

Executive Summary:

The Hawaii 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 (EI) 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.

For FFY 2017 (7/1/17 - 6/30/18) there were 18 Early Intervention (EI) programs statewide that served infants and toddlers that met 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 scores 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 that 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 Hawaii is committed to providing 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 it's 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.

Attachments

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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 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.

Step 1: Monitoring

All Part C EI programs are monitored annually. Data is gathered from the Hawaii Early Intervention Data System (HEIDS), 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, Hawaii 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.

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- 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
- Item 6k: MDE Consent
- Item 6l: EI Goals Initial Rating Date
- Item 6m: EI Goals Rating 1B
- Item 6n: EI Goals Rating 2B
- Item 6o: EI Goals Rating 3B
- Item 6p: EI Goals Exit Rating Date
- Item 6q: EI Goals Exit Rating 1A
- Item 6r: EI Goals Exit Rating 1B
- Item 6s: EI Goals Exit Rating 2A
- Item 6t: EI Goals Exit Rating 2B
- Item 6u: EI Goals Exit Rating 3A
- 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 (CC) 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. Procedural safeguards are also discussed and written information is offered at every IFSP meeting, when the family expresses concerns and part of the Prior Written Notice.

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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 Technical Assistance (TA) Accessed:

The Part C LA consulted with the Early Childhood Technical Assistance (ECTA) Center, The Center for IDEA Early Childhood Data Systems (DaSy), and the National Center for Systemic Improvement (NCSI) on how to improve compliance and performance across APR indicators. ECTA, DaSy and NCSI provided clarification on DEC recommended practices, child outcomes, social-emotional development, Primary Service Provider Approach to Teaming, Coaching Model and shared resources. The Part C LA sent

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representatives to various conferences to access TA such as: Early Childhood Personnel Center Leadership Institute; and Social and Emotional Outcomes Cross State Learning Collaborative.

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.

Hawaii also received targeted TA from OSEP during an on-site visit in January 2019. OSEP shared strategies to address long-standing noncompliance and reinforced working with our TA consultants to explore revising our General Supervision (CA) process to address long standing noncompliance, especially Indicator 1: Timely Services.

Local TA provided:

- At quarterly Program Manager meetings, Program Managers and State staff that provide local programs with TA 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 TA as needed. A technical assistance form has been distributed to Programs who will submit it on a quarterly basis so the State can track TA being provided to Programs related to indicators with on-going noncompliance.

Regarding timely services:

As part of Hawaii's State Systemic Improvement Plan (SSIP), there is a staffing implementation workgroup and telepractice implementation workgroup. If the workgroups meet their outcomes, it will help the State improve timely services. National TA consultants from ECTA, DaSy, and NCSI provided Hawaii with guidance, resources, and linked Hawaii with other States regarding telepractice.

Hawaii will be working with National TA consultants from ECTA, DaSy, and NCSI to review and revise Hawaii's General Supervision system that includes the CAP process. Hawaii will be looking at other States that have long standing noncompliance and what strategies they implemented to support correction efforts for timely services.

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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.

The Part C Lead Agency provides a four-day Part C EI Orientation for all new staff that is also open to any existing 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. On-line training modules on the COS Process were piloted with all providers in the SSIP Demonstration Sites and will be implemented to all programs statewide. The Part C LA collaborated with ECTA/DaSy/NCSI on providing training on writing functional outcomes to all programs statewide. SSIP Demonstration Sites also completed the Social Emotional Competencies Self-Assessment pre and post training and it will be used on an annual basis to develop an individualized training plan. It will also be used by the State as an assessment of statewide training that may be needed.

The Part C Lead Agency also participated in the National Early Childhood Personnel Center (ECPC) Leadership Cohort. The focus of the Leadership Cohort was to collaborate with the early childhood community to build an inter-agency professional development system. Hawaii has recently moved into the Intensive Comprehensive System of Personnel Development (CSPD) cohort with ECPC. Hawaii met the initial requirement to have commitment from the following groups of people: Part C EI (DOH), Part B 619 Preschool Special Education (DOE), Early Childhood (DOH, Executive Office of Early Learning, Early Childhood Action Strategy), Higher Education/University Center of Excellence on Developmental Disabilities (University of Hawaii (UH), UH Center on Disabilities Studies) and families (Parent representative, Leadership in Disabilities and Achievement in Hawaii). Hawaii's ECPC CSPD Leadership Team also includes other Early Childhood partners in its efforts to build an integrated Early Childhood CSPD. Other partners include: Hawaii Home Visiting Network, Early Head Start/Head Start and Public Health Nursing. 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 Hawaii’s APR for FFY 2017 included:

1. The HDOH, EIS which is identified as the Part C LA worked with the EI System Improvement Team to address specific indicators as identified in the approved APR/State Performance Plan (SPP).
2. On-going meetings with the identified EI System Improvement and Training Team 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, Hawaii 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 2017 APR data, FFY 2016 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 Team and the Part C LA.
7. The APR was drafted by members of the EI System Improvement 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 75 individuals provided recommendations to the development of the APR. Because of Hawaii’s broad eligibility and geography, it was important that there was broad representation that included: Part C 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 Hawaii’s population. The following stakeholders from the islands of Oahu, Hawaii, Maui, Kauai, and Molokai were invited:

- Members of the HEICC
- HDOH administrators, care coordinators (Hawaii’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
 - Home Visiting Network
- 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 Hawaii’i)
- Parents

Attachments

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Reporting to the Public:

How and where the State reported to the public on the FFY 2016 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 2016 APR, as required by 34 CFR §303.702(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 2016 APR in 2018, is available.

The SPP/APR and performance of each EIS Program in the State for FFY 2016 was 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. The SPP/APR and performance of each EIS Program in the State for FFY 2017 will be posted on the HDOH EIS website within 120 days of the State’s submission of the FFY 2017 SPP/APR in February 2019.

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Actions required in FFY 2016 response

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 1: Timely provision of services

Historical Data and Targets

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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%

FFY	2015	2016
Target	100%	100%
Data	67.14%	57.69%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

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Indicator 1: Timely provision of services

FFY 2017 Data

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
118	198	57.69%	100%	73.23%	Did Not Meet Target	No Slippage
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>						27

Include your State's criteria for "timely" receipt of early intervention services (i.e., the time period from parent consent to when IFSP services are actually initiated).

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."

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 273 records were selected for on-site monitoring within the time period 7/1/17- 6/30/18 across all 18 Part C programs. The EI Self Assessment Monitoring (SAM) Tool which was developed by Part C LA with feedback from EI providers was utilized to gather data.

For FFY 2017, the Part C LA Monitoring Team completed the SAM tool for each of the EI programs.

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

- Names of all children with an Initial, Review or Annual IFSP between 7/1/17 – 3/31/18 were obtained by Part C LA from each program. The timeframe was chosen to ensure that there were 30 days to confirm that services were provided in a timely manner within FFY 2017 at the time of monitoring.
- Part C LA identified 10% of children at each program/section based on the 12/1/17 child count, or a minimum of fifteen (15) children to be monitored, unless there were an insufficient number of children who met the above criteria. If there were an insufficient number of children, all were chosen to ensure as complete monitoring as possible. This resulted in a review of 273 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 198 children as 75 children had no new services identified on either their Review or Annual IFSP.

Determination of Timeliness: The SAM Tool was completed for each child selected using the specified IFSP (Initial, Review, Annual), following the guidelines developed by Part C LA to determine if services were timely, consistent with Hawaii's definition for timely services. If a child/family had multiple services listed on the IFSP, all services must have been initiated within 30 days for the services to be considered timely for the child/family.

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

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

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was considered a program reason and therefore did not meet the definition of timely services.

- If there was no documentation that the service was provided, it was considered a program reason and therefore did not meet the definition of timely services.

Self-Assessment Results

- Raw data was gathered by Part C LA.
- Data was inputted into the SAM database, which was developed by Part C LA.
- Data was analyzed for noncompliance with Timely Services.
- Data was given to each program as part of the notification of FFY 2018 findings based on data from FFY 2017.

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)

FFY 2017 Actual Data Discussion:

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

145 of 198 (73%) of infants and toddlers monitored receive EI services on their IFSPs in a timely manner.

- Exceptional Family Circumstances. 27 of the 198 (14%) infants and toddlers monitored did not receive timely services due to exceptional family circumstances as defined by IDEA Part C. This number is included in both the above numerator and denominator. The following are the three predominate family circumstances that impacted the scheduling of timely services:
 - Child/Family sick
 - Cancelled appointment
 - Did not return calls in a timely manner
- Program Reasons. 53 of the 198 (27%) 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 staff vacancies.
- Identifying Noncompliance. Of the 53 children where services were not initiated in a timely manner due to program reasons, 6 children left the program's jurisdiction before the service was implemented; for 4 children, the service was discontinued before it was initiated, and the remaining 43 children's services on their IFSP were initiated, although late.

Range of Days to Initiate Services

(For the 53 children not receiving services on their IFSP in a timely manner)

Range of Days Beyond Due Date	# of Children	% of Children
1-30 days	26	49%
31-60 days	7	13%
61-90 days	4	8%
>90 days	6	11%
Service Discontinued	4	8%
Left Program's Jurisdiction	6	11%

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 16 programs serving the 53 children who did not receive services in a timely manner.

- 5 of the 16 programs were issued findings in FFY 2018, based on FFY 2017 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).
- 7 of the 16 programs were not issued a finding due to on-going noncompliance (one program did not demonstrate correction from

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the finding issued in FFY 2012, based on FFY 2011 data; one program did not demonstrate correction from the finding issued in FFY 2014, based on FFY 2013 data; one program did not demonstrate correction from the finding issued in FFY 2015, based on FFY 2014 data; three programs did not demonstrate correction from the findings issued in FFY 2016, based on FFY 2015 data; one program did not demonstrate correction from the finding issued in FFY 2017, based on FFY 2016 data).

- 4 of the 16 programs were not issued findings because they submitted required data that was verified by Part C LA to demonstrate correction prior to written issuance of findings (e.g., all individual child noncompliance was corrected although late and updated data was used to confirm that the program was correctly implementing the timely services requirement for all children (100%)).

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Indicator 1: Timely provision of services

Required Actions from FFY 2016

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

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Indicator 1: Timely provision of services

Correction of Previous Findings of Noncompliance

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	2	0	3

FFY 2016 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 (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance was correctly implementing the requirement. Programs with identified noncompliance were required to complete "Worksheet A" from the SAM tool for every child who had an Initial, 6-month Review, and Annual IFPS. 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

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

2 programs demonstrated correction as outlined above within one year of notification:

- Program 1 submitted three consecutive months of data that showed 100% for a total of 5 records. Due to low enrollment numbers, the Program did not have enough IFSPs to meet the minimum amount of required records. The contract ended prior to the minimum amount of records could be gathered. The Program that took over serving the geographic area demonstrated correction by submitting two consecutive months of data that showed 100% for a total of 31 children.
- Program 1 submitted two consecutive months of data that showed 100% for a total of 17 records.

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

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 respective APR's actual target data discussion in the "Additional information about this indicator" section. It included the percentage of children who received all services listed, although 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 IF SP, although late, and submit documentation to the Part C LA that indicated when the service was initiated.

FFY 2016 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The three Programs with on-going noncompliance were required to complete the Local Contributing Factor Tool (LCFT) for Indicators 1 and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their respective monthly CAP report. In addition, the Programs were required to complete the Programming On-going Noncompliance Worksheet that included the following components:

- System to track timely services
- Tracking attempts to schedule visits and reasons why a service is late
- Barrier(s) and possible solutions to providing timely services
- Does the documented reason why a service is late match determined barriers to providing timely services

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- What technical assistance (TA) they have accessed from the State
- Additional TA requests from the State

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

The Agency of the Programs still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by January 31, 2019 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 TA needed from the Part C LA.

Correction of Findings of Noncompliance Identified Prior to FFY 2016

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2016 APR		Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY2015	1	null	0	1
FFY2014	1	null	0	1
FFY2012	1	null	0	1

FFY 2015 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One program has not yet demonstrated subsequent correction prior to the FFY 2017 APR submission.

The one Program with on-going noncompliance was required to complete the Local Contributing Factor Tool (LCFT) for Indicators 1 and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their respective monthly CAP report. In addition, the Program was required to complete the Programming On-going Noncompliance Worksheet that included the following components:

- System to track timely services
- Tracking attempts to schedule visits and reasons why a service is late
- Barrier(s) and possible solutions to providing timely services
- Does the documented reason why a service is late match determined barriers to providing timely services
- What technical assistance (TA) they have accessed from the State
- Additional TA requests from the State

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

The Agency of the Programs still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by January 31, 2019 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 TA needed from the Part C LA.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One program has not yet demonstrated subsequent correction prior to the FFY 2017 APR submission.

The one Program with on-going noncompliance was required to complete the Local Contributing Factor Tool (LCFT) for Indicators 1 and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their respective monthly CAP report. In addition, the Program was required to complete the Programming On-going Noncompliance Worksheet that included the following components:

- System to track timely services
- Tracking attempts to schedule visits and reasons why a service is late
- Barrier(s) and possible solutions to providing timely services
- Does the documented reason why a service is late match determined barriers to providing timely services
- What technical assistance (TA) they have accessed from the State

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- Additional TA requests from the State

The Program was not required to submit weekly status reports and the Agency was not required to submit a Long-Standing Noncompliance Plan because the Program has consistently submitted monthly CAP reports.

FFY 2012 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The one Program with on-going noncompliance was required to complete the Local Contributing Factor Tool (LCFT) for Indicators 1 and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their respective monthly CAP report. In addition, the Program was required to complete the Programming On-going Noncompliance Worksheet that included the following components:

- System to track timely services
- Tracking attempts to schedule visits and reasons why a service is late
- Barrier(s) and possible solutions to providing timely services
- Does the documented reason why a service is late match determined barriers to providing timely services
- What technical assistance (TA) they have accessed from the State
- Additional TA requests from the State

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

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by January 31, 2019 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 TA needed from the Part C LA.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Services in Natural Environments
Historical Data and Targets

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%

FFY	2015	2016
Target ≥	90.00%	90.00%
Data	90.06%	90.80%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	90.00%	90.00%

Key: Blue – Data Update

Targets: Description of Stakeholder Input

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

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Services in Natural Environments
FFY 2017 Data

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)

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,638	
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Total number of infants and toddlers with IFSPs	1,712	

FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
1,638	1,712	90.80%	90.00%	95.68%	Met Target	No Slippage

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Services in Natural Environments
Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

none

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3: Early Childhood Outcomes
Historical Data and Targets

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)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

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%

	FFY	2015	2016
A1	Target ≥	53.14%	53.14%
	Data	55.52%	56.42%
A2	Target ≥	79.32%	79.32%
	Data	73.26%	75.19%
B1	Target ≥	70.81%	70.81%
	Data	69.25%	69.66%
B2	Target ≥	65.19%	65.19%
	Data	59.61%	55.64%
C1	Target ≥	67.99%	67.99%
	Data	68.31%	71.08%
C2	Target ≥	80.63%	80.63%
	Data	76.23%	77.02%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A1 ≥	54.00%	55.00%
Target A2 ≥	79.50%	80.00%
Target B1 ≥	71.00%	71.50%
Target B2 ≥	65.50%	66.00%
Target C1 ≥	68.50%	69.00%
Target C2 ≥	81.50%	82.00%

Key: Blue – Data Update

Targets: Description of Stakeholder Input

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

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3: Early Childhood Outcomes
FFY 2017 Data

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)

FFY 2017 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	1335.00
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Outcome A: Positive social-emotional skills (including social relationships)

	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	269.00	20.74%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	100.00	7.71%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	222.00	17.12%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	704.00	54.28%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
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 $(c+d)/(a+b+c+d)$.	322.00	593.00	56.42%	54.00%	54.30%	Met Target	No Slippage
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 $(d+e)/(a+b+c+d+e)$.	926.00	1297.00	73.26%	79.50%	71.40%	Did Not Meet Target	Slippage

Reasons for A2 Slippage

The meaningful difference calculator developed by the Early Childhood Outcomes Center was used to compare FFY 2016 data and FFY 2017 data and it was not a meaningful, significant decrease.

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	3.00	0.23%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	368.00	28.37%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	231.00	17.81%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	463.00	35.70%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	232.00	17.89%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
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 $(c+d)/(a+b+c+d)$.	694.00	1065.00	69.66%	71.00%	65.16%	Did Not Meet Target	Slippage
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 $(d+e)/(a+b+c+d+e)$.	695.00	1297.00	55.64%	65.50%	53.59%	Did Not Meet Target	Slippage

Reasons for B1 Slippage

The meaningful difference calculator developed by the Early Childhood Outcomes Center was used to compare FFY 2016 data and FFY 2017 data and it was a meaningful, significant decrease.
 Slippage may be due to staff shortages/turnovers which may result in not having the entire team participate in the ratings and/or have new staff or different members of the team for determining entry and exit ratings.

Reasons for B2 Slippage

The meaningful difference calculator developed by the Early Childhood Outcomes Center was used to compare FFY 2016 data and FFY 2017 data and it was a meaningful, significant decrease.
 Slippage may be due to staff shortages/turnovers which may result in not having the entire team participate in the ratings and/or have new staff or different members of the team for determining entry and exit ratings.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
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	3.00	0.23%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	207.00	15.96%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	112.00	8.64%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	344.00	26.52%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	631.00	48.65%

	Numerator	Denominator	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
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 $(c+d)/(a+b+c+d)$.	456.00	666.00	71.08%	68.50%	68.47%	Did Not Meet Target	Slippage
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 $(d+e)/(a+b+c+d+e)$.	975.00	1297.00	77.02%	81.50%	75.17%	Did Not Meet Target	Slippage

Reasons for C1 Slippage

The meaningful difference calculator developed by the Early Childhood Outcomes Center was used to compare FFY 2016 data and FFY 2017 data and it was not a meaningful, significant decrease.

Reasons for C2 Slippage

The meaningful difference calculator developed by the Early Childhood Outcomes Center was used to compare FFY 2016 data and FFY 2017 data and it was not a meaningful, significant decrease.

The number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program

The number of infants and toddlers who exited the Part C program during the reporting period, as reported in the State's part C exiting 618 data	1903
The number of those infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program.	474

Please note that this data about the number of infants and toddlers who did not receive early intervention services for at least six months before exiting the Part C program is optional in this FFY16 submission. It will be required in the FFY17 submission.

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? Yes

List the instruments and procedures used to gather data for this indicator.

Tool:
 The EI 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 COSF in FFY 2008. The form was revised again in June 2015 to include the decision tree as part of COSF.

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
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.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

How data are analyzed:

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

1. If the "Yes/No" question (which asks whether the child's functioning improved at all from the last rating occasion) on the COSF has never been answered as "Yes" at exit, then the child is counted in category (a).
2. If the "Yes/No" question (which asks whether the child's functioning improved at all from the last rating occasion) on the COSF has been answered "Yes" at exit, but not enough to move the child's functioning closer to typically developing peers, the child is counted in category (b).
3. If ratings of child functioning compared to typically developing same aged peers are higher at exit than ratings at entry (but not at age level expectations), then they will be counted in category (c).
4. If ratings of child functioning compared to typically developing same aged peers at entry are below age expectations, but at exit they are at age level expectations, then the children will be counted in category (d).
5. If ratings of child functioning compared to typically developing same aged peers at entry and exit are both at age level expectations, then children will be counted in category (e).

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 3: Early Childhood Outcomes

Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

none

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4: Family Involvement
Historical Data and Targets

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%

	FFY	2015	2016
A	Target ≥	92.00%	92.00%
	Data	90.50%	87.38%
B	Target ≥	94.00%	94.00%
	Data	90.14%	87.19%
C	Target ≥	94.00%	94.00%
	Data	85.96%	82.38%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target A ≥	92.00%	92.00%
Target B ≥	94.00%	94.00%
Target C ≥	94.00%	94.00%

Key: Blue – Data Update

Targets: Description of Stakeholder Input

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

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4: Family Involvement
FFY 2017 Data

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)

FFY 2017 SPP/APR Data

Number of families to whom surveys were distributed		1619.00
Number of respondent families participating in Part C	41.07%	665.00
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights		606.00
A2. Number of responses to the question of whether early intervention services have helped the family know their rights		665.00
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		614.00
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs		663.00
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		581.00
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn		664.00

	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	87.38%	92.00%	91.13%	Did Not Meet Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	87.19%	94.00%	92.61%	Did Not Meet Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	82.38%	94.00%	87.50%	Did Not Meet Target	No Slippage

Was sampling used? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No

The demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program. No

Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

For FFY 2018, the Part C LA will continue to make the surveys accessible by offering families the hardcopy survey with an option to do it via on-line. The link will be available to the family via e-mail so they can click on the link to access the survey. The Part C LA will continue with the tracking system to ensure program staff follow up with all families to increase the submission of surveys and have representativeness.

Include the State's analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program.

FFY 2017 Actual Data Discussion:

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 for FFY 2017 (July1, 2017 – June 30, 2018)

Family Goal	# *	%
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A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights.	606/665	91%
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.	614/663	93%
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.	581/664	88%

- Of the 1619 surveys that were distributed, 665 (576 paper surveys and 89 web-based surveys) were completed and returned for a 41% statewide return rate, a 6% increase from last year.
- 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

For FFY 2017, results in nearly every category increased with the exception of "Effectively Communicating Their Children's Needs" for the 6 months-1 year age group. However, the overall percentage statewide improved by 6%. This is in contrast to last year's results, in which this was the only category that showed improvement. This could possibly indicate that last year's result in this area was an anomaly as it did not follow the pattern for all other areas. Although those families who were receiving services for the longest amount of time was the smallest reporting category, they reported the highest percentages across all three goal areas. In line with last year's results, families still seem to struggle the most with knowing how to help their child develop and learn, however feel confident in being an advocate for their children's needs. Nationally, data shows that states report the highest percentages in "Helping Their Children Develop and Learn," while this is the area Hawaii reports the lowest percentages. Hawaii is typically at or above the national averages in both "Knowing their Rights" and "Communicating their Children's Needs," Hawaii does not do as well in the "Helping our Children" category. However, there was a 6% increase this year which may possibly be due to programs focusing on implementing the coaching model.

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>	14	100%	86%	86%
0-6 months	202	92%	95%	88%
6 months-1 year	230	90%	88%	86%
1 -2 years	182	91%	95%	89%
2 -3 years	37	95%	97%	89%
Total	665	91%	93%	88%

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

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:

- When using the Early Childhood Technical Assistance (ECTA) Center's Response Rate and Representativeness Calculator, it was determined that the response rate for the African American/Black, Asians, and Whites were representative of the population served but Native Hawaiian/Pacific Islander, more than one race, and Hispanics were not. This is a great improvement over last year's data which showed the response rate for African American/Black as the only group representative of the population served. The State LA implemented a tracking system that required Programs to document follow-up with all families to increase return rates and of the surveys and have representativeness. The State LA periodically requested the tracking sheet from Programs to ensure the follow-up with families were being done.

Ethnicity	FFY 2017			
	Family Survey	Child Count	Difference	Representative Based on Calculator
Two or More	48%	37%	11%	No
Asian	30%	33%	-2%	Yes
African American	1%	2%	0%	Yes
American Indian	0%	0%	0%	Yes
Caucasian	14%	16%	-2%	Yes
Hispanic/Latino	16%	13%	3%	No
Native Hawaiian	6%	12%	-6%	No

When using the ECTA Center's Response Rate and Representativeness Calculator, representativeness was determined as shown above.

- When comparing our two largest ethnic groups (Asians and Two or More), there was improvement in all three indicators for both groups.
- In comparison to last year's data, there were more differences between the two groups, with the Two or More population reporting higher percentages than Asians across the board.
- The biggest difference was in Helping their children develop and learn, with the difference being 8%.

Family Goal	Two or More (n=266)	Asian (n=165)	Statewide Total (n=665)

Family Goal	Two or More (n=266)	Asian (n=165)	Statewide Total (n=665)
Know their rights	91%	90%	91%
Effectively communicate their children's needs	94%	90%	93%
Help their children develop and learn	92%	84%	88%

Comparison by County of Residence

Family Survey return rates by county was not as evenly proportionate to the population served as it had been last year. The tracking system mentioned above improved the return rate and representativeness from last year and will be utilized again this year. Maui county also sent the on-line survey link via text message to families which may account for their high return rate; however, the State cannot require Programs to use their personal cell phones to text the family the on-line survey link because the State does not reimburse providers for their cell phone usage.

Based on the surveys returned:

- Honolulu reported a return rate of 69% of surveys, while serving 75% of the child count population.
- Maui was once again overrepresented with a return rate of 22%, while serving just 11% of the population.
- Kauai showed a slight improvement over last year's returns, with a nearly 2% return rate, while serving 3% of the child count population. Kauai was able to complete more than twice as many surveys as last year (11 this year, 4 last year).

County	Family Survey		Child Count		Difference
	#	%	#	%	%
Hawai'i	53	8%	187	11%	-3%
Honolulu	456	69%	1290	75%	-6%
Kauai	11	2%	52	3%	-1%
Maui	145	22%	183	11%	11%
Statewide	665	100%	1712	100%	

All four counties across the state showed increased results in all three areas:

Family Goal	Hawai'i	Honolulu	Kauai	Maui	Statewide
Know their rights	91%	90%	82%	97%	91%
Effectively communicate their children's needs	93%	91%	100%	98%	93%
Help their children develop and learn	87%	84%	100%	97%	88%

Comparison by Age

When comparing the proportions of Family Surveys returned with the Child Count Data based on the age of the child, the difference increased slightly across the board, although just slightly. The largest difference continues to be in the 2-3 year age category, and that would be consistent with the families focusing on transition during this time. If families have been in services for several years and have completed this survey in the past, they may feel they have nothing new to add, or not realize it is an annual survey and feel like they completed it already. As part of the tracking system previously mentioned, Programs will follow-up with all families and explain to families that it is an annual survey for all families and encourage all families to complete the survey, regardless of the child's age.

Age	Family Survey	Child Count	Difference
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FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

	#	%	#	%	
Not Reported	14	2%	0	0%	1%
Birth-1	73	11%	177	10%	0%
1-2	217	33%	496	29%	5%
2-3	361	54%	1039	61%	-7%
Total	665	100%	1712	100%	

When comparing the survey responses by age, results increased across the board. Surveys that did not indicate an age, reported 100% satisfaction. This year, the on-line survey link was provided to the family electronically (with consent) to make it easier to access the survey instead of having to type in the link. When comparing paper versus on-line, there was a 3% increase in on-line surveys completed. The State will continue to work on this area to improve both our return rate as well as our representativeness.

Age	#	Know Their Rights	Effectively Communicate their children's Needs	Help Their Children Develop and Learn
Not Reported	14	100%	100%	100%
Birth-1	73	93%	97%	92%
1-2	217	92%	94%	89%
2-3	361	90%	91%	85%
Total	665	91%	93%	88%

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4: Family Involvement
Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

In the FFY 2017 SPP/APR, the State must report whether its FFY 2017 response data are representative of the demographics of infants, toddlers, and families enrolled in the Part C program , and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the families responding are representative of the population.

Responses to actions required in FFY 2016 OSEP response

Representativeness for FFY 2017 is addressed in the following two sections previously discussed in Indicator 4:

- "Describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics"
- "Include the State's analysis of the extent to which the demographics of the families responding are representative of the demographics of infants, toddlers, and families enrolled in the Part C program"

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Child Find (Birth to One)
Historical Data and Targets

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%

FFY	2015	2016
Target ≥	1.03%	1.03%
Data	0.85%	0.97%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	1.03%	1.03%

Key: Blue – Data Update

Targets: Description of Stakeholder Input

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

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Child Find (Birth to One)
FFY 2017 Data

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)

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 1 with IFSPs	174	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 1	17,950	null

FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
174	17,950	0.97%	1.03%	0.97%	Did Not Meet Target	No Slippage

Compare your results to the national data

The national average for all states including Washington D.C. is 1.25%. Hawaii was below the national average for infants and toddlers birth to one with IFSPs by 0.28%. Hawaii was ranked 37th, as it served 0.97% (174/17,950) of infants and toddlers birth to 1 with IFSPs.

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Child Find (Birth to One)
Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

none

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Child Find (Birth to Three)
Historical Data and Targets

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%

FFY	2015	2016
Target ≥	2.82%	2.82%
Data	3.11%	3.08%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥	2.82%	3.63%

Key: Blue – Data Update

Targets: Description of Stakeholder Input

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

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Child Find (Birth to Three)
FFY 2017 Data

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)

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 Child Count/Educational Environment Data Groups	7/11/2018	Number of infants and toddlers birth to 3 with IFSPs	1,712	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2017	6/12/2018	Population of infants and toddlers birth to 3	53,613	

FFY 2017 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
1,712	53,613	3.08%	2.82%	3.19%	Met Target	No Slippage

Compare your results to the national data

The national average for all states including Washington D.C. is 3.26%. Hawaii was below the national average for infants and toddlers birth to three with IFSPs by 0.09%. Hawaii was ranked 21st, as it served 3.19% (1,712/53,613) of infants and toddlers birth to three with IFSPs.

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Child Find (Birth to Three)
Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

none

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 7: 45-day timeline
Historical Data and Targets

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%

FFY	2015	2016
Target	100%	100%
Data	93.71%	91.98%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 7: 45-day timeline

FFY 2017 Data

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)

FFY 2017 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 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
1,078	2,078	91.98%	100%	84.99%	Did Not Meet Target	Slippage
Number of documented delays attributable to exceptional family circumstances <i>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.</i>					688	

Reasons for Slippage

Staff shortages and staff turnover impacts the program in implementing all aspects of early intervention. When there are staff shortages, there are delays in completely MDEs and IFSPs. Staff shortages results in providers having higher caseloads which results in full schedules and incomplete and/or untimely documentation of services and attempts to schedule evaluations/assessments and IFSP meetings.

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, 2017 - June 30, 2018

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 7/1/17 - 6/30/18. 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)

FFY 2017 Actual Data Discussion:

Statewide data for eligible infants and toddlers with IFSPs for who an initial evaluation/assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline was collected from HEIDS for the period 7/1/17-6/30/18. The timelines were from the date of referral to the initial IFSP meeting and were based on actual, not an average, number of days.

- 1,766 of 2,078 (15%) of infants and toddlers received an initial evaluation/assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
- **Exceptional Family Circumstances.** 688 of the 2,078 (33%) infants and toddlers did not have an initial evaluation/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 three predominate exceptional family circumstances:
 - Schedule conflict
 - Family request
 - Family medical
- **Program Reasons.** 312 of the 2,078 (85%) infants and toddlers did not have an initial evaluation/assessment and initial IFSP meeting within Part C's 45-day timeline due to program reasons. The following are the two predominate program reasons:
 - Late MDEs
 - Schedule full
- **Identifying Noncompliance.** Of the 312 infants who did not have an initial evaluation/assessment and initial IFSP meeting within Part C's 45-day timeline 236 (76%) infants and toddlers received an initial evaluation/assessment and had an initial IFSP meeting,

Range of Days Beyond the 45-Day timeline to Receive an Initial Evaluation/Assessment and Initial IFSP

(For the 312 late IFSPs)

Range of Days Beyond Due Date	# of Children	% of Children
1-30 days	108	35%
31-60 days	55	18%
61-90 days	16	5%
>90 days	57	18%
Left Program's Jurisdiction	76	18%

The State accounted for all instances of noncompliance identified via HEIDS. There were 18 programs serving the 312 children who did not receive an initial evaluation/assessment and initial IFSP within 45-days.

- 8 of the 18 programs were issued findings in FFY 2018, based on FFY 2017 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 (one program did not demonstrate correction from the finding issued in FFY 2014, based on FFY 2013 data; one program did not demonstrate correction from the findings issued in FFY 2016, based on FFY 2015 data; one program did not demonstrate correction from the finding issued in FFY 2017, based on FFY 2016 data).
- 7 of the 18 programs were not issued finds because they submitted required data that was verified by Part C LA to demonstrate correction prior to written issuance of findings (e.g., all individual child noncompliance was corrected although late and updated data was used to confirm that each program was correctly implementing the timely evaluation/assessment and initial IFSPs requirement for all children (100%)).

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 7: 45-day timeline

Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 7: 45-day timeline

Correction of Previous Findings of Noncompliance

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)

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	6	1	1

FFY 2016 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 (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance was correctly implementing the requirement. 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 HEIDS that includes the child's name, Part C 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the program submitted required evidence of correction documentation based on the percentage of noncompliance:

6 programs demonstrated correction as outlined above within one year of notification:

- Program 1 submitted two months of data that showed 100% for a total of 6 records.
- Program 2 submitted one month of data that showed 100% for a total of 3 records.
- Program 3 submitted one month of data that showed 100% for a total of 8 records.
- Program 4 submitted one month of data that showed 100% for a total of 9 records.
- Program 5 submitted one month of data that showed 100% for a total of 8 records.
- Program 6 submitted one month of data that showed 100% for a total of 7 records.

1 program demonstrated subsequent correction prior to the submission for FFY 2017 APR:

- Program 1 submitted one month of data that showed 100% for a total of 8 records.

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

The Part C LA verified that each of the EI Programs with findings of noncompliance for not conducting an initial evaluation/assessment and initial IFSP within Part C's 45-day timeline, completed all evaluations/assessments and initial IFSPs, 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 respective APR's actual target date discussion in the "Additional information about this indicator" section. The indicator report from HEIDS 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 2016 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The one Program with on-going noncompliance was required to complete the Local Contributing Factor Tool (LCFT) for Indicators 7 and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their respective monthly CAP report. In addition, the Program was required to complete the Programming On-going Noncompliance Worksheet that included the following components:

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- System to track timely initial evaluations/assessments and initial IFSPs
- Tracking attempts to schedule initial evaluations/assessments and initial IFSPs reasons why it is late
- Barrier(s) and possible solutions to conducting timely initial evaluations/assessments and initial IFSPs
- Does the documented reason why an initial evaluations/assessments and initial IFSP is late match determined barriers to conducting initial evaluations/assessments and initial IFSPs
- What TA they have accessed from the State
- Additional TA requests from the State

The Program was also instructed to submit weekly status reports of all indicators with long-standing noncompliance. The State LA provided TA in response to the weekly submission reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by January 31, 2019 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 TA needed from the Part C LA.

Correction of Findings of Noncompliance Identified Prior to FFY 2016

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2016 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY2014	1	null	1

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The one Program with on-going noncompliance was required to complete the Local Contributing Factor Tool (LCFT) for Indicators 7 and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their respective monthly CAP report. In addition, the Program was required to complete the Programming On-going Noncompliance Worksheet that included the following components:

- System to track timely initial evaluations/assessments and initial IFSPs
- Tracking attempts to schedule initial evaluations/assessments and initial IFSPs reasons why it is late
- Barrier(s) and possible solutions to conducting timely initial evaluations/assessments and initial IFSPs
- Does the documented reason why an initial evaluations/assessments and initial IFSP is late match determined barriers to conducting initial evaluations/assessments and initial IFSPs
- What TA they have accessed from the State
- Additional TA requests from the State

The Program was also instructed to submit weekly status reports of all indicators with long-standing noncompliance. The State LA provided TA in response to the weekly submission reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by January 31, 2019 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 TA needed from the Part C LA.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 8: Early Childhood Transition

FFY 2017 Data: All Indicator 8 Sections

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 State educational agency (SEA) and the local educational agency (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)

FFY 2017 SPP/APR Data

Number of toddlers with disabilities exiting Part C	1,903
Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	1,903

Provide additional information about this indicator (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8A: Early Childhood Transition
Historical Data and Targets

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 State educational agency (SEA) and the local educational agency (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%

FFY	2015	2016
Target	100%	100%
Data	93.62%	93.37%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8A: Early Childhood Transition
FFY 2017 Data

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 State educational agency (SEA) and the local educational agency (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)

FFY 2017 SPP/APR Data

Source	Date	Description	Data	Overwrite Data
Indicator 8	12/28/2018	Number of toddlers with disabilities exiting Part C	1,903	1,099

Explanation of Alternate Data

Children referred and found eligible less than 90 days prior to their third birthday were not included in the denominator and children who exited more than 90 days prior to 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 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
1,017	1,099	93.37%	100%	94.09%	Did Not Meet Target	No Slippage

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

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, 2017 - June 30, 2018

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

Statewide data for the timely Transition Planning for all children who exited Part C in FFY 17 was collected from the HEIDS for the period 7/1/17 - 6/30/18.

Provide additional information about this indicator (optional)

FFY 2017 Actual Data Discussion:

Transition Plan

- 1,034 of 1,099 (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 fewer than 90 days from their third birthday were not included in this calculation.
- 65 of 1,099 (6%) children exiting Part C did not have a timely and complete Transition Plan in their IFSP, based on Hawaii's requirements for a complete Transition Plan. To be considered "complete," Hawaii requires the Transition Plan to be updated at each IFSP meeting and it must include steps and services listed in the IDEA, Part C regulations.
- There were 16 programs serving the 65 children who did not have a timely and complete Transition Plan in their IFSP.
 - 9 of the 16 programs were issued a finding in FFY 2018, based on FFY 2017 data. They received a letter of notification of

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

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).

- 1 of the 16 programs was not issued a finding due to on-going noncompliance from finding issued in FFY 2016; however, the program has subsequently demonstrated correction prior to FFY 2017 APR submission.
- 6 of the 16 programs were not issued a finding because the programs 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 had a complete transition plan, although late unless the child was no longer under the program's jurisdiction. Updated data was used to verify that the Programs are now correctly implementing the timely and complete transition plan requirement for all children (100%).

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 8A: Early Childhood Transition

Required Actions from FFY 2016

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 State educational agency (SEA) and the local educational agency (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)

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8A: Early Childhood Transition
Correction of Previous Findings of Noncompliance

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 State educational agency (SEA) and the local educational agency (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)

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	9	1	0

FFY 2016 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 (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance was correctly implementing the requirement. Programs with identified noncompliance were required to submit a copy of the transition plan along with a list from HEIDS that includes the child's name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the programs submitted required evidence of correction documentation based on the percentage of noncompliance:

9 of 10 programs demonstrated correction as outlined above within one year of notification:

- Program 1 submitted one month of data that showed 100% for a total of 5 records.
- Program 2 submitted one month of data that showed 100% for a total of 5 records.
- Program 3 submitted one month of data that showed 100% for a total of 5 records.
- Program 4 submitted two consecutive months of data that showed 100% for a total of 2 records. Due to low enrollment numbers, the Program did not have enough transition plans to meet the minimum amount of required records. The contract ended prior to the minimum amount of records could be gathered. The Program that took over serving the geographic area demonstrated correction by submitted a month of data that showed 100% for a total of 5 children. And was found compliant in FFY 2017.
- Program 5 submitted one month of data that showed 100% for a total of 4 records.
- Program 6 submitted one month of data that showed 100% for a total of 7 records.
- Program 7 submitted one month of data that showed 100% for a total of 10 records.
- Program 8 submitted one month of data that showed 100% for a total of 5 records.
- Program 9 submitted one month of data that showed 100% for a total of 6 records.

The one remaining program subsequently demonstrated correction as outlined above:

- Program 1 submitted one month of data taht showed 100% for a total of 5 records.

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

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 status of child specific correction was included in previous respective APR's actual target date discussion in the "Additional information about this indicator" section. The Part C LA required the 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.

Correction of Findings of Noncompliance Identified Prior to FFY 2016

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2016 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY2014	1	null	0

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”).

The Program was notified in writing of any noncompliance. The Program was required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that the EI programs with identified noncompliance was correctly implementing the requirement. The Program with identified noncompliance was required to submit a copy of the transition plan along with a list the HEIDS that includes the child’s name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). The Program was 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the one remaining program submitted required evidence of correction documentation based on the percentage of noncompliance:

- Program 1 submitted two months of data that showed 100% for a total of 7 records.

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

The Part C LA verified that the EI Program 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 status of child specific correction was included in previous respective APR’s actual target date discussion in the “Additional information about this indicator” section. The Part C LA required the EI Program 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 Program was required to submit the completed transition plan to the Part C LA.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8B: Early Childhood Transition
Historical Data and Targets

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 State educational agency (SEA) and the local educational agency (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%

FFY	2015	2016
Target	100%	100%
Data	90.80%	92.37%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8B: Early Childhood Transition
FFY 2017 Data

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 State educational agency (SEA) and the local educational agency (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)

FFY 2017 SPP/APR Data

Source	Date	Description	Data	Overwrite Data
Indicator 8	12/28/2018	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	1,903	1,160

Explanation of Alternate Data

Children referred and found eligible less than 90 days prior to their third birthday were not included in this denominator and children who exited more than 90 days prior to their third birthday were not included in this denominator, unless DOE was notified prior to exit.

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 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
755	1,160	92.37%	100%	89.03%	Did Not Meet Target	Slippage

Number of parents who opted out <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>	312
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Reasons for Slippage

Staff shortages and staff turnover impacts the program in implementing all aspects of early intervention. Staff shortages result in providers having higher caseloads which results in full schedules and incomplete and/or untimely documentation/paperwork such as Transition Notices.

New staff are in the learning process and may not fully understand or not have the time to meet transition requirements.

Describe the method used to collect these data

Statewide data for the timely Transition Notice for all children who exited Part C in FFY 2017 was collected from the EI Database for the period 7/1/17-6/30/18.

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).

Statewide data for the timely Transition Planning for all children who exited Part C in FFY 17 was collected from the HEIDS for the period 7/1/17 - 6/30/18.

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

Statewide data for the timely notification via Part C Transition Notice for all children who exited Part C in FFY 2017 was collect from the HEIDS for the period 7/1/17 - 6/30/18. Children referred and found eligible less than 90 days prior to their third (3rd) birthday were not

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

included in the numerator and denominator. Parents who opted out of sending the Transition Notice to Part B were not included in the denominator.

Provide additional information about this indicator (optional)

FFY 2017 Actual Target Data Discussion:

Transition Notice

- 755 of 848 (89%) of children exiting Part C and potentially eligible for Part B 619 services exited with timely notification to the SEA and the child’s home school. The Part B and C programs mutually decided that any child eligible for Part C is “potentially eligible for Part B 619 services.” Therefore, it is a requirement that, at minimum, directory information on all children exiting Part C with a developmental delay or medical condition with a high probability of resulting in a developmental delay to be forwarded to Part B 619 unless the family opts out of this requirement. Hawaii’s Part B has a unitary system so they do not have a LEA. However, at Part B’s request, Part C has agreed to send notification to the child’s home school in addition to the SEA. Children referred and found eligible less than 90 days prior to their third birthday were not included in the calculation.
- Opt Out Option: 312 children exiting Part C and potentially eligible for Part B 619 services exited without providing notification to the SEA and child’s home school due to the family exercising the “opt out” policy. The “opt out” policy was presented to the community at a public hearing held on 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 the above numerator or denominator. Due to the high number of “opt outs” for the Transition Notice, the HEIDS 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 Part B 619 program.
- Program Reasons: 93 of 848 (11%) children exiting Part C and potentially eligible for Part B exited without timely notification to the SEA and child’s home school due to program reasons. It is Hawaii’s policy that the transition notice must be sent to the SEA and the child’s home school at least 90 days prior to the child’s third birthday. The timeline is in place to support Part B’s child find efforts to ensure that all children who are potentially eligible for Part B services can receive a timely evaluation and start the Part B program by the third birthday.
- Of the 93 children who exited without timely notification to the SEA and the child’s home school, notification was provided to the SEA and child’s home school for 52 of these children, although untimely and 41 children left the jurisdiction of Part C prior to the issuing the SEA and child’s home school notification.

Range of Days Notification to SEA and Child’s Home School

(For the 93 children without a timely notification to Part B)

Range of Days Beyond Due Date	# of Children	% of Children
1-30 days	42	45%
31-60 days	8	9%
61-90 days	2	2%
>90 days	0	0%
Left Program’s Jurisdiction	41	44%

- There were 17 programs serving the 93 children who did not have timely notification to the SEA and child’s home school.
- - 4 of the 17 programs were issued a finding in FFY 2018, based on FFY 2017 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).
 - 4 of the 17 programs were not issued a finding due to on-going noncompliance (one program did not demonstrate correction from the finding issued in FFY 2015, based on FFY 2014 data; three programs did not demonstrate correction from the findings issued in FFY 2017, based on FFY 2016 data).
 - 9 of the 17 programs were not issued a finding because the programs submitted required data that was verified by Part C LA

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to demonstrate correction prior to the written issuance of findings. The data demonstrated that transition notices for all children were provided to the SEA and the child's home school, unless the family "opted out" 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 requirement of notifying the SEA and the child's home school of all children who are potentially eligible for Part B (100%).

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 8B: Early Childhood Transition

Required Actions from FFY 2016

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 State educational agency (SEA) and the local educational agency (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)

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8B: Early Childhood Transition
Correction of Previous Findings of Noncompliance

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 State educational agency (SEA) and the local educational agency (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)

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1	null	0

FFY 2016 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").

The Program was notified in writing of any noncompliance. The Program was required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that the EI program with identified noncompliance was correctly implementing the requirement. The Program with identified noncompliance was required to submit a copy of the documentation of when the transition notice was sent to the SEA and child's home school, along with a list from HEIDS that includes the child's name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). The Program was 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the program submitted required evidence of correction documentation based on the percentage of noncompliance:

1 of 1 program demonstrated correction as outlined above within one year of notification:

- Program 1 submitted two months of data that showed 100% for a total of 8 records.

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

The Part C LA verified that the EI Program with findings of noncompliance for not providing timely notification to the SEA and child's home school of potentially eligible children for Part B services, all children have notification to the SEA and child's home school, 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 respective APR's actual target date discussion in the "Additional information about this indicator" section. The report from HEIDS includes the actual date the notification was sent to the both the SEA and the child's home school. If the notice was sent on two separate dates, the later date is entered into HEIDS. It also includes if it was late, how many days late it occurred.

Correction of Findings of Noncompliance Identified Prior to FFY 2016

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2016 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY2015	1	null	1

FFY 2015 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The one Program with on-going noncompliance was required to complete the Local Contributing Factor Tool (LCFT) for Indicators 8B and 9 (Indicator 9 LCFT focuses on long standing noncompliance) that addresses underlying factors impacting local performance and develop meaningful CAPs. Strategies to address root causes and progress on the strategies were to be included in their monthly CAP

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report. In addition, the Program was required to complete the Programming On-going Noncompliance Worksheet that included the following components:

- System to track Transition Notice (notification to SEA and child's home school)
- Staff analysis (how many Care Coordinators (CC) are submitting Transition Notices by due date)
- Barrier(s) and possible solutions to providing timely Transition Notices
- Support offered to CCs who are not consistently submitting timely Transition Notices
- What TA they have accessed from the State
- Additional TA requests from the State

The Program was also instructed to submit weekly status reports of all indicators with long-standing noncompliance. The State LA provided TA in response to the weekly submission reports as needed.

The Agency of the Program still in noncompliance has been required to submit a Long-Standing Noncompliance Plan by January 31, 2019 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 TA needed from the Part C LA.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8C: Early Childhood Transition
Historical Data and Targets

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 State educational agency (SEA) and the local educational agency (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%

FFY	2015	2016
Target	100%	100%
Data	90.41%	93.29%

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target	100%	100%

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8C: Early Childhood Transition
FFY 2017 Data

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 State educational agency (SEA) and the local educational agency (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)

FFY 2017 SPP/APR Data

Source	Date	Description	Data	Overwrite Data
Indicator 8	12/28/2018	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	1,903	1,138

Explanation of Alternate Data

Children referred and found eligible less than 90 days prior to their third birthday and children who exited more than 90 days prior to their third birthday were not included in this denominator, unless a transition conference was held prior to exit.

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 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
429	1,138	93.29%	100%	95.49%	Did Not Meet Target	No Slippage

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>	672
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>	16

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, 2017 - June 30, 2018.

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

Statewide data for the timely Transition Conference for all children who exited Part C in FFY 2017 was collect from the HEIDS for the period 7/1/17 - 6/30/18. Children referred and found eligible less than 90 days prior to their third (3rd) 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)

FFY 2017 Actual Target Data Discussion:

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.

- 429 of 466 (92%) children exiting Part C where the timely transition conference occurred.
- 672 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:
 - Decided on a setting
 - Familiar with options
- Exceptional Family Circumstances. 16 of 466 (3%) children exiting Part C did not have a timely Transition Conference due to exceptional family circumstances. They are included in both the above numerator and denominator. The predominate exceptional family circumstances was:
 - Family originally declined a transition conference and then changed their mind
- Program Reasons. 37 of 466 (8%) children exiting Part C did not have a timely Transition Conference due to program reasons. The predominate program reason was:
 - No documentation
- Of the 37 families that did not receive a timely Transition Conference, 2 received a Transition Conference, although untimely and 35 children left the jurisdiction of Part C prior to having a Transition Conference.

Range of Days for the Transition Conference

(For the 37 children that exited without a timely Transition Conference)

Range of Days Beyond Due Date	# of Children	% of Children
1-30 days	2	5%
31-60 days	0	0%
61-90 days	0	0%
>90 days	0	0%
Left Program's Jurisdiction	35	95%

- There were 14 programs serving the 37 children who exited Part C with an untimely Transition Conference or having no Transition Conference prior to exiting Part C.
 - 6 of the 14 programs were issued a finding in FFY 2018, based on FFY 2017 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).
 - 1 of the 14 programs was not issued a finding due to on-going noncompliance from the finding issued in FFY 2017, based on FFY 2016 data.
 - 7 of the 14 programs were not issued a finding because the programs 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 timely Transition Conference, unless the family declined a transition Conference or the child was no longer under the program's jurisdiction. Up-dated data was used to verify that the Programs are now correctly implementing the Transition Conference requirement for all children (100%).

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 8C: Early Childhood Transition

Required Actions from FFY 2016

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 State educational agency (SEA) and the local educational agency (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)

Actions required in FFY 2016 response

none

Note: Any actions required in last year's response table that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8C: Early Childhood Transition
Correction of Previous Findings of Noncompliance

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 State educational agency (SEA) and the local educational agency (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)

Correction of Findings of Noncompliance Identified in FFY 2016

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
3	3	null	0

FFY 2016 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 (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that each of the EI programs with identified noncompliance was correctly implementing the requirement. Programs with identified noncompliance were required to submit a copy of the anecdotal note documenting the transition conference or family decline, along with a list from HEIDS that includes the child's name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the programs submitted required evidence of correction documentation based on the percentage of noncompliance:

3 of 3 programs demonstrated correction as outlined above within one year of notification:

- Program 1 submitted two months of data that showed 100% for a total of 7 records.
- Program 2 submitted one month of data that showed 100% for a total of 4 records.
- Program 3 submitted one month of data that showed 100% for a total of 5 records.

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

The Part C LA verified that each of the EI Programs with findings of noncompliance for not conducting a timely transition conference, 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 respective APR's actual target date discussion in the "Additional information about this indicator" section. The report from HEIDS includes the transition due date (at least 90 days prior to 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.

Correction of Findings of Noncompliance Identified Prior to FFY 2016

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2016 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY2013	1	null	0
FFY2012	1	null	0

FFY 2013 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").

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

The Program was notified in writing of any noncompliance. The Program was required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that the EI program with identified noncompliance was correctly implementing the requirement. The Program with identified noncompliance was required to submit a copy of the anecdotal note documenting the transition conference or family decline, along with a list the HEIDS that includes the child's name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). The Program was 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the one remaining program submitted required evidence of correction documentation based on the percentage of noncompliance:

1 of 1 programs demonstrated subsequent correction as outlined above:

- Program 1 submitted three consecutive months of data that showed EI 100% for a total of 10 records.

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

The Part C LA verified that the EI Programs with findings of noncompliance for not conducting a timely transition conference, 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 respective APR's actual target date discussion in the "Additional information about this indicator" section. The report from HEIDS includes the transition due date (at least 90 days prior to 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 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").

The Program was notified in writing of any noncompliance. The Program was required to develop a Corrective Action Plan (CAP), change policies and procedures, as appropriate, and demonstrate correction of all noncompliance (e.g., child specific and up-dated data) as soon as possible but no later than one year of identification (i.e., date of written notification).

In verifying correction of noncompliance, the state determined that the EI program with identified noncompliance was correctly implementing the requirement. The Program with identified noncompliance was required to submit a copy of the anecdotal note documenting the transition conference or family decline, along with a list the HEIDS that includes the child's name, date of birth, exit date, and transition due date (at least 90 days prior to exiting Part C). The Program was 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 months of data that show 100% with a minimum of 8 records total
- Under 70%: 3 consecutive months that show 100% with a minimum of 10 records total

The Part C LA verified that the remaining Program submitted required evidence of correction documentation based on the percentage of noncompliance:

1 of 1 programs demonstrated subsequent correction as outlined above:

- Program 1 submitted two months of data that showed EI 100% for a total of 6 records.

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

The Part C LA verified that the EI Programs with findings of noncompliance for not conducting a timely transition conference, 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 respective APR's actual target date discussion in the "Additional information about this indicator" section. The report from HEIDS includes the transition due date (at least 90 days prior to 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 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 9: Resolution Sessions

Historical Data and Targets

Explanation of why this indicator is not applicable

Part B DOE due process procedures under section 615 of the IDEA were not adopted.

Part C had no due process requests.

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 under section 615 of the IDEA are adopted).

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

This indicator is not applicable, as described above.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 9: Resolution Sessions

FFY 2017 Data

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 under section 615 of the IDEA are adopted).

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

This indicator is not applicable, as described on the [Historical Data Page](#).

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 9: Resolution Sessions

Required Actions from FFY 2016

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 under section 615 of the IDEA are adopted).

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

This indicator is not applicable, as described on the [Historical Data Page](#).

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 10: Mediation

Historical Data and Targets

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)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥											
Data											

FFY	2015	2016
Target ≥		
Data		

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

FFY 2017 - FFY 2018 Targets

FFY	2017	2018
Target ≥		

Key: Blue – Data Update

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

Enter additional information about stakeholder involvement

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 10: Mediation

FFY 2017 Data

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)

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.a.i Mediations agreements related to due process complaints	0	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1.b.i Mediations agreements not related to due process complaints	0	null
SY 2017-18 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/8/2018	2.1 Mediations held	0	null

FFY 2017 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2016 Data	FFY 2017 Target	FFY 2017 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

There were no mediation requests in FFY 2017; therefore no data was required to be reported.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 10: Mediation

Required Actions from FFY 2016

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)

Actions required in FFY 2016 response

none

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: State Systemic Improvement Plan
Data and Overview

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.

Reported Data

Baseline Data: 2014

FFY	2013	2014	2015	2016	2017
Target		53.14%	49.28%	49.28%	49.50%
Data	53.14%	49.28%	55.71%	62.37%	58.00%

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

Explanation of Changes

FFY 2018 Target

FFY	2018
Target	50.00%

Key: Blue – Data Update

Description of Measure

Targets: Description of Stakeholder Input

Overview

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 11: State Systemic Improvement Plan

Data and Overview

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.

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., EIS program and/or EIS provider, geographic region, race/ethnicity, socioeconomic status, gender, etc.) As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 11: State Systemic Improvement Plan

Data and Overview

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.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 11: State Systemic Improvement Plan

Data and Overview

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.

State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).

Statement

Description

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Indicator 11: State Systemic Improvement Plan

Data and Overview

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.

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: State Systemic Improvement Plan
Data and Overview

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.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

Submitted Theory of Action: No Theory of Action Submitted



Provide a description of the provided graphic illustration (optional)

FFY 2017 Part C State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: State Systemic Improvement Plan
Data and Overview

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.

Infrastructure Development

- (a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- (b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- (c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

**FFY 2017 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