

HI Part C

FFY2015 State Performance Plan / Annual Performance Report

Executive Summary:

The Hawai'i Department of Health (HDOH) is designated as the Lead Agency (LA) for Part C of the Individuals with Disabilities Education Act (IDEA) and ensures the provision of early intervention services to eligible infants and toddlers with special needs and their families in accordance with the provision of Part C through the HDOH Early Intervention Section (EIS). EIS is under the supervision of the Children with Special Health Needs Branch within the Family Health Services Division, Health Resources Administration.

There are 20 early intervention (EI) programs statewide that serve the infants and toddlers that meet the eligibility criteria below and their families.

1. Developmentally Delayed

Children under the age of three (3) has a significant delay in one or more of the following areas of development: physical, cognitive; communication; social or emotional; and adaptive based on one of the following criteria:

- < -1.0 SD in at least two or more areas or sub-areas of development
- < -1.4 SD in at least one area or sub-area of development
- Multidisciplinary team observations and informed clinical opinion when the child's score cannot be measured by the evaluation instrument

2. Biological Risk

Children under the age of three (3) with a signed statement or report by a qualified provider that includes a diagnosis of a physical or mental condition that the multidisciplinary team determines has a high probability of resulting in developmental delay if early intervention services are not provided. This includes, but is not limited to the following conditions:

- Chromosomal abnormalities
- Genetic or congenital disorders
- Severe sensory impairments
- Inborn errors of metabolism
- Disorders reflecting disturbance of the development of the nervous system
- Congenital infections
- Disorders secondary to exposure to toxic substances, including fetal alcohol syndrome
- Severe attachment disorders
- Autism Spectrum Disorder

The State of Hawai'i is committed to provide early intervention services to infants and toddlers with special needs and their families in accordance with Part C of IDEA. The provision of EI is guided by the following principles:

- A spirit of our island community embraces and values every child, woman, and man and is continually enriched by the diversity of its members.
- The community recognizes that families are the most important influence in their child's life.
- The development of infants and toddlers are best applied within the context of the family environment. Infants and toddlers with special needs and their families have inherent strengths and challenges and will be treated with respect and kindness.
- Families are viewed holistically and therefore, must be empowered to use their strengths in gaining access to resources for their child across agencies and disciplines. These resources must be nurturing, value cultural diversity, and aimed at improvement outcomes that involve developmental growth, safety, health, education, and economic security.
- All early intervention efforts are collaborative and work towards outcomes that are based on the changing priorities and needs of children with special needs and their families.
- The combined early intervention efforts and individual accountability across public and private agencies and providers help make this vision a reality.

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General Supervision System:

The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.

A. Monitoring System

The Part C Lead Agency (LA) is responsible for ensuring that all the IDEA Part C requirements are met. To ensure compliance with IDEA Part C requirements, written monitoring procedures were developed as part of the Part C LA Continuous Quality Improvement System (CQIS). The CQIS is a two-step process.

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Step 1: Monitoring

All Part C early intervention (EI) programs are monitored annually. Data is gathered from the EI database, 618 data, and on-site monitoring utilizing the Self-Assessment Monitoring (SAM) tool to ensure that all programs are in compliance with IDEA Part C requirements. The following data sources are used to gather and report data in the Annual Performance Report (APR):

- Indicator 1: SAM data
- Indicator 2: 618 Data
- Indicator 3: Database Data
- Indicator 4: Statewide Family Survey
- Indicator 5: 618 Data
- Indicator 6: 618 Data
- Indicator 7: Database Data
- Indicator 8: Database Data
- Indicator 9: 618 Data
- Indicator 10: 618 Data
- Indicator 11: N/A

In addition to monitoring on the above required indicators, Hawai'i identified the following Priority Areas and specific items in each area to monitor:

Priority Area 1: Timeliness

Rationale: Timely Individualized Family Support Plan (IFSP) reviews are necessary to ensure that appropriate services are identified and delivered based on the individual needs of the child and family.

- Item 1a: IFSP Review within 6 months of Initial or Annual IFSP
- Item 1b: Annual IFSP on time

Priority Area 2: IFSP Development

Rationale: All IFSPs must contain required components to ensure that appropriate services are delivered in a timely manner to enhance a child's development. Complete and accurate information supports the identification and delivery of appropriate services.

- Item 2a: Complete Present Levels of Development
- Item 2b: Complete Frequency, Intensity, Method, Location, and Payment for each service
- Item 2c: IFSP Objectives Complete (include criteria, procedures, and timelines)
- Item 2d: Justification for Services in "Non" Natural Environment

Priority Area 3: EI Child Outcomes

Rationale: EI Child Outcomes rating is a mechanism that the Part C LA can use to measure how children and families benefit from EI services.

- Item 3a: Initial EI Child Outcomes ratings were completed
- Item 3b: Exit EI Child Outcomes ratings were completed

Priority Area 4: Procedural Safeguards

Rationale: Part C LA must ensure that families understand their rights and their integral part in Part C.

- Item 4a: Family Education Rights and Privacy Act (FERPA) Notice - Discussed/provided at Intake and discussed/offered at IFSP Meetings
- Item 4b: Procedural Safeguards Brochure and IDEA Regulations – Discussed/provided at Intake and discussed/offered at IFSP Meetings
- Item 4c: Written Prior Notice prior to MDE, at eligibility determination, and prior to IFSP meeting
- Item 4d: Written Consent for MDE
- Item 4e: Written Consent Prior to Initiation of EI Services

Priority Area 5: Transition (originally Priority Area 3 – change effective FFY 2010)

Rationale: All children and families must receive appropriate transition planning to support them in exiting Part C.

- Item 5a: Appropriate individuals were invited to the transition conference.

Priority Area 6: Data Validation

Rationale: Part C LA must ensure that the data being reported in the database is accurate.

- Item 6a: Date of Birth
- Item 6b: Part C Referral Date
- Item 6c: Initial IFSP
- Item 6d: Service Location
- Item 6e: Exit Date
- Item 6f: Transition Plan
- Item 6g: Transition Notice – Date sent or "opt out"
- Item 6h: Transition Conference – Date of conference or "decline"
- Item 6i: FERPA Notice – discussed and provided during Intake
- Item 6j: Family Rights – discussed and provided during Intake

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- o Item 6k: MDE Consent
- o Item 6l: EI Goals Initial Rating Date
- o Item 6m: EI Goals Rating 1B
- o Item 6n: EI Goals Rating 2B
- o Item 6o: EI Goals Rating 3B
- o Item 6p: EI Goals Exit Rating Date
- o Item 6q: EI Goals Exit Rating 1A
- o Item 6r: EI Goals Exit Rating 1B
- o Item 6s: EI Goals Exit Rating 2A
- o Item 6t: EI Goals Exit Rating 2B
- o Item 6u: EI Goals Exit Rating 3A
- o Item 6v: EI Goals Exit Rating 3B

Step 2: Part C LA Responsibilities

The Part C LA is responsible for ensuring that: 1) EI Programs provide data, as required, to show that their programs meet IDEA Part C compliance; 2) feedback is provided to each EI Programs as to whether the program's data is sufficient to show compliance; 3) areas of non-compliance are identified; 4) EI Programs are notified of areas of non-compliance; and 5) required actions are taken such as developing a Corrective Action Plan (CAP), submitting evidence to show correction, as well as, developing program specific improvement strategies to address non-compliance. In addition, the Part C LA does data validation as part of the SAM process. If the required actions are insufficient to show progress toward compliance, Part C LA may impose sanctions on the EI Programs.

B. Dispute Resolution

At Intake, families are provided information regarding their procedural safeguards, as described in the "Family Rights" brochure, which includes an insert of Section 303.400-303.460, the Part C procedural safeguards system. They are also informed of the process on who to contact if they have any concerns about services as well as, how to make a formal complaint and the due process procedure. It is recommended that if families have concerns, they should first discuss their concerns with their care coordinator so an IFSP Review meeting can be scheduled, if appropriate. If families feel their concerns are not adequately resolved, they can contact the program's supervisor or the Part C Coordinator prior to filing a written complaint. A written complaint or due process should be filed if the family feels that the Part C program has violated a Part C requirement. Mediation will be offered if a request for a due process hearing is submitted.

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Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to early intervention service (EIS) programs.

National TA Accessed:

The Part C LA consulted with the Early Childhood Technical Assistance (ECTA) Center, The Center for IDEA Early Childhood Data Systems (DaSy), National Center for Systemic Improvement (NCSI), and the IDEA Data Center on how to improve compliance and performance across APR indicators. ECTA, DaSy and NCSI provided clarification on DEC recommended practices and shared resources. The Part C LA sent representatives to various conferences to access TA such as: Improving Data, Improving Outcomes; Infant and Toddler Strategies Institute; Early Childhood Personnel Center Leadership Institute; and Social and Emotional Outcomes Cross State Learning Collaborative.

Resources gathered from the various conferences have been shared with respective workgroups that are addressing system issues such as Child Outcomes. The Child Outcomes Data Quality report developed by DaSY and ECTA was shared with the State and forwarded it the Child Outcomes workgroup. The Child Outcomes training modules was also shared with the Child Outcomes Workgroup and they are reviewing the modules and developing a training plan so all providers will participate in the training.

That State also accessed TA from ECTA related to timely services. As a result of those TA discussions, the State proceeded to contract MLisa Shelden and Dathan Rush to support the State's efforts in providing evidence based (primary service provider, coaching and natural learning environment) services. While the State has implemented a version of the model, the training by Shelden and Rush includes strategies to move towards fidelity. Hawaii has recognized that in using the model, the State may use resources more appropriately and efficiently that may result in providers having a manageable caseload; thereby, enabling them to provide timely services.

The Part C LA participated on webinars and learning collaboratives/community of practices which provided an on-going opportunity to hear what other States are doing as well as, ideas/strategies to enhance Hawaii's system.

Local TA provided:

At quarterly Program Manager meetings, they are informed of any updates to procedural guidelines and opportunities are provided if clarification is needed regarding the EI system and delivery of services.

Programs call or e-mail the Part C LA if any questions arise related to the EIS Policies and Procedures. They may also request on-site technical assistance as needed. A technical assistance form has been distributed to Programs who will submit it on a quarterly basis so the State can track technical assistance being provided to Programs.

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Professional Development System:

The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

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The Part C Lead Agency provides a four-day Part C Early Intervention Orientation for all new staff which is open to any staff that requests to attend. Annual Refresher trainings are offered at least once a year and may be on a specific topic to address a need identified through monitoring or training needs assessment.

The Part C Lead Agency also participates in the National Early Childhood Personnel Center Leadership Cohort. The focus of the Leadership Cohort is to collaborate with Department of Education and Maternal and Child Health Branch Home Visiting Program to build an inter-agency professional development system. Representatives from the early childhood systems participate to ensure the Part C LA professional development system is in alignment with the early childhood professional development system. As appropriate, other State Departments and Early Childhood community representatives will be invited to join the collaboration team.

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Stakeholder Involvement: apply this to all Part C results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

APR Process

The process to develop Hawai'i's APR for FFY 2015 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 EI System Improvement and Outcomes Team to address specific indicators as identified in the approved State Performance Plan (SPP).
2. On-going meetings with the identified EI System Improvement and Outcomes Team members were held to prepare them to facilitate workgroups at the statewide Annual Stakeholders' Meeting.
3. 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. Group discussion at the Stakeholder Meeting on specific indicators. Each group was provided with copies of the Indicator targets, FFY 2015 APR data, draft FFY 2015 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 slippage.
 - If performance indicator targets should be revised, including justification for any revisions.
5. Final recommendations by indicator were presented to all stakeholders.
6. Recommendations were reviewed by the identified members of the EI System Improvement and Outcomes Team and the Part C LA.
7. The APR was drafted by members of the EI System Improvement and Outcomes Team and the Part C LA.
8. The APR 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.
11. The APR was submitted to OSEP as required.
12. The APR will be posted on the HDOH EIS website when GRADS360 generates a PDF document suitable for sharing with the public.

Broad Representation

A stakeholder group of approximately 60 individuals provided recommendations to the development of the APR. Because of Hawai'i's broad eligibility and geography, it was important that there was broad representation that included: Part C early intervention (EI) service providers and family members from all islands, from urban and rural areas, as well as the different ethnic and cultural groups that represent Hawai'i's population. The following stakeholders from the islands of Oahu, Hawai'i, Maui, Kauai, and Molokai were invited:

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

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Reporting to the Public:

How and where the State reported to the public on the FFY 2013 performance of each EIS Program or Provider located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2013 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2013 APR in 2015, is available.

The SPP/APR and performance of each EIS Program in the State will be posted on the HDOH EIS website (<http://health.hawaii.gov/eis/home/documents-and-reports/>) within 120 days of the State's submission of the SPP/APR. In addition, information about how to access the SPP/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 such as, Easter Seals Hawai'i and Imua Family Services).

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Actions required in FFY 2014 response

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FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments

Compliance indicator: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

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

Historical Data

Baseline Data: 2013

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|--------|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target | | | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Data | | 69.00% | 71.00% | 78.00% | 84.00% | 88.00% | 86.00% | 85.00% | 69.00% | 63.03% | 67.14% |

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|--------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% |

FFY 2015 SPP/APR Data

| Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner | Total number of infants and toddlers with IFSPs | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|---|---|----------------|------------------|---------------|
| 106 | 210 | 67.14% | 100% | 67.14% |

| | |
|--|----|
| <p>Number of documented delays attributable to exceptional family circumstances <i>This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.</i></p> | 35 |
|--|----|

What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

A total of 290 records were selected for on-site monitoring within the time period 7/1/15 - 6/30/16 across all 20 EI programs. The EI Self Assessment Monitoring (SAM) Tool which was developed by Part C LA with feedback from EI providers was utilized to gather data.

For FFY 2015, the Part C LA Monitoring Team completed the SAM tool for each of the EI programs.

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

- Names of all children from each Program with an Initial, Review, or Annual IFSP between 7/1/15 - 3/31/16 were obtained from the Part C Database. The time frame was chosen to ensure that there were three months to confirm that services were provided in a timely manner within FFY 2015.
- Part C identified 10% of children at each program based on the 12/1/15 child count, or a minimum of 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 a complete monitoring as possible. This resulted in a review of 290 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 210 children as 80 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 the Part C LA to determine if services were timely, consistent with Hawai'i's definition for timely services.

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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 an EI program not providing service coordination, the provider must verbally inform the service coordinator of the date services were initiated or provide a copy of written documentation.
- If the service was provided by a contracted fee-for-service provider, documentation must be via the required Service Log developed by the 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. The following activities occurred by the Part C LA:

- Raw data were gathered.
- Data was inputted into the SAM database, which was developed by the Part C LA.
- Data was analyzed for non-compliance with Timely Services.
- Data was given to each program as part of the notification of FFY 2016 findings based on data from FFY 2015.

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 were contacted, as necessary, for additional data to confirm results. The SAM results were revised, if necessary, based on additional data received.

Provide additional information about this indicator (optional)

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."

Actual Target Data for FFY 2015:

Data for the percent of infants and toddlers with IFSPs who received the EI services on their IFSPs in a timely manner were gathered from on-site monitoring data (refer to the section above for a description of the "Monitoring Process").

- 141 of 210 (67%) of infants and toddlers monitored received EI services on their IFSPs in a timely manner.
- Exceptional Family Circumstances. 35 of the 210 (17%) infants and toddlers monitored did not receive timely services due to exceptional family circumstances as defined by IDEA Part C. This number was included in both the numerator and denominator when calculating the percentage of infants and toddlers that received timely services. The following were the predominate family circumstances that impacted the scheduling of timely services.
 - Cancelled appointments
 - Child/Family sick
- Program Reasons. 69 of the 210 (33%) infants and toddlers monitored did not receive timely services, due to program reasons. The predominate program reason that impacted the scheduling of timely services was due to lack of documentation of why services were late.
- Identifying Non-compliance. Of the 69 infants and toddlers where services were not initiated in a timely manner due to program reasons, seven (7) infants and toddlers left the programs' jurisdiction before the service was implemented and the remaining 62 infants and toddlers' services on their IFSP were initiated, although late.

Range of Days to Initiate Services
(For the children not receiving services on the IFSP in a timely manner)

| Range of Days Beyond The Due Date | # of children | % of Children |
|-----------------------------------|---------------|---------------|
| 1 - 30 days | 25 | 36% |
| 31 -60 days | 18 | 26% |
| 61 - 90 days | 7 | 10% |
| > 90 days | 12 | 18% |
| Left Program Jurisdiction | 7 | 10% |

The State accounted for all instances of noncompliance as identified through on-site monitoring (refer to the section above for a description of the "Monitoring Process"). There were 15 EI programs serving the 69 infants and toddlers who did not receive services in a timely manner.

- 7 of the 15 programs were issued findings in FFY 2016, based on FFY 2015 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (i.e., date of written notification).
- 6 of the 15 programs were not issued a finding due to on-going noncompliance (programs did not demonstrate correction from the findings issued in FFY 2015, based on FFY 2014 data [one program], FFY 2014, based on FFY 2013 data [four programs], FFY 2013, based on FFY 2012 data [one program], and FFY 2012, based on FFY 2011 data [one program]).
- 2 of the 15 programs was not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to written issuance of findings. In other words, all individual child noncompliance were corrected although late and updated data was used to confirm that the program was correctly implementing the timely services requirement for all infants and toddlers (100%).

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response, not including correction of findings

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

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

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

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

Correction of Findings of Noncompliance Identified in FFY 2014

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|--------------------------------------|---|--|--|
| 9 | 4 | 1 | 4 |

FFY 2014 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

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

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

- 95% - 100%: 1 month of data that shows 100% with a minimum of 2 records
- 90% - 94%: 1 month of data that shows 100% with a minimum of 4 records
- 80% - 89%: 2 months of data that shows 100% with a minimum of 6 records
- 70% - 79%: 2 consecutive months of data that shows 100% with a minimum of 8 records
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The Part C LA verified what the Programs submitted and ensured that the Program submitted required evidence of correction documentation based on the percentage of noncompliance.

Describe how the State verified that each individual case of noncompliance was corrected

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

For FFY 2007 through FFY 2015 the Part C LA verified that each of the EI Programs with finds of noncompliance for not initiation services in a timely manner, initiated all services, although late, unless the child was no longer within the jurisdiction of the EI Program. The status of child specific correction was included in previous APR's target data. It included the percentage of children who received all services listed, though late, unless the child was no longer within the jurisdiction of the EI Program. At the time of the on-site monitoring, "Worksheet A" from the SAM tool was completed by the monitors. The actual start date of each service was documented on Worksheet A and verified at the time of the on-site monitoring. If the service(s) did not occur prior to the monitoring date, the Program had to immediately correct by providing those services(s) on the IFSP, though late, and submit documentation to Part C LA that indicated when the service was initiated.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Programs with on-going noncompliance were required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

Programs must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

Agencies of the Programs still in noncompliance have been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

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The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

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

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

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

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

Describe how the State verified that each individual case of noncompliance was corrected

For FFY 2007 through FFY 2015 the Part C LA verified that each of the EI Programs with findings of noncompliance for not initiating services in a timely manner, initiated all services, although late, unless the child was no longer within the jurisdiction of the EI Program. The status of child specific correction was included in previous APR's target data. It included the percentage of children who received all services listed, though late, unless the child was no longer within the jurisdiction of the EI Program. During 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 during the on-site monitoring. If the service(s) did not occur prior to the monitoring date, the Program had to immediately correct by providing those services(s) on the IFSP, though late, and submit documentation to Part C LA that indicated when the service was initiated.

FFY 2012 Findings Not Yet Verified as Corrected

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Actions taken if noncompliance not corrected

The Program with on-going noncompliance was required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

The Program must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Services in Natural Environments**

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Historical Data

Baseline Data: 2005

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target ≥ | | | 74.50% | 80.00% | 85.00% | 90.00% | 90.00% | 90.00% | 90.00% | 90.00% | 90.00% |
| Data | | 81.10% | 89.10% | 86.00% | 96.00% | 95.00% | 93.00% | 88.00% | 93.00% | 90.64% | 89.74% |

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|----------|--------|--------|--------|--------|
| Target ≥ | 90.00% | 90.00% | 90.00% | 90.00% |

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Refer to Stakeholder Involvement section in the Introduction. Based on input from stakeholders, no revisions to targets will be made at this time.

Prepopulated Data

| Source | Date | Description | Data | Overwrite Data |
|--|-----------|---|-------|----------------|
| SY 2015-16 Child Count/Educational Environment Data Groups | 7/14/2016 | Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | 1,567 | |
| SY 2015-16 Child Count/Educational Environment Data Groups | 7/14/2016 | Total number of infants and toddlers with IFSPs | 1,740 | |

FFY 2015 SPP/APR Data

| Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | Total number of infants and toddlers with IFSPs | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|---|---|----------------|------------------|---------------|
| 1,567 | 1,740 | 89.74% | 90.00% | 90.06% |

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i)? **No**

Historical Data

| | Baseline Year | FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----|---------------|----------|------|------|------|------|--------|--------|--------|--------|--------|--------|--------|
| A1 | 2013 | Target ≥ | | | | | | 58.00% | 58.50% | 58.50% | 58.50% | 53.14% | 53.14% |
| | | Data | | | | | 58.00% | 62.30% | 61.60% | 59.50% | 56.30% | 53.14% | 48.92% |
| A2 | 2013 | Target ≥ | | | | | | 82.00% | 82.50% | 82.50% | 82.50% | 79.32% | 79.32% |
| | | Data | | | | | 82.00% | 82.90% | 80.70% | 77.60% | 79.00% | 79.32% | 73.39% |
| B1 | 2013 | Target ≥ | | | | | | 70.00% | 70.50% | 70.50% | 70.50% | 70.81% | 70.81% |
| | | Data | | | | | 70.00% | 73.70% | 72.90% | 67.80% | 70.60% | 70.81% | 65.94% |
| B2 | 2013 | Target ≥ | | | | | | 77.00% | 77.50% | 77.50% | 77.50% | 65.19% | 65.19% |
| | | Data | | | | | 77.00% | 77.90% | 75.50% | 69.00% | 64.60% | 65.19% | 58.72% |
| C1 | 2013 | Target ≥ | | | | | | 74.00% | 74.50% | 74.50% | 74.50% | 67.99% | 67.99% |
| | | Data | | | | | 74.00% | 74.80% | 74.30% | 78.40% | 73.30% | 67.99% | 63.68% |
| C2 | 2013 | Target ≥ | | | | | | 74.00% | 74.50% | 74.50% | 74.50% | 80.63% | 80.63% |
| | | Data | | | | | 74.00% | 77.70% | 73.30% | 78.00% | 81.20% | 80.63% | 77.12% |

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|-------------|--------|--------|--------|--------|
| Target A1 ≥ | 53.14% | 53.14% | 54.00% | 55.00% |
| Target A2 ≥ | 79.32% | 79.32% | 79.50% | 80.00% |
| Target B1 ≥ | 70.81% | 70.81% | 71.00% | 71.50% |
| Target B2 ≥ | 65.19% | 65.19% | 65.50% | 66.00% |
| Target C1 ≥ | 67.99% | 67.99% | 68.50% | 69.00% |
| Target C2 ≥ | 80.63% | 80.63% | 81.50% | 82.00% |

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Refer to Stakeholder Involvement section in the Introduction. Based on input from stakeholders, no revisions to targets will be made at this time.

FFY 2015 SPP/APR Data

| | |
|--|---------|
| Number of infants and toddlers with IFSPs assessed | 1459.00 |
|--|---------|

Outcome A: Positive social-emotional skills (including social relationships)

| | Number of Children | Percentage of Children |
|---|--------------------|------------------------|
| a. Infants and toddlers who did not improve functioning | 3.00 | 0.22% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 243.00 | 18.11% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 87.00 | 6.48% |

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

| | Number of Children | Percentage of Children |
|---|--------------------|------------------------|
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 220.00 | 16.39% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 789.00 | 58.79% |

| | Numerator | Denominator | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|-----------|-------------|----------------|------------------|---------------|
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$. | 307.00 | 553.00 | 48.92% | 53.14% | 55.52% |
| A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$. | 1009.00 | 1342.00 | 73.39% | 79.32% | 75.19% |

Outcome B. Acquisition and use of knowledge and skills (including early language/ communication)

| | Number of Children | Percentage of Children |
|---|--------------------|------------------------|
| a. Infants and toddlers who did not improve functioning | 2.00 | 0.15% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 311.00 | 23.17% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 229.00 | 17.06% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 476.00 | 35.47% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 324.00 | 24.14% |

| | Numerator | Denominator | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|-----------|-------------|----------------|------------------|---------------|
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$. | 705.00 | 1018.00 | 65.94% | 70.81% | 69.25% |
| B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$. | 800.00 | 1342.00 | 58.72% | 65.19% | 59.61% |

Outcome C: Use of appropriate behaviors to meet their needs

| | Number of Children | Percentage of Children |
|---|--------------------|------------------------|
| a. Infants and toddlers who did not improve functioning | 2.00 | 0.15% |
| b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 204.00 | 15.20% |
| c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it | 113.00 | 8.42% |
| d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers | 331.00 | 24.66% |
| e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers | 692.00 | 51.56% |

| | Numerator | Denominator | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|-----------|-------------|----------------|------------------|---------------|
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$. | 444.00 | 650.00 | 63.68% | 67.99% | 68.31% |
| C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$. | 1023.00 | 1342.00 | 77.12% | 80.63% | 76.23% |

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? Yes

Provide additional information about this indicator (optional)

Description of Process:

Tool:

The EI Child Outcomes 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 prior to the initial implementation of the COSP in FFY 2008.

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Measurement:

- Initial Rating: The initial data on child status is recorded at the initial IFSP meeting.
- Exit Rating: The exit data on child status is collected at the Exit IFSP or within three (3) months preceding exit from the program.

On-Going Data Collection:

For each of the three (3) EI Child Outcomes, the IFSP team assigns an initial and exit rating to each child. A rating compares the child's status to typical development and progress is calculated by comparing entry and exit ratings.

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

1. Developmental evaluation and/or assessment(s);
2. Professional opinion;
3. Parent input; and/or
4. Level of achievement of IFSP objectives relevant to the outcome

Reporting:

EI programs enter EI Child Outcomes ratings into their respective EI databases on a monthly basis and submits their EI database to the Part C LA.

Analyzing Data:

The Part C LA uses the rating for each outcome area for each child who received services for at least six (6) months to analyze the change in development from entry to exit. The calculator developed by ECO is used to determine each outcome 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, then 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 the child is counted in category (c).
4. If ratings of child functioning compared to typically developing same aged peers are below age expectations, but at exit they are at age level expectations, then the child is 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 the child is counted in category (e).

Actions required in FFY 2014 response

none

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4: Family Involvement**

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Historical Data

| | Baseline Year | FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|---|---------------|----------|------|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| A | 2006 | Target ≥ | | | | | 91.00% | 91.50% | 92.00% | 92.00% | 92.00% | 92.00% | 92.00% |
| | | Data | | | 91.00% | 89.00% | 90.00% | 91.80% | 94.00% | 87.00% | 85.95% | 86.94% | 88.44% |
| B | 2006 | Target ≥ | | | | | 93.00% | 93.50% | 94.00% | 94.00% | 94.00% | 94.00% | 94.00% |
| | | Data | | | 93.00% | 91.00% | 92.00% | 92.20% | 94.00% | 88.00% | 85.12% | 87.74% | 88.44% |
| C | 2006 | Target ≥ | | | | | 93.00% | 93.50% | 94.00% | 94.00% | 94.00% | 94.00% | 94.00% |
| | | Data | | | 93.00% | 93.00% | 92.00% | 92.40% | 94.00% | 86.00% | 82.78% | 83.87% | 85.13% |

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|------------|--------|--------|--------|--------|
| Target A ≥ | 92.00% | 92.00% | 92.00% | 92.00% |
| Target B ≥ | 94.00% | 94.00% | 94.00% | 94.00% |
| Target C ≥ | 94.00% | 94.00% | 94.00% | 94.00% |

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Refer to Stakeholder Involvement section in the Introduction. Based on input from stakeholders, no revisions to targets will be made at this time.

FFY 2015 SPP/APR Data

| | |
|---|--------|
| Number of respondent families participating in Part C | 579.00 |
| A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights | 524.00 |
| A2. Number of responses to the question of whether early intervention services have helped the family know their rights | 579.00 |
| B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs | 521.00 |
| B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs | 578.00 |
| C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 496.00 |
| C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn | 577.00 |

| | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|----------------|------------------|---------------|
| A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights | 88.44% | 92.00% | 90.50% |
| B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs | 88.44% | 94.00% | 90.14% |
| C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn | 85.13% | 94.00% | 85.96% |

Describe how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State.

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Actual Data for FFY 2014:

Each of the three (3) outcome areas are derived from Section B of the Early Childhood Outcomes (ECO) Family Outcomes Survey: "Helpfulness of Early Intervention." Each section is made up of multiple questions which are added together to come up with a mean score. For a family's response to be considered in agreement with the outcome, the mean score must be four (4) or above. "Knowing Your Rights" is made up of five (5) questions, and "Communicating Your Child's Needs," and "Helping Your Child Develop and Learn" are each made up of six (6) questions. If a family did not answer a minimum of four (4) questions regarding "Knowing Your Rights," and five (5) questions for "Communicating Your Child's Needs," and "Helping Your Child Develop and Learn," their response was not part of the overall score.

Statewide Family Survey Results July 2015 – June 2016

| Family Goal | # * | % |
|--|---------|-------|
| A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights. | 524/579 | 90.5% |
| 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. | 521/578 | 90.1% |
| 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. | 496/577 | 86.0% |

- Of the 1564 surveys that were distributed, 579 (521 paper surveys and 58 web-based surveys) were completed and returned for a 37% statewide return rate.
- Programs that did not meet the target for each specific Family Outcome were not issued a finding since this is a performance indicator; however, they were required to complete the Local Contributing Factor Tool and develop strategies in their CAP to address the specific Family Outcome.
- Additional Data – Length of Time in Early Intervention

When comparing this year's data to last year's data, total percentages statewide have improved.

The largest percent increase was observed in children receiving services for 2-3 years whose families reported that they could effectively communicate their children's needs. This improved from 85% last year to 97% this year, however this was the smallest group specifying how long they received services, so it did not have as great an impact on the overall total as expected. The largest decrease is seen in the families new to early Intervention (receiving services for less than 6 months), most notably in helping their child develop and learn.

| Length of Time in Service | # | Family Goal | | |
|---------------------------|-----|-------------------|--|---------------------------------------|
| | | Know Their Rights | Effectively Communicate their children's Needs | Help Their Children Develop and Learn |
| <i>Time not Specified</i> | 19 | 100% | 100% | 100% |
| 0-6 months | 177 | 90% | 92% | 84% |
| 6 months-1 year | 229 | 90% | 87% | 86% |
| 1 -2 years | 118 | 89% | 91% | 86% |

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Family Goal

| Length of Time in Service | # | Know Their Rights | Effectively Communicate their children's Needs | Help Their Children Develop and Learn |
|---------------------------|-----|-------------------|--|---------------------------------------|
| 2-3 years | 36 | 97% | 97% | 86% |
| Total | 579 | 91% | 90% | 86% |

Representative of the State's Population

Three (3) factors were considered when determining whether the returned surveys were representative of the early intervention population

- Ethnicity
- County of residence
- Age of the child

Comparison by Ethnicity:

When analyzing data for representativeness by ethnicity, subtracting surveys that did not report an ethnicity resulted in the following observations, and comparing to 618 data, the following points are noted:

- As was found in last year's data, Hispanics/Latinos were more likely to complete their surveys than were their Native Hawaiian/Pacific Islander counterparts by nearly 2:1.
- When using the Early Childhood Technical Assistance Center's Response Rate and Representativeness Calculator, it was determined that the response rate for the Asian and Caucasian Ethnic Groups were representative of those population groups served as indicated in our 618 data. However, those with two (2) or more identified ethnicities, like the Hispanic group, was over represented in survey completion.

| Ethnicity | FFY 2014 | | |
|------------------|---------------|-------------|------------|
| | Family Survey | Child Count | Difference |
| Two or More | 26% | 38% | -12% |
| Asian | 31% | 26% | 5% |
| African American | 2% | 1% | 1% |
| American Indian | 0% | 0% | 0% |
| Caucasian | 19% | 15% | 4% |
| Hispanic/Latino | 16% | 10% | -6% |
| Native Hawaiian | 6% | 10% | 4% |

When looking at the data responses by ethnicity, the two largest groups—Two or more Ethnicities and Asians made up over 60% of responses.

- - There is a drastic difference between the two groups in "effectively communicate their children's needs and "help their children develop and learn". While the difference was just 3-4% last year, this year it has jumped to 8%, doubling the difference in both indicators.
 - The number of respondents in each group is also different than last year, with total number of Asians increased from 160 to 173, while the number of families falling into the two or more ethnicity category dropped from 226 to 146.
 - All percentages for both groups in all three indicators either improved or stayed the same. Although reported responses for those in the Asian category are more stable when compared to last year, the smaller numbers and improved positive responses for the two or more families skewed the difference between the two, making it appear much different.
 - There was across the board improvements in most areas.

| Family Goal | Two or More (n=146) | Asian (n=173) | Statewide Total (n=579) |
|-------------------|------------------------|------------------|-------------------------|
| Know their rights | 94% | 90% | 91% |

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

| Family Goal | Two or More | Asian | Statewide Total (n=579) |
|--|-------------|---------|-------------------------|
| | (n=146) | (n=173) | |
| Effectively communicate their children's needs | 95% | 87% | 90% |
| Help their children develop and learn | 92% | 84% | 86% |

Comparison by County of Residence

Family Survey return rates by county did not appear as equitably spread out as it was last year.

Based on the surveys returned:

- This was the first year that Honolulu was under represented with survey return rates, with 7% less surveys being returned than what is reflected in our Child Count.
- Hawai'i County was also underrepresented, while Kauai was on par with their Child Count numbers.
- Maui was overrepresented with a return rate of 25%, while serving just 12% of the child count numbers.

| County | Family Survey | | Child Count | | Difference |
|-----------|---------------|------|-------------|------|------------|
| | # | % | # | % | % |
| Hawai'i | 34 | 6% | 203 | 12% | -6% |
| Honolulu | 382 | 66% | 1269 | 73% | -7% |
| Kauai | 17 | 3% | 60 | 3% | 0% |
| Maui | 146 | 25% | 208 | 12% | 13% |
| Statewide | 579 | 100% | 1740 | 100% | |

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

- Kauai improved in "helping their children develop and learn" by 30 %.
- Kauai decreased in the other two indicators. 82% of families reported they were "effectively communicating their children's needs" even though 94% of families reported they were "helping their child develop and learn".
- Maui County improved in all three areas, with results higher than the statewide totals.
- Hawai'i County improved in two indicators and remained stable in the third.

| Family Goal | Hawai'i | Honolulu | Kauai | Maui | Statewide |
|--|---------|----------|-------|------|-----------|
| Know their rights | 97% | 89% | 88% | 92% | 91% |
| Effectively communicate their children's needs | 94% | 88% | 82% | 95% | 90% |
| Help their children develop and learn | 82% | 84% | 94% | 90% | 86% |

Comparison by Age

When comparing the proportions of Family Surveys returned with the Child Count Data based on the age of the child, the largest discrepancy would be in the 2-3 year age category. While this group makes up 63% of our child count, only 55% of the surveys were from this group.

| Age | Family Survey | | Child Count | | Difference |
|--------------|---------------|----|-------------|----|------------|
| | # | % | # | % | |
| Not Reported | 19 | 3% | 0 | 0% | 3% |

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

| | | | | | |
|---------|-----|------|------|------|-----|
| Birth-1 | 66 | 12% | 162 | 9% | 3% |
| 1-2 | 173 | 30% | 483 | 28% | 2% |
| 2-3 | 321 | 55% | 1095 | 63% | -8% |
| Total | 579 | 100% | 1740 | 100% | |

When comparing the survey responses by age at the time of survey completion, families of all age groups reported that they know their rights and that they can effectively communicate their children's needs. Responses are a little lower when asked about their ability to help their children develop and learn. And the 2-3 year age group reported lower responses than the other age groups.

| Age | # | Know Their Rights | Effectively Communicate their children's Needs | Help Their Children Develop and Learn |
|--------------|-----|-------------------|--|---------------------------------------|
| Not Reported | 19 | 100% | 100% | 75% |
| Birth-1 | 66 | 91% | 94% | 91% |
| 1-2 | 173 | 91% | 90% | 87% |
| 2-3 | 321 | 90% | 89% | 84% |
| Total | 579 | 91% | 90% | 86% |

Was sampling used? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No

Yes, the data accurately represent the demographics of the State

No, the data does not accurately represent the demographics of the State

Provide additional information about this indicator (optional)

Family surveys are hand distributed to every family who has an active IFSP. Every effort is made to encourage all families to complete their surveys, but due to confidentiality, it is difficult to ensure representativeness of the surveys being returned.

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Child Find (Birth to One)**

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

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

Historical Data

Baseline Data: 2010

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Target ≥ | | | 7.10% | 7.10% | 7.20% | 2.97% | 3.00% | 1.03% | 1.03% | 1.03% | 1.03% |
| Data | | 5.44% | 6.98% | 5.00% | 4.48% | 1.27% | 0.96% | 0.94% | 0.78% | 0.99% | 0.91% |

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|----------|-------|-------|-------|-------|
| Target ≥ | 1.03% | 1.03% | 1.03% | 1.03% |

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Refer to Stakeholder Involvement section in the Introduction. Based on input from stakeholders, no revisions to targets will be made at this time.

Prepopulated Data

| Source | Date | Description | Data | Overwrite Data |
|--|-----------|--|--------|----------------|
| SY 2015-16 Child Count/Educational Environment Data Groups | 7/14/2016 | Number of infants and toddlers birth to 1 with IFSPs | 162 | null |
| U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2015 | 6/30/2016 | Population of infants and toddlers birth to 1 | 19,028 | null |

FFY 2015 SPP/APR Data

| Number of infants and toddlers birth to 1 with IFSPs | Population of infants and toddlers birth to 1 | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|---|----------------|------------------|---------------|
| 162 | 19,028 | 0.91% | 1.03% | 0.85% |

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Child Find (Birth to Three)**

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

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

Historical Data

Baseline Data: 2010

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|----------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Target ≥ | | | 7.30% | 7.30% | 7.37% | 4.44% | 4.45% | 2.82% | 2.82% | 2.82% | 2.82% |
| Data | | 6.71% | 7.48% | 6.94% | 6.53% | 3.78% | 3.62% | 3.49% | 3.42% | 3.07% | 2.74% |

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|----------|-------|-------|-------|-------|
| Target ≥ | 2.82% | 2.82% | 2.82% | 3.63% |

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Refer to Stakeholder Involvement section in the Introduction. Based on input from stakeholders, no revisions to targets will be made at this time.

Prepopulated Data

| Source | Date | Description | Data | Overwrite Data |
|--|-----------|--|--------|----------------|
| SY 2015-16 Child Count/Educational Environment Data Groups | 7/14/2016 | Number of infants and toddlers birth to 3 with IFSPs | 1,740 | |
| U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2015 | 6/30/2016 | Population of infants and toddlers birth to 3 | 56,025 | |

FFY 2015 SPP/APR Data

| Number of infants and toddlers birth to 3 with IFSPs | Population of infants and toddlers birth to 3 | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|---|----------------|------------------|---------------|
| 1,740 | 56,025 | 2.74% | 2.82% | 3.11% |

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 7: 45-day timeline**

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2005

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|--------|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target | | | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Data | | 98.00% | 98.00% | 97.00% | 97.00% | 98.00% | 98.00% | 97.00% | 94.00% | 90.27% | 90.27% |

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|--------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% |

FFY 2015 SPP/APR Data

| Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline | Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|--|--|----------------|------------------|---------------|
| 1,293 | 1,988 | 90.27% | 100% | 93.71% |

| | |
|---|-----|
| <p>Number of documented delays attributable to exceptional family circumstances This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.</p> | 570 |
|---|-----|

What is the source of the data provided for this indicator?

- State monitoring
- State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2015 - June 30, 2016.

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Statewide data for all eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline was collected from the EI database for the period 7/1/15 - 6/30/16. The timelines were from the date of referral to the initial IFSP meeting and were based on actual, not an average, number of days.

Provide additional information about this indicator (optional)

Actual Target Data for FFY 2015:

Statewide data for eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline was collected from the EI database for the period 7/1/15 - 6/30/16. The timelines were from the date of referral to the initial IFSP meeting and were based on actual, not average, number of days.

- 1863 (94%) of infants and toddlers received an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
- Exceptional Family Circumstances. 563 of the 1988 (28%) infants and toddlers did not have an initial evaluation, initial assessment and initial IFSP meeting within Part C's 45-day timeline due to exceptional family circumstances as defined by IDEA Part C. This number is included in both the numerator and denominator. The following are the two predominate exceptional family circumstances:

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- Schedule conflict
- Family request

• **Program Reasons.** 125 of the 1988 (6%) infants and toddlers did not have an initial evaluation, initial assessment and initial IFSP meeting within Part C's 45-day timeline due to program reasons. The predominate program reasons was late MDEs.

• **Identifying Noncompliance.** Of the 125 infants and toddlers who did not receive an initial evaluation and initial assessment and an initial IFSP meeting within Part C's 45-day timeline, 122 (98%) infants and toddlers received an initial evaluation and initial assessment and had an initial IFSP meeting, although untimely and three (3) children left the program's jurisdiction prior to completing the IFSP.

Range of Days Beyond the 45-day timeline to Receive an Initial Evaluation and Assessment and Initial IFSP
(For the 125 late IFSPs)

| Range of Days Beyond The Due Date | # of children | % of Children |
|-----------------------------------|---------------|---------------|
| 1 - 30 days | 61 | 49% |
| 31 -60 days | 28 | 22% |
| 61 - 90 days | 15 | 12% |
| > 90 days | 18 | 15% |
| Left Program Jurisdiction | 3 | 2% |

- The state accounted for all instances of noncompliance identified via the Part C database. There were 15 programs servicing the 125 children who did not receive an initial evaluation, initial assessment and an initial IFSP meeting within Part C's 45-day timeline.
 - 8 of the 15 programs were issued findings of noncompliance in FFY 2015, based on FFY 2014 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (e.g., date of written notification).
 - 2 of the 15 programs were not issued a finding due to on-going noncompliance (programs did not demonstrate correction from the finding issued in FFY 2014, based on FFY 2013 data [one program], and 2013, based on FFY 2012 data [one program]).
 - 5 of the 15 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to the written issuance of findings. The data demonstrated that all infants and toddlers received initial IFSPs, although late, unless the child was not under the program's jurisdiction. Updated data was used to verify that the program is now correctly implementing the Timely Evaluation and Assessments and initial IFSPs requirement for all children (100%).

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2014

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|--------------------------------------|---|--|--|
| 11 | 8 | 2 | 1 |

FFY 2014 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

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

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

In verifying correction of noncompliance, the State determined if each of the EI programs with identified noncompliance was correctly implementing the requirements as stated in 34 CFR §§303.321(e), 303.322(e)(1), and 303.342(a). Programs with identified noncompliance were required to submit a copy of the signature page of all the Initial IFSPs completed along with a list from the EI Database that includes the child's name, Part 3 referral date, 45-day due date, and date of the initial IFSP. The Programs were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

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

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

Describe how the State verified that each individual case of noncompliance was corrected

For FFY 2008 through FFY 2015, the Part C LA verified that each of the EI Programs with findings of noncompliance for not conducting an initial evaluation, initial assessment and initial IFSP within Part C's 45-day timeline, completed all evaluations, assessments and initial IFSPs, although late. The status of child specific correction was included in previous APRs target data. It included the percentage of children that received an initial evaluation, initial assessment and initial IFSP, although 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 must immediately correct by completing the initial IFSP, although late and submit a copy of the signature page of the IFSP to the Part C LA.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The program that continue to be in noncompliance has received support from another Program Manager who assisted the Program in creating a system to track and report noncompliance in a timely manner.

The Program with on-going noncompliance was required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

The Program must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The Program with on-going noncompliance was required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

The Program must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

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

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

Historical Data

Baseline Data: 2005

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|--------|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target | | | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Data | | 86.00% | 99.00% | 97.00% | 99.00% | 98.00% | 99.80% | 98.00% | 99.00% | 96.97% | 99.10% |

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|--------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% |

FFY 2015 SPP/APR Data

Explanation of Alternate Data

Children referred and found eligible less than 90 days prior to their third birthday were not included in the denominator.

Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday.

- Yes
- No

| Number of children exiting Part C who have an IFSP with transition steps and services | Number of toddlers with disabilities exiting Part C | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|---|---|----------------|------------------|---------------|
| 1,112 | 1,206 | 99.10% | 100% | 93.62% |

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of children exiting Part C who have an IFSP with transition steps and services" field to calculate the numerator for this indicator.

17

Explanation of Slippage

Due to on-site monitoring and technical assistance regarding what constitutes a complete and timely transition plan as well as, data validation may have resulted in slippage. The State LA worked with the Programs to increase their understanding on the required components of a transition plan. This resulted in the Program entering a "no" in the database if the transition plan did not meet Hawaii's definition of a complete transition plan.

What is the source of the data provided for this indicator?

- State monitoring
- State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2015 - June 30, 2016

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Statewide data for the timely Transition Plan for all children who exited Part C in FFY 15 was collected from the EI Database for the period 7/1/15-6/30/16.

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Provide additional information about this indicator (optional)

Actual Target Data for FFY 2015:

Transition Plan

- 1129 of 1206 (94%) 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 and found eligible less than 90 days prior to their third birthday were not included in the calculation.
- 77 of 1206 (6%) 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 be updated at each IFSP meeting and it must include all the steps and services listed in the IDEA, Part C regulations.
- There were 18 programs serving the 77 children who did not have a timely and complete Transition Plan in their IFSP with steps and services.
 - 10 of the 18 programs were issued a finding in FFY 2016, based on FFY 2015 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (i.e., date of written notification).
 - 2 of the 18 programs were not issued a finding due to on-going noncompliance (finding issued in FFY 2014, based on FFY 2013 data).
 - 6 of the 18 programs were not issued a finding because they submitted required data that was verified by Part C LA to demonstrated correction prior to the written issuance of findings. The data demonstrated that all infants and toddlers had a complete transition plan, although late, unless the child was not under the program's jurisdiction. Updated data was used to verify that the program is now correctly implementing the timely and complete transition plan requirement for all children (100%).

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2014

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|--------------------------------------|---|--|--|
| 11 | 7 | 2 | 2 |

FFY 2014 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

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

In verifying correction of noncompliance, the State determined that each of the EI programs with identified noncompliance was correctly implementing the requirements as stated in 34 CFR §303.148(b)(4). Programs with identified noncompliance were required to submit a copy of the transition plan along with a list from the EI 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 the child's third birthday). The Programs were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

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

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

Describe how the State verified that each individual case of noncompliance was corrected

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

For FFY 2007 through FFY 2015 the Part C LA verified that each of the EI Programs with findings of noncompliance for a complete and timely transition plan, developed a complete transition plan, although late, unless the child was no longer within the jurisdiction of the EI Program. The Part C LA required EI Programs to revise and complete a child's transition plan if, through on-site monitoring it was discovered that the child's transition plan was incomplete. The EI Programs were required to submit the completed transition plan to the Part C LA.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Programs with on-going noncompliance were required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

Programs must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

Agencies of the Programs still in noncompliance have been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8B: Early Childhood Transition**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

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

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

Historical Data

Baseline Data: 2005

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|--------|------|--------|------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target | | | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Data | | 94.00% | 100% | 99.00% | 91.00% | 96.00% | 91.00% | 92.00% | 90.00% | 91.40% | 88.81% |

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|--------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% |

FFY 2015 SPP/APR Data

Explanation of Alternate Data

Children referred and found eligible less than 90 days prior to their third birthday were not included in the denominator.

Data include notification to both the SEA and LEA

- Yes
- No

| Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services | Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|---|--|----------------|------------------|---------------|
| 780 | 1,227 | 88.81% | 100% | 90.80% |

| | |
|---|-----|
| <p>Number of parents who opted out This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.</p> | 368 |
|---|-----|

Describe the method used to collect these data

Statewide data for the timely Transition Notice for all children who exited Part C in FFY 2015 was collected from the EI Database for the period 7/1/15-6/30/16.

Do you have a written opt-out policy? Yes

Is the policy on file with the Department? Yes

What is the source of the data provided for this indicator?

- State monitoring
- State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

2/7/2017

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Statewide data for the timely Transition Notice for all children who exited Part C in FFY 2015 was collected from the EI Database for the period 7/1/15-6/30/16. Children referred less than 135 days prior to their third birthday and a timely Transition Notice was not submitted to the SEA and LEA and children that exited Part C more than 90 days prior to their third birthday were not included in the numerator and denominator. Parents who opted out of notifying the SEA and LEA were not included in the denominator.

Provide additional information about this indicator (optional)

Transition Notice

- 780 of 859 (91%) children exiting Part C and potentially eligible for Part B services exited with timely notification to the SEA and 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 and found eligible less than 90 days prior to their third birthday were not included in the calculation.
- Opt Out Option: 368 children exiting Part C and potentially eligible for Part B services exited without providing notification to the SEA and 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 were not included in either the above numerator or denominator. Due to the high number of “opt outs” for the Transition Notice, the database was revised to track reasons why families were “opting out” of the Transition Notice. The predominate reason why families “opted out” of the Transition Notice was that they were not interested in having their child referred to DOE.
- Program Reasons: 79 of 859 (9%) children exiting Part C and potentially eligible for Part B exited without timely notification to the SEA and LEA due to program reasons. It is Hawai'i's policy that the transition notice must be sent to the SEA and LEA at least 90 days prior to the child's third (3rd) birthday. The timeline is in place to support DOE's Child Find efforts to ensure that all children who are potentially eligible for DOE can receive a timely evaluation and start the Part B program by their third (3rd) birthday.
- Of the 79 children exiting without timely notification to the SEA and LEA, notification was provided to the SEA and LEA for 37 of these children, although untimely and 42 children left the jurisdiction of Part C prior to issuing the SEA and LEA notification.

Range of Days for Notification to SEA and LEA
(For the 79 children that exited without a timely notification to SEA and LEA)

| Range of Days Beyond The Due Date | # of children | % of Children |
|-----------------------------------|---------------|---------------|
| 1 - 30 days | 34 | 43% |
| 31 -60 days | 1 | 1% |
| 61 - 90 days | 1 | 1% |
| > 90 days | 1 | 1% |
| Left Program Jurisdiction | 42 | 54% |

- There were 18 programs serving the 79 children who exited Part C with either untimely notification to the SEA and LEA or insufficient documentation that notification to the SEA and LEA was provided:
 - 1 of the 18 programs were issued findings in FFY 2016, based on FFY 2015 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (i.e., date of written notification).
 - 3 of the 18 programs were not issued a finding due to on-going noncompliance (programs did not demonstrate correction from the finding issued in FFY 2015, based on FFY 2014 data [two programs] and FFY 2013, based on FFY 2012 data [one program])
 - 14 of the 18 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrated correction prior to the written issuance of findings. The data demonstrated that transition notices for all infants and toddlers were provided to the SEA and LEA unless the family “opted out” or child was not under the program’s jurisdiction. Updated data was used to verify that the Programs are now correctly implementing the requirement of notifying the SEA and LEA of all children who are potentially eligible for DOE (100%).

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response, **not including correction of findings**

Correction of Findings of Noncompliance Identified in FFY 2014

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|--------------------------------------|---|--|--|
| 11 | 9 | 1 | 1 |

FFY 2014 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

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

In verifying correction of noncompliance, the State determined if each of the EI programs with identified noncompliance was correctly implementing the requirements as stated in 34 CFR §303.344(h). Programs with identified noncompliance were required to submit a copy of the documentation of when the transition notice was sent to the SEA and LEA along with a list from the EI 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 the child's third birthday). The Programs were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

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

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

Describe how the State verified that each individual case of noncompliance was corrected

For FFY 2008 through FFY 2014, the Part C LA verified that each of the EI Programs with findings of noncompliance for not providing timely notification to the SEA and LEA of potentially eligible children for Part B services, all children had a notification to the SEA and LEA, although late, unless the child was no longer within the jurisdiction of the EI Program. The status of child specific correction was included in previous APRs target data. It included the percentage of children with notification to the SEA and LEA, though late, unless the child was no longer within the jurisdiction of the EI Program. The report from the database includes the actual date the notification was sent to both the SEA and LEA. If the notice was sent on two separate dates, the later date is entered into the database. It also includes if it was late, how many days late it occurred.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The Program with on-going noncompliance was required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

The Program must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The Program and their Agency has been notified that they continue to be in long-standing noncompliance. In addition to their CAP, the Program must submit weekly status reports and the Agency must submit a Long-Standing NonCompliance Plan that includes the following:

- Strategies that will be implemented to support the Program in completing their CAP (e.g, support from another Program Manager; time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g, cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the State LA

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- Template fro the weekly status report that lists all indicators

The updated Long-Standing NonCompliance Plan is due by February 28, 2017.

FFY 2012 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The Program with on-going noncompliance was required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

The Program must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8C: Early Childhood Transition**

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

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

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

Historical Data

Baseline Data: 2005

| FFY | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|--------|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Target | | | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Data | | 94.00% | 96.00% | 97.00% | 94.00% | 93.00% | 93.00% | 89.00% | 88.00% | 88.43% | 90.34% |

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

| FFY | 2015 | 2016 | 2017 | 2018 |
|--------|------|------|------|------|
| Target | 100% | 100% | 100% | 100% |

FFY 2015 SPP/APR Data

Explanation of Alternate Data

Children referred and found eligible less than 90 days prior to their third birthday were not included in the denominator.

Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services

- Yes
- No

| Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B | Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B | FFY 2014 Data* | FFY 2015 Target* | FFY 2015 Data |
|---|--|----------------|------------------|---------------|
| 397 | 1,249 | 90.34% | 100% | 90.41% |

| | |
|---|-----|
| Number of toddlers for whom the parent did not provide approval for the transition conference <i>This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.</i> | 780 |
| Number of documented delays attributable to exceptional family circumstances <i>This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.</i> | 27 |

What is the source of the data provided for this indicator?

- State monitoring
- State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2015 - June 30, 2016.

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Statewide data for the timely Transition Conference for all children who exited Part C in FFY 2015 was collected from the EI Database for the period 7/1/15-6/30/16. Children referred and found eligible less than 90 days prior to their third birthday were not included in the numerator and denominator. Parents who declined the transition conference were not included in the denominator.

Provide additional information about this indicator (optional)

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.

- 424 of 469 (90%) children exiting Part C had a timely transition conference. Children referred and found eligible less than 90 days prior to their third birthday were not included in the calculation.
- 780 families declined a Transition Conference and are not included in either the above numerator or denominator. Due to the high number of declines for a Transition Conference, the database was revised to track reasons why families were declining Transition Conferences. The two predominate reasons why families declined the Transition Conference were:
 - Families are familiar with the options
 - Families already decided on a setting/placement
- **Exceptional Family Circumstances:** 27 of 424 (6%) children exiting Part C did not have a timely Transition Conference due to exceptional family circumstances. They were included in both the above numerator and denominator. The two predominate exceptional family circumstances were family originally declined a transition conference then, changed their mind as well as due to schedule conflicts and family requests.
- **Program Reasons:** 45 of 469 (10%) children exiting Part C did not have a timely Transition Conference due to program reasons. The predominate program reason is unknown as majority of the program reasons were left blank in the database. Blanks in the database is automatically counted as a program reason.
- Of the 45 families that did not receive a timely Transition Conference, 32 received a Transition Conference, although untimely and 13 children left the jurisdiction of Part C prior to having a Transition Conference.

Range of Days to Initiate Services
(For the children not receiving services on the IFSP in a timely manner)

| Range of Days Beyond The Due Date | # of children | % of Children |
|-----------------------------------|---------------|---------------|
| 1 - 30 days | 25 | 56% |
| 31 -60 days | 6 | 13% |
| 61 - 90 days | 1 | 2% |
| > 90 days | 0 | 0% |
| Left Program Jurisdiction | 13 | 29% |

- There were 13 programs serving the 45 children who exited Part C with an untimely Transition Conference or having no Transition Conference prior to exiting Part C.
 - 3 of the 13 programs were issued findings in FFY 2016, based on FFY 2015 data. They received a letter of notification of noncompliance and were informed that they must demonstrate correction, as soon as possible, but no later than one year of identification (e.g. date of written notification).
 - 5 of the 13 programs were not issued a finding due to on-going noncompliance (programs did not demonstrate correction from the finding issued in FFY 2015, based on FFY 2014 data [three programs], FFY 2013, based on FFY 2012 data [one program] and FFY 2012, based on FFY 2011 data [one program]).
 - 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 demonstrated 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. Updated data was used to verify that the Programs are now correctly implementing the transition conference requirements for all infants and toddlers (100%).

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response, **not including correction of findings**

Correction of Findings of Noncompliance Identified in FFY 2014

| Findings of Noncompliance Identified | Findings of Noncompliance Verified as Corrected Within One Year | Findings of Noncompliance Subsequently Corrected | Findings Not Yet Verified as Corrected |
|--------------------------------------|---|--|--|
| 7 | 5 | 0 | 2 |

FFY 2014 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

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

In verifying correction of noncompliance, the State determined if each of the EI programs with identified noncompliance was correctly implementing the requirements as stated in 34 CFR §303.148(b)(2)(i) (as modified by IDEA sections 637(a)(9)(A)(ii)(II)). Programs with identified noncompliance were required to submit a copy of the documentation of the transition conference along with a list from the EI 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 the child's third birthday). Programs were required to submit this updated data to demonstrate correction based on the monitoring data percentage as follows:

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

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

Describe how the State verified that each individual case of noncompliance was corrected

For FFY 2008 through FFY 2014, the Part C LA verified that each of the EI Programs with findings of noncompliance for not conducting timely transition conferences, all children had a transition conference, although late, unless the child was no longer within the jurisdiction of the EI Program. The status of child specific correction was included in previous APRs target data. It included the percentage of children that had a 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) and the actual date of the transition conference. It also includes if it was late, how many days late it occurred.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Programs with on-going noncompliance were required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

Programs must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

Agencies of the Programs still in noncompliance have been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Programs with on-going noncompliance were required to complete the Local Contributing Factor Tool for Indicators 1, 2, 3, 4, 7, and 8. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP report.

Programs must also submit a weekly status reports of all indicators with long-standing noncompliance. The State LA provided technical assistance in response to the weekly status reports as needed.

Agencies of the Programs still in noncompliance have been required to submit a Long-Standing Noncompliance Plan by February 28, 2017 that includes the following:

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- Agency strategies that will be implemented to support the Program in completing their CAP (e.g., support from another Program Manager, time set aside on a weekly basis to work on CAPs)
- How the Agency will monitor the Program's submission of CAPs (e.g., cc on e-mails, bi-monthly meetings)
- Any technical assistance needed by the Part C LA

FFY 2012 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The Program that continues to be in noncompliance is hired a new Program Manager. The Program Manager is reviewing the system to track and report on noncompliance in a timely manner. The new Program Manager will receive support from another Program Manager within the Agency. The State LA also provided technical assistance regarding the CAP process.

The Program Manager will have three reporting months to demonstrate correction of noncompliance. If there is no progress, weekly status reports will be required as well as a Long-Standing Noncompliance Plan from the Agency as outlined above.

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 9: Resolution Sessions

Explanation of why this indicator is not applicable

The Part C Lead Agency did not receive any hearing requests during FFY 2015.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: 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)

This indicator is not applicable.

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 10: Mediation**

Explanation of why this indicator is not applicable

There were no mediations for FFY 2015.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

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

This indicator is not applicable.

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: State Systemic Improvement Plan**

Explanation of why this indicator is not applicable

This indicator will be submitted by April 3, 2017.

Monitoring Priority: General Supervision

Results indicator: The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

This indicator is not applicable.

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Certify and Submit your SPP/APR**

I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

Selected: Designated by the Lead Agency Director to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name: Charlene Robles

Title: Part C Coordinator

Email: charlene.robles@doh.hawaii.gov

Phone: 808-594-0007