there is more information, the decision was not to revise the targets at this time.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Examine rating validity, compare child ratings to other developmental ratings of the same child and compare observations of rating process across programs.	<p>Completed to date:</p> <ol style="list-style-type: none"> 1. A process to examine rating validity was developed which compared ratings determined by the team based on the HELP with ratings generated by the VORT website. 2. Two Early Intervention programs and four Public Health Nursing Sections were chosen to pilot this process. If the rating was within one point of each other, it was considered valid; if the difference between ratings was more than one point, further discussion was needed.
	<p>Justification: The State is changing evaluation tools and will use the Battelle instead of the HELP.</p>

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for EI Family Goals.

Resources:

SIG II funds were removed as they are no longer available.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Part C LA will develop and disseminate exit guidelines. Guidelines will also be posted on the EIS website.				X	X	X			<p>Completed to Date</p> <p>1. Exit guidelines for EI Goals have been shared with Programs via e-mail.</p> <p>Continuing</p> <p>1. The exit guidelines will be up-dated in the FAQs on the EIS website.</p>	<p>Extend Timeline</p> <p>Once guidelines are reviewed, they will be posted on the web.</p>
Agency administrators will ensure that individual programs follow the Part C LA EI Goals exit guidelines.				X	X	X			<p>Completed to Date</p> <p>1. The LAQuAT Team has determined that a new State Priority “Completion of EI Goals” will be added to the monitoring tool so it will be monitored yearly. This will help ensure that the EI Goals exit guidelines are followed.</p> <p>Continuing</p> <p>1. “Completion of EI Goals” will be monitored in FFY 2010 as a State Priority.</p>	
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.					X	X			<p>Completed to Date</p> <p>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</p> <p>Continuing</p> <p>1. The new Evaluation Report is projected to be implemented in March 2011.</p> <p>2. The Outcomes Coordinator will participate in the Evaluation Report Workgroup.</p>	
<p><u>New</u></p> <p>Explore the possibility of using the Battelle to collect child outcome</p>						X	X			<p>With the impending adoption of the Battelle for evaluation and eligibility, data collection for child</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
data.										outcomes may be directly impacted. Further exploration is needed to determine if the Battelle or COSF will meet the needs of the State.

Part C State Annual Performance Report (APR) for FFY 2008

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)

Measurement:	<p>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.</p> <p>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.</p> <p>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>A. 835 families participating in Part C reported that early intervention services have helped the family know their rights. 910 families responded to the question regarding knowing their rights Percent = 835/910 = 91.8%</p> <p>B. 840 families participating in Part C reported that early intervention services have helped the family effectively communicate their children's needs. 911 families responded to the question regarding communicating their child's needs Percent = 840/911 = 92.2%</p> <p>C. 842 families participating in Part C reported that early intervention services have helped the family help their child develop and learn. 911 families responded to the question regarding helping their child develop and learn. Percent = 842/911 = 92.4%</p>

FFY	Measurable and Rigorous Target		
2009	A. 91.5%	B. 93.5%	C. 93.5%

Actual Target Data for FFY 2009

- Family Survey Results

Statewide Family Survey Results July 2009 – June 2010		
Family Goal	# *	%
A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights.	835/910	91.8%
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.	840/911	92.2%
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.	842/911	92.4%

*The denominator is based on the number of people who responded to the specific question on the survey. "A" was based on the responses to question 16, "B" was based on the responses to question 17, and "C" was based on the responses to question 18.

- Of the 1957 surveys that were distributed, 922 surveys were completed and returned for a 47% 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 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.

Family Goal	Length of Time in Program			
	0-6 mos.	6-12 mos.	1-2 yrs.	2+ yrs.
	FFY 2009	FFY 2009	FFY 2009	FFY 2009
Know their rights	90%	90%	94%	98%
Effectively communicate their children's needs	91%	93%	92%	96%
Help their children develop and learn	91%	93%	93%	96%

- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicators 4a and 4b) 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

Comparison by Ethnicity:

When analyzing data for representativeness by ethnicity, it is noted that 15% of returned surveys did not specify an ethnicity. After asking for clarification from the ECO representative at the APR Clinic on how to most accurately reflect the ethnicities of families who completed the survey, it was recommended to remove the number of surveys completed that did not specify an ethnicity from both the numerator and denominator. Once the adjustment was made, the difference between Child Count and Family Survey for the two largest ethnic groups is very minimal, at 2% and 3%.

- A higher percentage of Caucasian families completed the survey as compared to the percentage served (24% vs. 21%).
- A slightly lower percentage of Asian/Pacific Islander families completed the survey as compared to the percentage served (69% vs. 71%).
- The data suggests that those who completed their surveys are representative of the population served.

Ethnicity	FFY 2009		
	Child Count	Family Survey	Difference
Asian/Pacific Islander	71%	69%	-2%
Caucasian	21%	24%	3%

Because the data was determined to be representative, actual outcomes could be compared by the two primary ethnic groups represented in EI (Caucasian and Asian/Pacific Islander) and by the statewide total.

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

Family Goal	Asian/Pacific Islander	Caucasian	Statewide Total
Know their rights	93%	90%	92%
Effectively communicate their children's needs	91%	92%	91%

Family Goal	Asian/Pacific Islander	Caucasian	Statewide Total
Help their children develop and learn	92%	90%	92%

Comparison by County

When comparing the Family Survey return rates with the Child Count Data based on the County the child lives in, it appears that there were some differences in return rates. Based on the surveys returned:

- The most representative counties in survey completion were Hawaii and Kauai, with the difference between Child Count and returned surveys .97% and 1.73% respectively.
- The high number of surveys returned in Maui County was due to the time and effort of Imua Family Service staff to encourage families to return the surveys as all surveys (100%) were returned.
- One possible reason for the lowest percentage of returned surveys on Oahu is because there are more early intervention programs on Oahu and the level of encouragement to families to return their survey is unknown. The return rates for Oahu programs ranged from 25% to 55%.

County	Child Count		Family Survey		Difference
	#	%	#	%	%
Hawai'i	204	10%	83	9%	-1%
Honolulu	1520	74%	623	68%	-6%
Kauai	113	6%	35	4%	-2%
Maui	208	10%	181	20%	10%
Statewide	2045	100%	922	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:

- Families in Maui County rated all Family Goals overall higher than other counties with the exception of "Help their children develop and learn," which was the same as Hawaii County.
- Although results were higher in Maui County, it does not seem to significantly impact statewide results, as statewide totals more closely resemble Honolulu totals, which serves the largest population.
- The biggest discrepancy between survey results by county is between Kauai and Maui. Possible reasons could be due to:
 - Kauai serves a smaller population than Maui.
 - Kauai's return rate was 37% whereas Maui's return rate was 100%.

Family Goal	Hawai'i	Honolulu	Kauai	Maui	Statewide
Know their rights	93%	91%	89%	96%	92%
Effectively communicate their children's needs	95%	91%	91%	96%	92%
Help their children develop and learn	96%	91%	94%	96%	92%

Comparison by Age

When comparing the Family Survey return rates with the Child Count Data based on the age of the child, it appears that the difference was statistically insignificant for all age ranges.

- Birth- Age 1: 12% served; 11% surveys returned.
- Age 1-2: 31% served; 33% surveys returned.
- Age 2-3: 57% served; 56% surveys returned.

Age	Child Count		Family Survey		Difference
	#	%	#	%	
None	0	0%	3	0%	0%
Birth-1	238	12%	105	11%	-1%
1-2	643	31%	302	33%	2%
2-3	1164	57%	512	56%	-1%
Total	2045	100%	922	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:

- Question 16 (Know their rights): 92% agreed for all 3 age groups.
- Question 17 (Effectively communicate their children's needs): There was a variance of only 3%, with a range from 91% (Ages 1-2) to 94% (Age Birth-Age 1). Typical needs of an infant are well within the parameters that parents are comfortable providing, and developmental demands are only slowly beginning to increase. Families may feel very comfortable communicating the needs of both their child and family at this point. Between 1 and 2 years of age, children may begin to exhibit frustration as their demands are increasing, their developmental abilities may begin to show delays, and their parents are at a loss as to how to best help their child without knowing what exactly their child needs. As the child ages, parents become much more comfortable in their role as their child’s advocate and have a much better understanding of how to communicate these needs.
- Question 18 (Help their children develop and learn): There was a variance of 4%, with a range from 91% (Ages 1-2) to 95% (Birth-Age 1). The responses may be due in part to the fact that the younger the child is, the less is needed in respect to helping them learn and develop. As the child ages, demands grow, with many “milestones” that parents look for (talking, walking) typically occurring during the 1-2 year age period. Once the child reaches 2-3 years old, many of the children will have met these milestones, and parent satisfaction increases.

Age	#	q16	q17	q18
None	3	100%	100%	100%
Birth-1	105	92%	94%	95%
1-2	302	92%	91%	91%
2-3	512	92%	93%	93%
Total	922	92%	92%	92%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2009:

Explanation of Progress and Slippage

Although the targets were not met for Family Goals B and C (listed below), results improved for both Goals A (89.8% to 91.8%) and B (92.0% to 92.2%) and remained the same for Goal C.

Family Goal	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009
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%
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%
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%

NOTE: The survey tool was changed in 2006 and continued to be used for subsequent years.

Explanation of Progress

- The current data for Family Goal A (Know Their Rights) shows an improvement of 2% from FFY 2008 to FFY 2009, from 90% to 92%. The target of 91.5% was exceeded for this outcome.

Progress may be due to program staff explaining family rights more consistently to families. This is consistent with EIS data collected under the Hawai'i Priority Areas for Procedural Safeguards as there was improvement in the following areas: FERPA, "Dear Family", and Written Prior Notice.

- The current data for Family Goal B (Effectively Communicates Their Needs) remained consistent from FFY 2008, showing just a slight .2% increase.

Information on the importance of encouraging families to communicate their needs is included in the EI Orientation. Therefore the consistency of the data for this family goal may be due to the fact that all new staff, including all staff of the 2 new EIS programs, was provided training in this information during their orientation.

- The current data for Family Goal C (Help Family Help Children Develop and Learn) also remained consistent for both years at 92.4%.

Information on the importance that families help their children develop and learn is included in the EI Orientation. Therefore the consistency of the data for this family goal may be due to the fact that all new staff, including all staff of the 2 new EIS programs, was provided training in this information during their orientation.

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
Identify variables to analyze to determine if the data is statistically representative of the state's Part C population. Based on the statistical significance of the data, strategize how to increase return rates by specific variables.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Last year's APR focused on the variables of ethnicity and county of residence to determine if the data was representative of the Part C population. 2. This year's APR also included the variables of age to determine if the data was representative of the Part C population. 3. Three variables have been identified and included in this year's APR to examine representativeness of the State Population and will be continued to be analyzed in future APRs.
Develop strategies for targeted programs and targeted counties with low return rates and less positive response rates to both increase their return rates and increase the percentages of positive responses if the differences are statistically significant.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. A workgroup has been created to support this Improvement Activity. 2. Programs that do not meet the target for this Indicator has to include improvement activities in their CAP to try to improve their percentages.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

The proposed targets indicated in the SPP for FFY 2010 will remain the same for FFY 2010, 2011, and 2012. The State will be exploring the option of switching to the new family survey developed by ECO in FFY 2011; the impact of the using the new family survey is unknown. Therefore until there is more information, the decision was not to revise the targets at this time.

New Improvement Activities:

The following table new improvement activities to support compliance for EI Family Goals.

Resources:

SIG II funds were removed as they are no longer available.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p><u>New</u> Explore the revised ECO Family Outcome Survey (FOS) to see if this format should be adopted for future use.</p>						X	X			<p>The revised Family Outcomes Survey contains more detailed questions for both the family outcomes and helpfulness of early intervention. Instead of only one question per indicator, each indicator has been broken out into at least five more specific questions that better address each area. The new format gives programs more information that can assist them in providing better services for children and families. The current Child Outcomes workgroup will add this to their agenda</p>
<p><u>New</u> 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.</p>						X	X			<p>The number of surveys in which families did not answer the ethnicity question increased from 2.28% in FFY 2008 to 14.86% in FFY 2009. One possible reason might be that families are very hesitant to identify only one ethnicity, when in reality, most of the families served have</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
										multiple ethnicities. Being able to capture this information from the database would give the State the ability to monitor return rates throughout the collection period, follow up with families who have not returned surveys and simplify the survey.

Part C State Annual Performance Report (APR) for FFY 2008

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: 238 of infants and toddlers birth to 1 with IFSPs 18,673 population of infants and toddlers birth to 1 Percent = 238/18,673 = 1.27%</p>

FFY	Measurable and Rigorous Target
2009	2.97%

Actual Target Data for FFY 2009:

As reported in the APR submitted in February 2010, the target “including at-risk” was deleted as Hawai'i removed the “Environmental Risk” eligibility category on May 4, 2009. The targets previously established in the SPP for the population “excluding at-risk” became the revised target.

- Compared to National Data (based on OSEP 2009 data tables):
The following compares Hawai'i's percentage served with national data:
 - The national average for all states including Washington D.C. is 1.03%. Hawai'i surpassed the national average for infants and toddlers birth to 1 with IFSPs by .24%.
 - Hawai'i was ranked 17th, as it served 1.27% (238 of 18,673) of infants and toddlers birth to 1 with IFSPs.
- Although the current data does not reach the proposed target, Hawai'i's data is above the national average of 1.03%.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:

Explanation of Progress

The current data on percent of infants and toddlers birth to 1 with IFSPs compared to the national data shows progress of 0.01% from FFY 2008 to FFY 2009, from 1.26% to 1.27%.

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

- FFY 2005 data was at 2.41%
- FFY 2006 data was at 1.97%
- FFY 2007 data was at 1.26%
- FFY 2008 data was at 1.26%
- FFY 2009 data was at 1.27%

The slight progress (increase by 0.01%) may be due to the community events that the Public Awareness Specialist attended throughout the year. EIS regularly attends health fairs and other activities and provides information about early intervention. The data will continue to be tracked to determine if there is a new trend in the percentage of infants and toddlers between 0-1 with IFSPs and if there is an impact in percentage served after the change in eligibility for infants and toddlers with developmental delays is implemented.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010:

Proposed Targets

Although the percentage served continued to be below the target, the target will remain at 3% for FFY 2010, 2011 and 2012 until the recommended change in eligibility for infants and toddlers with developmental delay is implemented and more data is available to determine if the target needs to be changed.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Identify other public awareness materials needed, including new brochures, posters, displays, etc. to support increased referrals.	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. The H-KISS, Family Rights (formerly known as “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese. 2. New EI public outreach displays were created and have been utilized at conferences and festivals targeting families. <p>Continuing:</p> <ol style="list-style-type: none"> 1. A poster for use in Pediatricians’ offices and a variety of giveaway materials such as pencils, magnets, and stickers with H-KISS contact information will be developed. <p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include</p>

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
	<p>DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
<p>Work with the American Academy of Pediatrics and other Pediatric organizations to design an educational activity to incorporate into doctors’ professional improvement requirements to target doctors (both pediatricians and family practice physicians)</p>	<p>Continuing</p> <p>1. Discussions with the HEICC representative from the American Academy of Pediatrics have been initiated occurred and the formulation of a plan to create such an educational activity is forthcoming.</p>
	<p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
<p>Review existing videos to determine what could be included in the DVD.</p>	<p>Completed to Date:</p> <p>No progress to date. The resignation of the previous Public Awareness Specialist impacted progress on this activity.</p>
	<p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
<p>Create a DVD at 4th grade level comprehension to</p>	<p>Completed to Date:</p> <p>No progress to date. There are no longer any funds available to develop a DVD.</p>

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
provide an overview of Early Intervention.	<p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
Identify other public awareness materials needed, including new brochures, posters, displays, etc. to support increased referrals.	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. The H-KISS, Family Rights (formerly known as “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese. 2. New EIS public outreach displays were created and have been utilized at conferences and festivals targeting families. <p>Continuing:</p> <ol style="list-style-type: none"> 1. A poster for use in Pediatricians’ offices and a variety of giveaway materials such as pencils, magnets, and stickers with H-KISS contact information will be developed.
	<p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support Child Find.

Revised Resources:

SIG II funds were removed as it is no longer available.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Review Hawai'i's Part C eligibility criteria for continued appropriateness.		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. <p>Continuing:</p> <ol style="list-style-type: none"> It was determined that Administrative Rules must be completed and approved and additional public hearings be held on the changes. Only after the process is completed can eligibility changes for developmental delay be implemented. Rules have been drafted; EIS is working with the Deputy Attorney General for the DOH to finalize the rules. 	<p>Extend Timeline</p> <p>The timeline has been extended to 2012 as it is unknown when the Administrative Rules will be completed and approved and when additional public hearings will be held.</p>
Provide information on early intervention services to pre-natal teenage mothers and teenage mothers in the following geographical				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. 	<p>Extend timeline</p> <p>The timeline has been extended to 2012, because with the change of staff in the Public</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
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									<ul style="list-style-type: none"> • Hawai'i Island: Kona, Nalehu, Pahala, Puna, Oceanview, Waikaloa. • Maui: Island-wide <p>Continuing:</p> <p>1. 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:</p> <ul style="list-style-type: none"> • Oahu: Chinatown, Waipahu, Waimanalo 	Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity with input from DOH's Maternal Child Health Section.
Provide information on EI services to OB/GYNs and midwives across the state so they can be placed in their office lobbies and distributed to expectant mothers.				X	X	X	X	X		<p>Extend timeline</p> <p>The timeline has been extended to 2012, because with the change in staff in the Public Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity with input from the Newborn Hearing Screening Project.</p>
Partner with non-Part C programs to increase their awareness about Part C so they will refer potentially eligible Part				X	X	X	X	X	<p>Completed to Date:</p> <p>1. EIS continues to partner with the following non-Part C programs and organizations to educate both the organizations and the communities they serve regarding</p>	<p>Extend timeline</p> <p>The timeline has been extended to 2012, because with the change in staff</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
C children to EI.									<p>Early Intervention Services:</p> <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 services. • 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. • Participated in teacher in-services with community preschools 	<p>in the Public Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity.</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					X	X	X	X	<p>Continuing</p> <ol style="list-style-type: none"> 1. A preliminary discussion occurred with the Family Health Services Division's medical consultant on the need to update pediatricians and other primary care physicians on changes in the early intervention system, including changes in eligibility and provision of services. 2. On-going meetings will be scheduled to support increased knowledge of Part C referral sources. For example, a meeting will be scheduled with the FHSD Medical Consultant, Hawaii's AAP representative (who is on the HEICC), a developmental pediatrician and the HEICC Co-Chairs to help identify strategies to increase knowledge of pediatricians on changes in Hawaii's Part C program. 	<p>Extend timeline</p> <p>There was a change in staff for the Public Awareness position; therefore, additional time is needed to support this activity. The Public Awareness Committee would also support this activity.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p><u>New</u> 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 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.</p>						X	X			With the reduction of funds for EIS, cost effective strategies need to be developed.
<p><u>New</u> Review and identify Public Awareness strategies used by other states that may be successful in Hawai'i.</p>							X			With the reduction of funds for EIS, cost effective strategies need to be developed.

Part C State Annual Performance Report (APR) for FFY 2008

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:</p> <p>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:</p> <p>2080 of infants and toddlers birth to 3 with IFSPs.</p> <p>55,055 population of infants and toddlers birth to 3</p> <p>Percent = 2080/55,055 = 3.78%</p>

FFY	Measurable and Rigorous Target
2009	4.44%

Actual Target Data for FFY 2009:

As reported in the APR submitted in February 2010, the target “including at-risk” was deleted as Hawaii removed the “Environmental Risk” eligibility category on May 4, 2009. The targets previously established in the SPP for the population “excluding at-risk” became the revised target.

- Compared to National Data (based on OSEP 2009 data tables)

The following compares Hawaii’s percentage served with national data:

- The national average for all states including Washington D.C., is 2.67%. Hawaii surpassed the national average for infants and toddlers birth to 3 by 1.11%.
- Hawaii was ranked 10th (tied with Connecticut), as it served 3.78% (2080 of 55,055) of infants and toddlers birth to 3 with IFSPs.
- Although the current data does not reach the proposed target, Hawaii’s data is above the national average of 2.67%.
- Additional Data - By Island 2007 to 2009:

A comparison served by island found that although there were some differences between the percent of children served from 2007-2009, the only somewhat significant changes were on the islands of Oahu (decrease of 1.2%) and Hawaii (1.2%). The decrease may be due to budgetary issues in the state which resulted in the following:

- Two State early intervention programs closed in 2009 (one on Oahu and one on the island of Hawaii) and although they were replaced by private Purchase of Service (POS) programs, the transition may have impacted the referrals (especially on the island of Hawaii).
- PART C LA held public hearings to recommend a change in eligibility which would reduce the number of children eligible for early intervention. Although the change has not yet occurred, PART C LA was recently informed that some physicians were under the impression that eligibility had changed, which may have reduced the referrals (especially on Oahu).

The follow table compares the percentage of children, 0-3, served by county for FFY 2007 – FFY 2009:

	2007	2008	2009
Oahu	5%	4.9%	3.95%
Hawaii	4%	3.9%	2.85%
Maui	4%	3.7%	3.45%
Kauai	5%	4.2%	4.45%
Statewide	3.74%	3.77%	3.78%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:

Explanation of Progress

The current data on percent of infants and toddler birth to 3 with IFSPs compared to the national data shows progress of 0.01% from FFY 2008 to FFY 2009, from 3.77% to 3.78%. In looking at trend data over the past 5 years, there was a decrease from FFY 2005 – 2007 (from 4.3% to 3.74%) and then a slight increase from FFY 2007 – FFY 2009 (3.74% to 3.78%).

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

- FFY 2005 data was at 4.3%
- FFY 2006 data was at 3.2%
- FFY 2007 data was at 3.74%
- FFY 2008 data was at 3.77%
- FFY 2009 data was at 3.78%

The slight progress (increase by 0.01%) may be due to the community events that the Public Awareness Specialist attended throughout the year. EIS regularly attends health fairs and other activities and provides information about early intervention. The data will continue to be tracked to determine if there is a new trend in the percentage of infants and toddlers between 0-3 with IFSPs and if there is an impact in percentage served after the change in eligibility for infants and toddlers with developmental delays is implemented.

Completed Improvement Activities

There were no improvement activities completed at this time.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010:

Proposed Targets

Although the percentage served continued to be below the target, the target will remain the same at 4.45% for FFY 2010, 2011 and 2012 until the recommended eligibility for infants and toddlers with developmental delay is implemented and more data is available to determine if the target needs to be changed.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Identify other public awareness materials needed, including new brochures, posters, displays, etc. to support increased referrals.	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. The H-KISS, Family Rights (formerly known as “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese. 2. New EI public outreach displays were created and have been utilized at conferences and festivals targeting families. <p>Continuing:</p> <ol style="list-style-type: none"> 1. A poster for use in Pediatricians’ offices and a variety of giveaway materials such as pencils, magnets, and stickers with H-KISS contact information will be developed.
	<p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
Work with the American Academy of Pediatrics and other Pediatric organizations to design an educational activity to incorporate into doctors’ professional	<p>Continuing</p> <ol style="list-style-type: none"> 1. Discussions with the HEICC representative from the American Academy of Pediatrics have been initiated occurred and the formulation of a plan to create such an educational activity is forthcoming.
	<p>Justification:</p> <p>A new improvement activity was developed that will subsume this specific</p>

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
improvement requirements to target doctors (both pediatricians and family practice physicians)	activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.
Review existing videos to determine what could be included in the DVD.	<p>Completed to Date: No progress to date. The resignation of the previous Public Awareness Specialist impacted progress on this activity.</p>
	<p>Justification: A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
Create a DVD at 4 th grade level comprehension to provide an overview of Early Intervention.	<p>Completed to Date: No progress to date. There are no longer any funds available to develop a DVD.</p>
	<p>Justification: A new improvement activity was developed that will subsume this specific activity. It is: “Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.” The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.</p>
Identify other public awareness materials needed, including new brochures, posters,	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. The H-KISS, Family Rights (formerly known as “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano,

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
displays, etc. to support increased referrals.	Tagalog, Korean, and Japanese.
	2. New EI public outreach displays were created and have been utilized at conferences and festivals targeting families. Continuing: 1. A poster for use in Pediatricians' offices and a variety of giveaway materials such as pencils, magnets, and stickers with H-KISS contact information will be developed.
	Justification: A new improvement activity was developed that will subsume this specific activity. It is: "Develop a Public Awareness Committee, to be chaired by the Public Awareness Specialist, to identify and develop the most appropriate methods of public awareness to increase referrals to EI. This may include DVDs, YouTube for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc." The Public Awareness Committee would consist of various community members, including pediatricians, community members (e.g., PHNs), EIS program staff, H-KISS and would help develop a plan and specific strategies to support increased referrals to EI. With the reduction of funds for EI, cost effective strategies need to be developed. A thorough review of strategies used by other states will help identify successful strategies that Hawaii should consider.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support Child Find.

Revised Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Review Hawai'i's Part C eligibility criteria for continued appropriateness.		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. <p>Continuing:</p> <ol style="list-style-type: none"> It was determined that Administrative Rules must be completed and approved and additional public hearings be held on the changes. Only after the process is completed can eligibility changes for developmental delay be implemented. Rules have been drafted; PART C LA is working with the Deputy Attorney General for the rules to be finalized. 	<p>Extend Timeline</p> <p>The timeline has been extended to 2012 as it is unknown when the Administrative Rules will be completed and approved and when additional public hearings will be held.</p>
Provide information on early intervention services to pre-natal teenage mothers and teenage mothers in the following geographical				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. 	<p>Extend timeline</p> <p>The timeline has been extended to 2012, because with the change of staff in the Public</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
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									<ul style="list-style-type: none"> • Hawai'i Island: Kona, Nalehu, Pahala, Puna, Oceanview, Waikaloa. • Maui: Island-wide <p>Continuing:</p> <ol style="list-style-type: none"> 1. 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 	Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity with input from DOH's Maternal Child Health Section.
Provide information on EI services to OB/GYNs and midwives across the state so they can be placed in their office lobbies and distributed to expectant mothers.				X	X	X	X	X		<p>Extend timeline</p> The timeline has been extended to 2012, because with the change in staff in the Public Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity with input from the Newborn Hearing Screening Project.
Partner with non-Part C programs to increase their awareness about Part C so they will refer potentially eligible Part				X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> 1. EIS continues to partner with the following non-Part C programs and organizations to educate both the organizations and the communities they serve regarding Early Intervention Services: 	<p>Extend timeline</p> The timeline has been extended to 2012, because with the change in staff

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
C children to EI.									<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 services. • 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. • Participated in teacher in-services with community preschools 	in the Public Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity.
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					X	X	X	X	<p>Continuing</p> <ol style="list-style-type: none"> 1. A preliminary discussion occurred with the Family Health Services Division's medical consultant on the need to update pediatricians and other primary care physicians on changes in the early intervention system, including changes in eligibility and provision of services. 2. On-going meetings will be scheduled to support increased knowledge of Part C referral sources. For example, a meeting will be scheduled with the FHSD Medical Consultant, Hawaii's AAP representative (who is on the HEICC), a developmental pediatrician and the HEICC Co-Chairs to help identify strategies to increase knowledge of pediatricians on changes in Hawaii's Part C program. 	<p>Extend timeline</p> <p>The timeline has been extended to 2012 because with the change in staff in the Public Awareness position, additional time is needed to support this activity. The Public Awareness Committee would also support this activity.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p><u>New</u> 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 methods of public awareness to increase referrals to EIS. This may include DVDs, U-Tubes for website, consumable products (e.g., pencils, magnets), posters, Public Service Announcements, etc.</p>						X	X			With the reduction of funds for EI, cost effective strategies need to be developed.
<p><u>New</u> Review and identify Public Awareness strategies used by other states that may be successful in Hawai'i.</p>							X			With the reduction of funds for EI, cost effective strategies need to be developed.

Part C State Annual Performance Report (APR) for FFY 2008

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 evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting 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>1971 infants and toddlers received an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline</p> <p>2004 infants and toddlers with IFSPs</p> <p>Percent = 1971/2004=98%</p> <p>41 infants and toddlers did not have a timely IFSP due to untimely evaluations. Of the 41 untimely evaluations, 37 were due to exceptional family circumstances and 4 were due to program reasons.</p>

FFY	Measurable and Rigorous Target
2009	100%

Actual Target Data for FFY 2009:

Statewide data for 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 was collected from Agency data systems for the period 7/1/09 – 6/30/10. The timelines were from the date of referral to the initial IFSP meeting and were based on actual, not an average, number of days.

- 1971 of 2004 (98%) of infants and toddlers received an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline.
- Untimely Evaluations: 41 of the 391 (10%) infants and toddlers did not have an Initial IFSP meeting within Part C’s 45-day timeline due to untimely evaluations. Of the 41 untimely evaluations, 37 (90%) were due to exceptional family circumstances and 4 (10%) were due to program reasons.

- Exceptional Family Circumstances: 358 of the 2004 (18%) infants and toddlers did not have an initial IFSP meeting within Part C’s 45-day timeline due to exceptional family circumstances as defined by IDEA Part C. They are included in both the above numerator and denominator. Only 10% (37 of the 358 late IFSPs due to exceptional family reasons) were due to untimely evaluations. The following are the two predominate exceptional family circumstances:
 - Cancelled Appointment
 - Schedule Conflict

- Program Reasons. 33 of the 2004 (2%) infants and toddlers did not have an initial IFSP meeting within Part C’s 45-day timeline due to program reasons. Only 12% (4 of the 33 late IFSPs due to program reasons) were due to untimely evaluations. The following are the two predominate program reasons:
 - Schedule Full
 - Medical (staff sick)

- Identifying Noncompliance. Of the 33 infants and toddlers who did not receive an evaluation and assessment and an initial IFSP meeting within Part C’s 45-day timeline, all 33 (100%) infants and toddlers received an evaluation and assessment and had an initial IFSP meeting, although untimely.

Range of Days Beyond the 45-day timeline to Receive an Evaluation and Initial IFSP		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	27	82%
31-60 days	4	12%
61-90 days	1	3%
> 90 days	1	3%

- The state accounted for all instances of noncompliance identified via the EI Agency Database. There were 13 programs serving the 33 children who did not receive an evaluation and assessment and an initial IFSP meeting within Part C’s 45-day timeline.
 - 8 of the 13 programs were issued findings. 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 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 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.

- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicators 1a, 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 identified via the EI Agency Database. All Programs were notified in writing of any noncompliance and that they must 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 (date of written notification).

Prong 1

The status of child specific correction was included in previous APRs target data. It included the percentage of children that received an 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)(2), 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 Agency Administrators verified what the Program/Sections submit and ensured that the Program/Section submitted required evidence of correction documentation based on the percentage of noncompliance. Part C LA verifies the data submitted in the Agency Monthly report.

Status of Correction

FFY 2008

- 7 programs were notified of findings for Timely Evaluation and Assessment and Initial IFSPs in FFY 2008 based on FFY 2007 data (See Table 2, Correction of Noncompliance Identified in FFY 2008 by SPP/APR Indicators and Hawai'i Monitoring Priorities in Indicator 9) and all were verified as corrected within one year.

Root Causes

- Insufficient Staffing: Staff time constraints due to furloughs and vacant positions.

- o Part C LA provided training to Program Managers on how to utilize reports in the database as ticklers for due dates and program planning/improvement.

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

Correction of Noncompliance for Indicator 7 – Evaluation and 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	To be reported in the FFY 2010 APR to be submitted in 2012				

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:

Explanation of Progress:

The current data on timely evaluations and assessment and initial IFSP meetings shows a 1% progress from FFY 2008 to FFY 2009.

- FFY 2005 compliance was at 98%.
- FFY 2006 compliance was at 98%.
- FFY 2007 compliance was at 97%
- FFY 2008 compliance was at 97%
- FFY 2009 compliance was at 98%

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
Require Programs with late IFSPs due to “late MDEs” to identify the root causes and embed strategies in their CAP.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. New Database reports developed and distributed on 5-29-09. 2. Staff is to enter reasons for late MDE. 3. Staff can easily query reasons for late MDE, develop strategies to reduce late MDEs and include in their CAPs. 4. The CAP template was revised to include a section for “Root Causes.”

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

Because this is a compliance indicator; the target will remain at 100% for FFY 2010, 2011, and 2012.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Post documentation training module on the web.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. The CSPD position was filled 1/4/2010 so this activity can be initiated. 2. A draft has been completed <hr/> Justification: The information on the documentation is not a stand alone module. It has been developed to be embedded into the Part C EI Orientation and the EI Refresher Course.
Develop checklists to be used in the Intake process to identify the child’s profile so that an appropriate evaluation team will complete the MDE.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Programs utilize weekly team meetings to discuss new referrals and child’s needs so that appropriate evaluation teams are in place 2. Care Coordinators gather information during the intake process with the family to help their teams determine appropriate evaluation team <hr/> Justification: Programs have a mechanism to determine the appropriate evaluation team.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for Timely Evaluations and Assessment and Initial IFSPs.

Revised Resources:

There are no new resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Develop a training module to address required and acceptable documentation.				X	X	X			<p>Completed to Date</p> <ol style="list-style-type: none"> The CSPD position was filled 1/4/2010 so this activity can be initiated. A draft has been completed <p>Continuing</p> <ol style="list-style-type: none"> Will be included in the Part C EI Orientation 	
Embed the documentation training module into the mandatory EI Orientation Training.					X	X			<p>Completed to Date</p> <ol style="list-style-type: none"> The CSPD position was filled 1/4/2010 so this activity can be initiated. A draft has been completed 	
<p><u>New</u></p> Embed information about the BDI into the mandatory EI Orientation Training.						X	X			The EI Orientation will be updated to include information on the BDI-II.

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to the Lead Educational Agency (LEA), if child potentially eligible for Part B (DOE); and
- C. Transition conference, if child potentially eligible for Part B.

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

<p>Measurement:</p> <ul style="list-style-type: none"> A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100. B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100. C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100. <p>Account for untimely transition conferences, including reasons for delays.</p>
<p>Applied:</p> <ul style="list-style-type: none"> A. 1041 children exiting Part C who have an IFSP with transition steps and services 1059 children who exited Part C Percent 1041/1059 = 98% B. 706 children exiting Part C and potentially eligible for Part B where timely notification to the LEA occurred 738 children exiting Part C who were potentially eligible for Part B Percent = 706/738 = 96% C. 371 children exiting Part C where the <u>timely</u> transition conference occurred 399 children exiting Part C where the transition conference occurred Percent = 371/399 = 93%

FFY	Measurable and Rigorous Target
2009	100%

Actual Target Data for FFY 2009:

Statewide data for the Transition Plan, Transition Notice and the Transition Conference for all children who exited Part C in FFY 2009 was collected from Agency data systems for the period 7/1/09-6/30/10.

- Transition Plan
 - 1041 of 1059 (98%) 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.
 - 18 of the 1059 (2%) 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 8 programs serving the 18 children who did not have a timely and complete Transition Plan in their IFSP with steps and services.
 - 7 of the 8 programs were issued findings
 - 1 of the 8 programs was 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. The program is now correctly implementing the timely and complete transition plans requirement.

- Transition Notice
 - 706 of 738 (96%) 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: 396 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 declines for a Transition Conference, an Improvement Activity has been developed to investigate why there are so many declines.

- Program Reasons: 32 of 738 (4%) 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 or when the child is eligible to begin DOE. 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 32 children exiting without timely notification to the LEA, notification was provided to the LEA for 13 of these children, although untimely.

Range of Days, Beyond the Requirement of 90 Days Prior to the Child Exiting Part C, that Notification to the LEA was Provided		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	7	54%
31-60 days	4	31%
61-90 days	2	15%
>90 days	0	0%

- For the 19 children remaining, records had insufficient documentation to determine if a Transition Notice was completed and sent to the LEA.
- There were 14 programs serving the 32 children who exited Part C with either untimely notification to the LEA or insufficient documentation that notification to the LEA was provided:
 - 10 of the 14 programs were issued findings
 - 4 of the 10 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. Programs are now correctly implementing the requirement of notifying the LEA of children who are potentially eligible for DOE.

- 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.

- 371 of 399 (93%) 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.
- 710 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, an Improvement Activity has been developed to investigate why there are so many declines.
- Exceptional Family Circumstances: 42 of 399 (11%) 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 pre-dominate exceptional family circumstance was that the family initially “opted out” of sending the Transition Notice and then changed their mind

- o Program Reasons: 28 of 399 (7%) children exiting Part C did not have a timely Transition Conference due to program reasons. The pre-dominate program reason was that the staffs schedule was full.
- o Of the 28 families that did not receive a timely Transition Conference, 8 received a Transition Conference, although untimely.

Range of Days, Beyond the Requirement of 90 Days Prior to the Child Exiting Part C, that the Transition Conference was Held		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	7	88%
31-60 days	1	12%
61-90 days	0	0%

- o There were 20 children who exited Part C with insufficient documentation that the Transition Conference occurred.
- o There were 13 programs serving the 28 children who exited Part C with either an untimely Transition Conference or there was insufficient documentation that the Transition Conference occurred:
 - 8 of the 13 programs were issued findings
 - 5 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. Programs are now correctly implementing the transition conference requirements for all infants and toddlers.
- o 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 identified via the EI Agency Database for the transition plan, LEA notification, and transition conference. All Programs were notified in writing of any noncompliance and that they must 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 (date of written notification).

Prong 1

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, 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) and 303.344(h) (for 8A); 34 CFR § 303.148(b)(1) (for 8B); and 34 CFR § 303.148(b)(2)(i) as modified by IDEA section IDEA section 637(a)(9)(A)(ii)(I) (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 Agency Administrators verified the data submitted by the Program/Sections and ensured that the Program/Section submitted required evidence of correction documentation based on the percentage of noncompliance. PART C LA verifies the data submitted in the Agency Monthly report.

Status of Correction

Transition Plan

FFY 2008

- Eight programs were notified of findings for Transition Plan in FFY 2008 (See Table 1b in Indicator 9); all were verified as corrected within one year of notification.

Root Causes

- Some staff were still unclear what constituted a “complete” transition plan
 - Part C LA provided clarification on what constituted a “complete” transition plan
 - Part C LA revised IFSP instructions to provide clearer guidelines

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

Correction of Noncompliance for Indicator 8A: Transition Plan with Steps and 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	3	3	0	3	0
FFY 2006	FFY 2007	8	8	0	8	0
FFY 2007	FFY 2008	8	8	0	8	0
FFY 2008	FFY 2009	To be reported in FFY 2010 APR to be submitted in 2012				

Transition Notice

FFY 2008

- Two programs were notified of findings for the Transition Notice in FFY 2008 (See Table 2b in Indicator 9); all were verified as corrected within one year of notification by reviewing up-dated data and ensuring that all child specific noncompliance was corrected.

Root Causes

- Some staff thought that they needed to meet with the family to complete the form
 - PART C LA provided clarification on Transition Notice procedures
- Insufficient Documentation
 - Staff time constraints due to furloughs and vacant positions impact having time to complete adequate documentation
 - Staff unclear on documentation requirements

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

Correction of Noncompliance for Indicator 8B: Transition Notice						
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	0	0	0	0	0
FFY 2006	FFY 2007	8	7	1	8	0
FFY 2007	FFY 2008	2	2	0	2	0
FFY 2008	FFY 2009	To be reported in FFY 2010 APR to be submitted in 2012				

Transition Conference

FFY 2008

- Four programs were notified of findings for Transition Conference in FFY 2008 (See Table 2b in Indicator 9); all were verified as corrected within one year of notification.

Root Causes

- Insufficient Staffing: Staff time constraints due to furloughs and vacant positions
 - Part C LA provided training to Program Managers on how to utilize reports in the database as ticklers for due dates and program planning/improvement.
- Insufficient Documentation
 - Staff time constraints due to furloughs and vacant positions impact having time to complete adequate documentation
 - Staff unclear on documentation requirements

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

Correction of Noncompliance for Indicator 8B: Transition Notice						
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	0	0	0	0	0
FFY 2006	FFY 2007	14	14	0	14	0
FFY 2007	FFY 2008	4	4	0	4	0
FFY 2008	FFY 2009	To be reported in FFY 2010 APR to be submitted in 2012				

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:

Explanation of Progress and Slippage:

FFY	Transition Plan	Transition Notice	Transition Conference
2005	99%	100%	94%
2006	99%	100%	96%
2007	97%	99%	97%
2008	99%	91%	94%
2009	98%	96%	93%

Explanation of Progress:

Transition Notice

- The current data from Timely Transition Notice shows an increase of 5% from FFY 2008 to FFY 2009, from 91% to 95%. Clarification provided to the Program regarding Transition Notice Protocols appears to have had a positive impact on providing timely notification to the LEA.

Explanation of Slippage:

Transition Plan

- The current data on Timely Transition Plans shows a slippage of 1% from FFY 2008 to FFY 2009, from 99% to 98%. The decrease is minimal and a true comparison cannot be made as the data are from two different sources. FFY 2008 data was collected from the Self Assessment Monitoring (SAM) tool, as the new EIS database was not completed until July 2009. For FFY 2009, data was collected from the EIS database and the PHNB database.

Transition Conference

- The current data on Timely Transition Conferences shows a slippage of 1% from FFY 2008 to FFY 2009, from 94% to 93%. The decrease is minimal. Sufficient documentation continues to be a challenge especially with furloughs and the RIF that was implemented.

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
<p>Provide written information to families on DOE preschool special education eligibility requirements to support families to better understand their options.</p>	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. The <u>STEPS to Transition Guide</u> developed by the Hawai'i STEPS Project has been shared with families. 2. The "Path to Transition" handout was developed to share with families that outline referral steps from Part C to Part B. 3. Community STEPS teams have updated/revised transition materials to share with families in their communities. This includes written information on what documents are needed for registration and enrollment at the Department of Education schools, a checklist of practical tips for parents on preschool transition, and recommended readings that support children in transition. 4. Written material was provided at Annual Parent/Child Fairs designed to inform families of available options in the community. 5. The "Comparison of the Individuals with Disabilities Education Act (IDEA) Part C and Part B" handout was developed in March 2009 to share with families. It outlines the differences between Part C and Part B. 6. Written material was provided to families at the SPIN Annual Conference in April 2009.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Explore the current implementation of the Transition Notice protocol and address any inconsistencies discovered.	Completed to Date: 1. Clarification provided to the Programs regarding Transition Notice protocols.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100% for FFY 2010, 2011, and 2012.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Post documentation training module on the web.	Completed to Date: 1. The CSPD position was filled 1/2/2010 so this activity can be initiated 2. A draft has been completed
	Justification: The required and acceptable documentation will be embedded into the mandatory Part C EI Orientation and will not be a stand alone module.

Continuing and New Improvement Activities:

The following table includes continuing activities that were developed to support compliance for Timely Transition Planning.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p>Original Investigate reasons for high number of “opt outs” for the number of Transition Notices and determine how to increase the number of Transition Notices sent to the DOE.</p> <p>Revised A Quarterly Report will be developed for EIS Programs to submit to their EI Agency that includes an analysis of their Program data regarding Transition Notice Opt Outs.</p>			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. <p>Continuing</p> <ol style="list-style-type: none"> The data should be reviewed at least quarterly by the managers to determine the number of families opting out and the reasons. Only through an analysis of the reasons can improvement activities can be developed to reduce this number. The revised Transition Notice Form and Procedures will be implemented once final approval has been obtained by DOE. 	<p>Revision EIS Program Managers now have the data available via the EIS database to analyze Transition Notice Opt Outs.</p> <p>Extend Timeline Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>
<p>Original Investigate reasons for high number of “declines” for the Transition Conference and determine how to increase the number of scheduled and completed Transition Conferences.</p>			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 Notice Opt Outs and reasons for the Opt Outs. 	<p>Revision EIS Program Managers now have the data available via the EIS database to analyze Transition Conference Declines.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p>Revised A Quarterly Report will be developed for EIS Programs to submit to their EI Agency that includes an analysis of their Program data regarding Transition Conference Declines</p>									<p>Continuing 1. The data should be reviewed at least quarterly by the managers to determine the number of families declining the Transition Conference and the reasons. Only through an analysis of the reasons can improvement activities can be developed to reduce this number.</p>	<p>Extend Timeline Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>
<p>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.</p>				X	X	X	X		<p>Completed to Date 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>Continuing 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>Extend Timeline The State Team has been waiting for Chapter 60 guidelines and DOH Administrative Rules. The Team will reconvene in January 2011.</p>
<p>Develop a training module to address required and acceptable documentation.</p>				X	X	X			<p>Completed to Date: 1. The CSPD position was filled 1/4/2010 so this activity can be completed. 2. A draft has been completed.</p> <p>Continuing 1. The required and acceptable documentation will be embedded in the mandatory Part C EI Orientation and EI</p>	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
									Refresher Module.	
Embed the documentation training module into the mandatory EI Orientation Training.					X	X			Completed to Date: 1. A draft has been completed.	
Up-date Transition Policies and Procedures, Training Modules, and the MOA with the DOE to be consistent with the recent FAQs from OSEP on Transition between B and C and the change in DOE's protocol on the entrance date to DOE Preschool Special Education Program.					X	X	X		Completed to Date 1. Transition Notice Form and Procedures have been revised based on OSEP FAQs 2. Revised MOA between DOE and DOH have been submitted to OSEP for review. Continuing: 1. Upon final review by OSEP, changes will be made in the MOA and forwarded to DOE and DOH A.G. for approval. 2. Upon approval, it will be disseminated to all EI Programs and DOE.	Extend Timeline This activity cannot be completed until feedback from OSEP is received.
<u>New</u> The state STEPS team will update current technical assistance documents and hold state statewide training when the DOE and DOH MOU has been signed.							X			The following is still in the process of being finalized: 1. Up-date Part B Chapter 60 regarding transition information 2. MOU between Part B & C regarding the transition notice

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
										When the above are finalized, technical assistance documents will need to be updated and shared with DOH and DOH staff.

Part C State Annual Performance Report (APR) for FFY 2008

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>60 findings of noncompliance</p> <p>60 corrections completed as soon as possible but in no case later than one year from identification</p> <p>Percent = 60/60 = 100%</p>

FFY	Measurable and Rigorous Target
2009	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 up-dated 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 2009:

- The following findings were issued in FFY 2008, based on FFY 2007 data, and were verified as corrected within one year of notification or later.

Table 1a. Summary of Correction of Noncompliance of Findings Issued in FFY 2008	
a. No. of Findings of Noncompliance Issued (FFY 2008)	60

b. No. of Findings Verified as Corrected within One Year of Notification (FFY 2009)	60
c. Percent Verified as Corrected within One Year of Notification (FFY 2008)	100% (60/60)

- 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 2008
 - the number of findings of noncompliance identified in FFY 2008
 - the number of findings verified as corrected within one year of notification.

SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2008 (7/1/08 to 6/30/09)	(a) # Findings of Noncompliance Identified in FFY 2008 (7/1/08 to 6/30/09)	(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	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
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	Monitoring Activities: Data Review	7	7	7
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning: A. IFSPs with transition steps and services;	Monitoring Activities: Data Review	8	8	8
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition	Monitoring Activities: Data Review	2	2	2

Table 1b. Correction of Noncompliance Identified in FFY 2008 by SPP/APR Indicator and Hawaii Monitoring Priorities				
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2008 (7/1/08 to 6/30/09)	(a) # Findings of Noncompliance Identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Notification
planning: B. Notification to LEA, if child potentially eligible for Part B	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning: C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Data Review	4	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
SUB-TOTAL (SPP/APR Indicators)		23	23	23
Hawai'i State Priorities				
1a. Evaluation within 45 days of referral.	Monitoring Activities: Data Review	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
1b. 1 st Annual IFSP within 1 year of Initial IFSP.	Monitoring Activities: Data Review	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
2a. Complete present levels of development	Monitoring Activities: Data Review	6	6	6
	Dispute Resolution: Complaints, Hearings	0	0	0
2b. Frequency, intensity, method, location, & payment	Monitoring Activities: On-site Monitoring	6	6	6
	Dispute Resolution: Complaints, Hearings	0	0	0
2c. IFSP objectives complete	Monitoring Activities: On-site Monitoring	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
2d. Justification for services in non-natural	Monitoring Activities: On-site Monitoring	3	3	3

Table 1b. Correction of Noncompliance Identified in FFY 2008 by SPP/APR Indicator and Hawaii Monitoring Priorities				
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2008 (7/1/08 to 6/30/09)	(a) # Findings of Noncompliance Identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Notification
environments	Dispute Resolution: Complaints, Hearings	0	0	0
3a. Appropriate individuals invited to Transition Conference	Monitoring Activities: On-site Monitoring	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
4a. FERPA notice explained and provided/offered to the family	Monitoring Activities: On-site Monitoring	5	5	5
	Dispute Resolution: Complaints, Hearings	0	0	0
4b. "Dear Family" explained and provided/offered to the family	Monitoring Activities: On-site Monitoring	5	5	5
	Dispute Resolution: Complaints, Hearings	0	0	0
4c. Written Prior Notice provided to the family	Monitoring Activities: On-site Monitoring	1	1	1
	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	3	3	3
	Dispute Resolution: Complaints, Hearings	0	0	0
SUB-TOTAL (Hawaii State Priority Areas)		37	37	37
TOTAL		60	60	60

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 “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 “Demonstrating Correction based on the 09-02 Memo, page 2” section of Indicators 1, 7, and 8 for 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 and 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 considered complete and were accepted. If, however, there were concerns related to the CAP Summary Report, PART C LA would contact the EI Agency and/or the EI Program for additional information.

Correction of Remaining FFY 2007 Findings of Noncompliance

Table 2. Summary of Correction of Noncompliance Of Findings Issued in FFY 2007	
a. No. of Findings of Noncompliance Issued (FFY 2007)	308
b. No. of Findings Verified as Corrected within One Year of Notification (FFY 2008)	292
c. Percent Verified as Corrected within One Year of Notification (FFY 2008)	95% (292/308)
d. No. of Finding Subsequently Verified as Corrected	12
e. No. of Findings Closed due to Program Closing & Children Outside of Jurisdiction	4
f. Total No. of Findings Verified as Corrected by FFY 2009 APR Submission or Closed	308
g. Percent Verified as Corrected by FFY 2009 APR Submission	100% (308/308)

Required Follow-Up for Continuing Noncompliance

PART C LA provided Technical Assistance to the one local EIS program with continued noncompliance for timely services and required the following Corrective Actions. The Program Manager of the local EIS program was required to:

1. Develop a revised CAP by the end of February 2010 and submit it to both the Agency Administrator and PART C LA for review and approval.

2. Provide weekly data to show progress in correcting this area of noncompliance. In addition, progress in the CAP strategies also must be reported monthly.
3. Schedule a meeting with the Program Director who is responsible for the local EIS program, the Agency Administrator and DHOH to discuss the continued noncompliance and initiate additional enforcement activities if noncompliance was not corrected by the end of April 2010.

As a result of the above, the one local program subsequently corrected their noncompliance for timely services in March of 2010.

Monitoring Process

The monitoring process 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 2009:

Explanation of Progress

The current data shows an improvement of 5% from FFY 2007 to FFY 2008, from 95% to 100%.

- FFY 2005 compliance was at 97%
- FFY 2006 compliance was at 94%
- FFY 2007 compliance was at 95%
- FFY 2008 compliance was at 100%

Progress was a direct result of developing and implementing a system to demonstrate correction. The Part C LA accessed technical assistance from WRRC and NECTAC in building a comprehensive General Supervision system. Programs responded by utilizing the CAP process to demonstrate correction and by making changes to policies, procedures, and/or practices as needed.

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
Define, develop, and implement different levels of sanctions, based on monitoring results, to support timely correction of noncompliance.	<ol style="list-style-type: none"> 1. Programs developed Corrective Action Plans for any indicator that did not meet the targets set for each Indicator and Hawaii Priority Areas. 2. Programs provided monthly data to its Agency Administrator until correction of noncompliance occurred and was verified. 3. Sanctions were developed and implemented: <ol style="list-style-type: none"> a. Programs/sections with on-going noncompliance were provided additional technical assistance to identify root causes of the noncompliance. b. Correction data requirements were based on the level/percentage of noncompliance (i.e., the number of correct charts or months of data). The lower the percentage, the longer the data was reported to its

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
	<p>Agency Administrator (e.g., if less than 50%, the program must report monthly until there are 3 consecutive months at 100%. At that point, that specific indicator is considered corrected.</p> <ol style="list-style-type: none"> 4. Agency Administrators submit monthly a CAP Summary Report to the Part C Quality Assurance and Training Unit Supervisor. 5. WRRC and NECTAC, through their technical assistance, assisted PART C LA in developing new sanctions for EI programs/sections who did not correct their areas of noncompliance. Sanctions were developed for programs at both their 2nd and 3rd year of not correcting their areas of noncompliance. Based on preliminary data, the new sanctions have been successful.
<p>For long-standing noncompliance, require the Agency (or its Quality Assurance staff person) to work with the specific program/section to use the local contributing tool developed by NECTAC and develop a comprehensive Corrective Action Plan that addresses the long-standing noncompliance.</p>	<p>Completed</p> <ol style="list-style-type: none"> 1. PART C LA required 8 programs to complete the local contributing tool and develop a Corrective Action Plan to address the noncompliance. As a result 5 programs have subsequently corrected their noncompliance. 2. WRRC and NECTAC, through their technical assistance, assisted Part C LA in developing new strategies for EI programs/sections at both their 2nd and 3rd year of not correcting their areas of noncompliance. Based on preliminary data, the new strategies have been successful. 3. PART C LA has a system in place to monitor programs to determine if the CAPs and increased strategies are effective in correcting the long-term noncompliance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100% for FFY 2010, 2011, and 2012.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
<p>Explore options to utilize a monitoring cycle based on monitoring results.</p>	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Each Part C Program completed the SAM tool to provide data on their compliance with Part C. 2. Review data to determine if it is appropriate to implement a monitoring cycle for programs that are continually successfully in meeting all indicators for a specific number of consecutive years.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
	<p>3. Review OSEP requirements to determine if implementing a monitoring cycle meets monitoring requirements.</p> <p>Justification: It was determined that Hawaii would not utilize a monitoring cycle</p>

Continuing Improvement Activities:

The following table includes continuing improvement activities that were developed to support compliance for Correction of Noncompliance.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATION S
<p>Develop and implement procedures to include HEICC and family members in the monitoring process.</p>		X	X	X	X	X	X		<p>Continuing</p> <ol style="list-style-type: none"> HEICC and family members are not currently included in the monitoring process. Discuss with HEICC members how HEICC and family members can best support the provision of quality early intervention services. Identify appropriate activities for HEICC members and families (e.g., family members may interview families about their early intervention experiences.) 	<p>Extend Timeline</p> <p>Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>
<p>Original</p> <p>Gather and analyze data to determine reasons for vacancies, and make recommendations to support recruitment and retention.</p> <p>Revised</p> <p>Explore recruitment and retention strategies that are at no cost to the State.</p>			X	X	X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 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. <ol style="list-style-type: none"> <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 making \$80-100,000. Therapists in the private section can make \$15-20,000 more. <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. <u>Natural environment requirements</u>. One respondent reported increased hiring difficulty for his programs that serve families in low SES, drug 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 	<p>Revision</p> <p>Due to budget cuts, need to identify ways to retain staff other than financial incentives.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATION S
									<p>positions.</p> <p>2. Although the Executive Directors noted that recruitment bonuses were effective and because they were one-time costs and not re-occurring, 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>Continuing</p> <p>1. Further discussion is needed on recruitment/retention strategies that are at no cost to the state.</p>	
<p>Original Randomly verify monitoring results to assure accurate results.</p> <p>Revised Develop a process to verify monitoring results to assure accurate results.</p>				X	X	X	X		<p>Continuing</p> <p>1. As PART C LA completed the monitoring for all EIS programs this year, there was no need to verify the monitoring results for EIS programs</p> <p>2. Randomly verifying monitoring results will be initiated next year.</p>	<p>Revision A process needs to be developed and implemented on an on-going basis.</p> <p>Extend Timeline Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

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

Measurement: Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

Applied: No applicable, as there were no signed written complaints in FFY 2009

FFY	Measurable and Rigorous Target
2009	100%

Actual Target Data for FFY 2009:

- There were no written complaints during FFY 2009.
- 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 2009:

Explanation of Progress:

There were no complaints filed in FFY 2009, so there were no investigations that had to be completed within the applicable timeline. Because the data for this year is consistent with last year’s data, and is at 100%, no explanation of progress or slippage is required.

Completed Improvement Activities:

There were no activities completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100% for FFY 2010, 2011, and 2012.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for Timely Resolution of Written Complaints.

APR Template – Part C (4)

Resources:

There were no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p>Original Design and implement various creative strategies (e.g., videotapes, DVDs, etc.) to support training on Part C requirements for families and to increase parents' awareness of their procedural safeguards.</p> <p>Revised 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 material developed is both culturally and linguistically appropriate for the intended audience. Once developed, post on EIS website to support easy access to information.</p>		X	X	X	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>Continuing</p> <ol style="list-style-type: none"> The Public Awareness staff person will identify a group of family members (e.g., ICC parents) to use as a resource to determine the most appropriate and useful materials to develop. The funds expected to be used to create a DVD on early intervention is no longer available and it is unknown if other funds will be available. Research on other DVDs developed by other states or technical assistance will be initiated to identify public awareness strategies that are appropriate for Hawaii's Part C families. 	<p>Revision It is important to review what has been previously developed as videos have been developed in Hawai'i that may be appropriate. We also want to be sure that we aren't "re-inventing" the wheel when it comes to materials.</p> <p>Extend Timeline The timeline has been extended to 2012 because, due to the resignation of the Public Awareness Specialist and the time to recruit a new staff into this position, there was insufficient time to complete the activities.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p><u>New</u> Revise the Concern Log Form to include a place where it can be confirmed that parents were informed of their rights when they shared a concern.</p>						X	X		<p>Completed to Date</p> <ol style="list-style-type: none"> 1. A Concern Log was developed and disseminated to all EI Programs to complete and submit quarterly to the Part C Coordinator even if there have been no concerns identified in the previous quarter. 2. The EIS Quality Assurance Coordinator tracks the receipt of the Concern Logs to ensure that all the EI Programs are complying with this new requirement 3. The Concern Logs are reviewed to determine if there are common reasons for the concerns 	<p>It is critical that parents are continually reminded of their procedural safeguards re: complaints, mediation opportunities and due process requests.</p>
<p><u>New</u> Develop and implement training, including written guidelines, for all EI Program Managers and Supervisors to ensure they are aware and knowledgeable of legal issues related to: dispute resolution, due process hearings, etc. Include any differences for state vs. private agencies.</p>						X	X	X		<p>It is very possible that both due to the loss of early intervention staff and the potential change in eligibility, there will be requests for due process hearings. Staff needs to be knowledgeable about the process and what they need to do to be sure they are appropriately following the legal procedures.</p>
<p><u>New</u> Review previously developed videos and other materials (from HI</p>										<p>It is important to have materials available, in a variety of formats, to support parent</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p>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 material developed s both culturally and linguistically appropriate for the intended audience. Once developed, post on EIS website to support easy access to information.</p>						X	X	X		<p>knowledge. It is also important to review what has been previously developed as videos have been developed in Hawaii that may be appropriate as we want to be sure that we aren't "re-inventing" the wheel when it comes to materials.</p>
<p><u>New</u> Develop internal procedures for the Part C LA to follow to ensure that federal timelines for any written complaint are met.</p>						X				<p>Part C regulations include timelines for any written complaint. Having internal procedures regarding the timeline will ensure that they will be met.</p>

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

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

Measurement: Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

Applied: Not applicable, as there were no due process hearing requests in FFY 2009.

FFY	Measurable and Rigorous Target
2009	100%

Actual Target Data for FFY 2009:

- There were no due process hearing requests during FFY 2009.
- 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 2009:

Explanation of Progress:

There were no due process requests filed in FFY 2009, so there were no due process requests that had to be adjudicated within the applicable timeline. Because the data for this year is consistent with last year’s data, and is at 100%, no explanation of progress or slippage is required.

Completed Improvement Activities:

There were no activities completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

This is a compliance indicator; therefore the target of 100% will continue for FFY 2010, 2011, and 2012.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for fully adjudicated due process hearing requests in a timely manner.

Resources:

There were no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p>Original Design and implement various creative strategies (e.g., videotapes, DVDs, etc.) to support training on Part C requirements for families and to increase parents' awareness of their procedural safeguards.</p> <p>Revised 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 material developed s both culturally and linguistically appropriate for the intended audience. Once developed, post on EIS website to support easy access to information.</p>				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>Continuing</p> <ol style="list-style-type: none"> The Public Awareness staff person will identify a group of family members (e.g., ICC parents) to use as a resource to determine the most appropriate and useful materials to develop. The funds expected to be used to create a DVD on early intervention is no longer available and it is unknown if other funds will be available. 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. 	<p>Revision It is important to review what has been previously developed as videos have been developed in Hawaii that may be appropriate. We also want to be sure that we aren't "re-inventing" the wheel when it comes to materials.</p> <p>Extend Timeline The timeline has been extended to 2012 because, due to the resignation of the Public Awareness Specialist and the time to recruit a new staff into this position, there was insufficient time to complete the activities.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p><u>New</u> The CSPD Coordinator will coordinate a training with the DOH Hearings Officer for EI staff so they are informed of expectations if/when a request for due process is filed.</p>						X	X			<p>Staff needs to be knowledgeable about the process and what they need to do to be sure they are appropriately following the legal procedures.</p>
<p><u>New</u> Develop materials (e.g., information on Part C of 108-446) and implement training on a regular basis for due process hearing officers to ensure they are knowledgeable of Part C regulations.</p>							X	X		<p>It is important that the DOH hearing officers are knowledgeable of Part C regulations and are prepared if there was a request for a due process hearing.</p>
<p><u>New</u> Develop and implement training, including written guidelines, for all EI Program Managers and Supervisors to ensure they are aware and knowledgeable of legal issues related to: dispute resolution, due process hearings, etc. Include any differences for state vs. private</p>						X	X	X		<p>It is very possible that both due to the loss of early intervention staff and the potential change in eligibility, there will be requests for due process hearings. Staff needs to be knowledgeable about the process and what they need to do to be</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
agencies.										sure they are appropriately following the legal procedures.
<p><u>New</u> 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 material developed s both culturally and linguistically appropriate for the intended audience. Once developed, post on EIS website to support easy access to information.</p>						X	X	X		It is important to have materials available, in a variety of formats, to support parent knowledge. It is also important to review what has been previously developed as videos have been developed in Hawaii that may be appropriate as we want to be sure that we aren't "re-inventing" the wheel when it comes to materials.
<p><u>New</u> With support of the DOH Hearing Officer, develop internal procedures for the Part C LA and DOH Hearing Officer to follow to ensure that federal</p>						X				Part C regulations include timelines for all due process requests. Having internal procedures regarding the timeline will

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
timelines are met for any request for a due process hearing.										ensure that the timelines will be met.

Part C State Annual Performance Report (APR) for FFY 2008

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
2009	100%

Actual Target Data for FFY 2009:

- 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 2009:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2008

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 2009.

FFY	Measurable and Rigorous Target
2009	100%

Actual Target Data for FFY 2009:

- There were no mediation requests during FFY 2009.
- 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 FY 2009:

There were no mediation requests filed in FFY 2009, so there were requests that had to be resolved with mediation agreements. Because the data for this year is consistent with last year’s data, and is at 100%, no explanation of progress or slippage is required.

Completed Improvement Activities:

There were no improvement activities completed at this time.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

Because this is a compliance indicator, the target will remain at 100% for FFY 2010, 2011, and 2012.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for Mediation.

Resources:

There were no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Regularly train Mediation Center staff on Part C requirements in case mediation is requested.			X	X	X	X	X	X	<p>Completed</p> <ol style="list-style-type: none"> The Mediation Center has been contacted to provide mediation when requested by families. A Purchase Order has been finalized (i.e., approved and signed) to provide funds to the Mediation Center if a family requests mediation. 	<p>Extend Timeline</p> <p>The timeline has been extended to 2012 because, due to change in positions and insufficient staff, the training has not yet been developed or provided.</p>
<p><u>New</u></p> <p>Develop and implement training, including written guidelines, for all EI Program Managers and Supervisors to ensure they are aware and knowledgeable of legal issues related to: dispute resolution, due process hearings, etc. Include any differences for state vs. private agencies.</p>						X	X	X		<p>It is very possible that both due to the loss of early intervention staff and the potential change in eligibility, there will be requests for due process hearings. Staff needs to be knowledgeable about the process and what they need to do to be sure they are appropriately following the legal procedures.</p>
<p><u>New</u></p> <p>Review previously developed videos and other materials (from HI and other states) to</p>						X	X	X		<p>It is important to have materials available, in a variety of formats, to support parent</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
<p>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 material developed s both culturally and linguistically appropriate for the intended audience. Once developed, post on EIS website to support easy access to information.</p>										<p>knowledge. It is also important to review what has been previously developed as videos have been developed in Hawaii that may be appropriate as we want to be sure that we aren't "re-inventing" the wheel when it comes to materials.</p>
<p><u>New</u> With support of the Mediation Center, develop internal procedures for the Part C LA to follow to ensure that federal timelines for any request for mediation are met.</p>						X				<p>Part C regulations include timelines for any request for mediation. Having internal procedures regarding the timeline will ensure that they will be met.</p>

Part C State Annual Performance Report (APR) for FFY 2008

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 and settings and November 1 for exiting and dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the “Indicator 14 Data Rubric” for reporting data for this indicator.

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
2009	100%

Actual Target Data for FFY 2009:

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

SPP/APR Data - Indicator 14			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2

SPP/APR Data - Indicator 14			
APR Indicator	Valid and Reliable	Correct Calculation	Total
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
10	1	1	2
11	1	1	2
12	N/A	N/A	0
13	1	1	2
Subtotal			28
APR Score Calculation	Timely Submission Points (5 pts for submission of APR/SPP by February 1, 2010)		5
	GRAND TOTAL		33

618 Data - Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/09	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/1/09	1	1	1	1	4
Table 3 - Exiting Due Date: 11/1/09	1	1	1	N/A	3
Table 4 - Dispute Resolution Due Date: 11/1/09	1	1	1	N/A	3
				Subtotal	14

618 Score	Grand Total (subtotal x 2.5)	35
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Indicator #14 Calculation	
A. APR Grand Total	33.00
B. 618 Grand Total	35.00
C. APR Grand Total (A) + 618 Grand Total (B) =	68.00
Total NA in APR	2.00
Total NA in 618	0.00
Base	68.00
D. Subtotal (C divided by Base) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:

Explanation of Progress:

- FFY 2005 compliance was at 84%.
- FFY 2006 compliance was at 100%.
- FFY 2007 compliance was at 100%.
- FFY 2008 compliance was at 100%
- FFY 2009 compliance was at 100%

FFY 2009 compliance continued to be 100%, the same as FFY 2006 through FFY 2008. Because compliance was consistent from FFY 2008 to FFY 2009, and is at 100%, explanation of progress or slippage is not required.

Completed Improvement Activities:

There were no improvement activities completed at this time.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.

Proposed Targets

This is a compliance indicator; therefore the target of 100% will continue for FFY 2010, 2011, and 2012.

Continuing Improvement Activities:

The following table includes continuing improvement activities that were developed to support compliance for state reported timely and accurate data (618, SPP and APR).

Resources:

There were no changes to the resources.

APR Template – Part C (4)

Improvement Activity	'05	'06	'07	'08	'09	'10	'11	'12	PROGRESS/STATUS	JUSTIFICATIONS
Refine the monitoring data validation process (i.e., schedule, selection of records, etc)				X	X	X	X		<p>Completed to Date</p> <ol style="list-style-type: none"> A data validation component was added to the SAM tool that was completed at the on-site monitoring. The monitoring schedule has been changed so that findings are relevant to the data being used for monitoring. <p>Continuing</p> <ol style="list-style-type: none"> PART C LA Quality Assurance and Training Unit will make changes to the monitoring data validation process 	<p>Extend Timeline</p> <p>Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>
Revise the validation process of Child count data to ensure its validity					X	X	X		<p>Completed to Date</p> <ol style="list-style-type: none"> Child Count Reports have been developed for the EIS database which allows Program Managers to review the data and look for any inconsistencies and to ensure that data is complete. Program Managers received training on how to utilize the reports generated by the EIS database. 	<p>Extend Timeline</p> <p>Due to the Reduction In Work Force (RIF) process, there were changes in staff that impacted roles and responsibilities; therefore more time is needed to complete this activity.</p>