

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

### Overview of the Annual Performance Report Development:

The Idaho Infant Toddler Program completed the following activities to develop the FFY 10 APR:

- The 618 data in the report was drawn from the program's web-based data system. Last year's extensive effort to define the report criteria for the new database structure and parameters enabled timely and accurate data for the 618 and APR reporting.
- Data that was not reportable from the program's web-based data system was submitted by regional staff and was subsequently verified by Central Office using a variety of strategies as outlined in individual indicators and Indicator 14.
- Extensive attention and work continues to assure the newly updated web-based data system should be implemented in 2013. Work on enhancements and a redesign for the updated web-based data system continues. This work will not only integrate a billing process but will also improve our capacity to assure complete, accurate, and timely data reports for all areas of compliance and multiple performance indicators.

Program performance data was reviewed and broad input was received regarding APR indicators, targets, and improvement strategies from a variety of stakeholders including the following: program managers, hub and regional program supervisors, the Early Childhood Coordinating Council and their Infant Toddler Program Ad Hoc Committee. Particular attention was given to providing data updates and program status related to indicators 5 and 6 and the Results Visit plan the program is implementing to increase the number of children served.

- Early Childhood Outcome data was analyzed and reviewed. We continued to track ECO data and each region's process to continue aligning procedures for consistent reporting from all areas of the state.
- The Central Office Infant Toddler Program staff joined all the OSEP APR Technical Assistance Calls offered throughout the year as well as related sessions at the National Early Childhood Mega Meeting in Washington D.C. These sources of information and support assisted us to prepare the APR with reduced time invested in its development.
- Idaho posted the FFY 10 APR results for the public regarding 'measurable and rigorous targets' and performance of each EIS program on the Idaho Department of Health and Welfare Infant Toddler home page—[www.infanttoddler.idaho.gov](http://www.infanttoddler.idaho.gov). Program staff alerted the Early Childhood Coordinating Council of the status of performance data and the availability of the Public Reporting. We continued to use the previously developed charts to show multiple year data and for greater ease of accurately interpreting the data.

Idaho will post the FFY 11 results to the public regarding 'measurable and rigorous targets' and compliance results for each EIS program in the SPP on the Idaho Department of Health and Welfare Infant Toddler home page no later than February 15, 2013. In addition, information will be reviewed through other public forums such as the hub and regional supervisors, program manager, and the Early Childhood Coordinating Council meetings.

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

**Overview of the Annual Performance Report Development:**

See the Overview of the Annual Performance Report Development on page 1.

**Monitoring Priority: Early Intervention Services In Natural Environments**

**Indicator 1:** Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

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

**Measurement:**

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

FFY	Measurable and Rigorous Target
2011 (2011-2012)	100% of infants and toddlers with IFSPs receive the early intervention services on their IFSPs in a timely manner.

**Actual Target Data for (FFY 2011):** 1,937/2082 = 93%

Number of Eligible Children	Number/Percent of Children with all Services Delivered Timely	Number/Percent of Exceptional Family Circumstances	Number/Percent of Children with Timely Delivery of services
2,082	1,703 81.8%	234 11.2%	1,937/2082 93%

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011<sup>1</sup>:**

The Actual Target (performance) data reported for FFY 11 for all regions shows steady performance. State data showed that 93% of children received timely services in FFY 11, which is comparable to the FFY 2010 data reported last year. The Idaho Infant Toddler Program continues to work diligently each year to ensure children with IFSP's receive timely services

In Idaho, timely services are defined as the actual start date being equal to or less than the projected start date for initial and ongoing IFSPs. A report encompassing all services projected to start in FFY 11 (July 1, 2011 – June 30, 2012) was generated from the ITP Web data system for all regions. The

reports analyzed data using the current definition of children receiving timely services that compares the service initiation date to the projected start date on initial IFSP and subsequent IFSPs.

Statewide, 234 children had delays in timely service delivery due to exceptional family/extenuating circumstances as defined by IDEA Part C. They are included in both the actual target data numerator and denominator. Please refer to the table below for examples of exceptional family circumstances.

<b>Exceptional Family Circumstances</b>
Conflict with family scheduling/appointment
Child/family illness or hospitalization
Family declined service
Family no show
Unable to make contact with family

Statewide, 145 children had a delay in timely service due to agency reasons. They were included in the actual target data denominator. Please refer to the table below for examples of agency reasons.

<b>Agency Reasons</b>
High caseload/therapist unavailable
Interpretation/translation issue
Therapist ill
Delay in evaluation

The services identified in IFSP’s were provided, although late, for all of the 379 children reported as delayed (due to agency and family reasons) during FFY 11 unless the child was no longer within the jurisdiction of the EIS program, the family declined services, or the EIS program was not able to make contact with the family.

The following strategies were implemented to maintain a high rate of timely service provision to children and their families:

- Posting of the Developmental Specialist, Children’s Program job announcement on an open, continuous basis on the Idaho Division of Human Resources website.
- The Infant Toddler Program Service Coordination Network has created more accountability for timely service provision.
- Increased regional participation in service delivery model changes designed to improve family centered practices and teaming through use of a primary interventionist approach.
- Timely Service alert generated by the ITP web-based data system for service providers and service coordinators.
- Timely Service Alert generates to regional admin users (hub supervisors and regional human services supervisors) to assist with tracking timely services.
- Development of regional reports that calculate the number and percentage of children with timely services for each program, thus allowing consistent reviewing of data without having to hand calculate.
- Regular regional review of timely services data using Crystal Report software.

**Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):**  
Level of compliance State reported for FFY 2010 for this indicator: 100%

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	17
2. Number of FFY 2010 findings the State verified as timely corrected	16

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(corrected within one year from the date of notification to the EIS program of the finding)	
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

The services identified in IFSP's were provided, although late, for all of the 96 children reported as delayed during FFY 10 unless the child was no longer within the jurisdiction of the EIS program, the family declined services, or the EIS program was not able to make contact with the family. One instance of non-compliance identified (Region 3) was not corrected within 12 months but was subsequently corrected (October, 2012).

Correction of each individual incidence of non-compliance was verified through ITP Web. On-site monitoring activities and functions conducted by Central Office staff verified that regions were correctly implementing the specific regulatory requirements and state's definition related to timely services. This is consistent with OSEP Memorandum 09-02.

### Correction of FFY 2009 Finding of Noncompliance

One finding of non-compliance was reported as not corrected during the FFY 2009 year. However, after implementing actions described in the FFY 2010 APR, this instance was subsequently corrected.

Correction of each individual incidence of non-compliance was verified through ITP Web. On-site monitoring activities and functions conducted by Central Office staff verified that regions were correctly implementing the specific regulatory requirements and state's definition related to timely services. This is consistent with OSEP Memorandum 09-02.

Improvement Activity	Improvement Activities Planned in SPP for 2011 - 2012	Activity Status Update 2011 - 2012
Monitoring	<ol style="list-style-type: none"> <li>1. Continue tracking service start dates to ensure all children are served in a timely manner.</li> <li>2. When noncompliance is identified in any region, require development of a corrective action plan (CAP) outlining strategies to correct the deficit within one year from the date of identification.</li> <li>3. Monitor all regions with active CAPs through monthly data submissions, quarterly reports, routine phone contact, and on-site visits as required and/or specified in their plan to assure correction within one year of identification of noncompliance.</li> <li>4. Evaluate progress and status of performance to determine need for additional resource recruitment or other strategies to assure timely</li> </ol>	1, 2, 3, 4. Completed as written.

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Improvement Activity	Improvement Activities Planned in SPP for 2011 - 2012	Activity Status Update 2011 - 2012
	<p>delivery of early intervention services in accordance with IFSPs. If strategies are added or changed, report in next APR.</p>	
<p>Training</p>	<p>5. Ensure regional training is provided to Service Coordinators (public and private) re: responsibilities, timelines, and procedural requirements outlined in IDEA Part C and the Idaho Implementation manual.</p>	<p>5. Regions provided regular update trainings to existing Service Coordinators and trainings for new Service Coordinators on a regular basis.</p>
<p>Maintenance of Interagency Agreements (IAA) and Contracts</p>	<p>6. Periodic review of IAA with other early intervention providers who serve children through an IFSP. Ensure requirements regarding timelines and procedural safeguards continue to be addressed.</p> <p>7. Annual review and renewal of contracts issued to early intervention providers to service children through an IFSP. Ensure requirements regarding timelines and procedural safeguards continue to be included in all early intervention contracts as specified in the boilerplate and are monitored for compliance.</p>	<p>6. Regions reviewed their local interagency agreements and contracts on a regular basis with community partners, Regional Early Childhood Committees, and early intervention providers who serve children through an IFSP to ensure that requirements regarding timelines and procedural safeguards continued to be addressed.</p> <p>7. Regions reviewed and renewed contracts for providers on an annual basis. These contracts were reviewed with the necessary revisions made to ensure requirements regarding timelines and procedural safeguards continue to be included in all early intervention contracts as specified in the state approved standard contract. Throughout FFY 11, regions monitored these contracts on a regular basis to ensure compliance.</p>

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Improvement Activity	Improvement Activities Planned in SPP for 2011 - 2012	Activity Status Update 2011 - 2012
Reporting	<p>8. Report on EIS regional program performance on the Department of Health and Welfare’s website, ITP progress reports, and to the interagency coordinating council and regional committees.</p>	<p>8. ITP quarterly performance data was reported to central office administration, program managers, hub supervisor, and regional supervisors. In addition, quarterly performance data has been posted on the internal Department of Health and Welfare website. Semi-annual reports regarding performance data was provided to the Early Childhood Coordinating Council (EC3), serving as the State Interagency Coordinating Council (ICC).</p>
Data System	<p>9. Regional Admin users will track services for children receiving early intervention services using the work list summary function in ITP Web.</p> <p>10. Service coordinators and providers using ITP Web will track timely services using the work list function in ITP Web.</p> <p>11. Central office and regions will use consistent reporting templates to track timely services.</p>	<p>9. Regional Admin users tracked services using the work list function in ITP Web and the Crystal Report software.</p> <p>10. Service coordinators and providers used the work list functionality in ITP Web to track timely services.</p> <p>11. Central office and regions used crystal reporting templates on a regular basis to track timely services.</p>
Personnel Recruitment	<p>12. Continue to work with Human resources to advertise and recruit for new early intervention “therapist” classification (OT, PT, SLP).</p>	<p>12. Central office and regions have continued to work with human resources staff to actively advertise and recruit for early intervention “therapists.”</p>

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

Overview of the Annual Performance Report Development:

See the Overview of the Annual Performance Report Development, Indicator 1.

**Monitoring Priority: Early Intervention Services In Natural Environments**

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

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

**Measurement:** Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2011 (2011-2012)	Services in Home or Community-Based Settings = 94%

Actual Target Data for (FFY 2011): 1651/1717 = 96.2%

Data Source: ITP Web Data System 618 Report Data – December 1, 2011		
Service Setting	Data	Percent
EI CTR	13	0.8%
RESIDENT	0	0.0%
SVC PROV	45	2.6%
COMMUNITY SETTING	132	7.7%
IN-HOSP	1	0.1%
OTHER	7	0.4%
HOME	1519	88.5%
COMMUNITY SETTING	132	7.7%
<b>TOTAL N.E.</b>	<b>1651</b>	<b>96.2%</b>
Total Services Provided	1717	100%

Idaho’s FFY 2011 target was **94%** of children in Idaho receive services in homes and community based settings. Actual target (performance) from the 618 December 1, 2011 data revealed that **96.2%** infants and toddlers are primarily receiving services in their homes and community based settings, exceeding the established target for FFY 2011.

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Snapshot data for enrolled children as of December 1, 2011 was generated from ITP Web to report data for this indicator. Please refer to indicator # 14 for reference to the validity and reliability of the ITP Web data system.

**Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):**  
Level of compliance State reported for FFY 2010 for this indicator: 95.3%

4. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2009, through June 30, 2010)	<b>1</b>
5. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	<b>1</b>
6. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (FFY 11):**

The Idaho Infant Toddler Program continues to assure early intervention services are provided in home or community-based settings or an appropriate justification is documented. Idaho continues to monitor natural environment justifications via file reviews and the Idaho data system (ITP Web).

Providing services to children in natural environments continues to be a strong focus for the state. All regions have demonstrated high levels of performance. These statewide efforts demonstrate continued performance and focus on providing quality early intervention services to infants and toddlers in natural learning environments.

Improvement Activity	Improvement Activities Planned in SPP for 2011-2012	Activity Status Update 2011 – 2012
Monitoring and Public Reporting	<ol style="list-style-type: none"> <li>1. Monitor service setting data by central office: required regional plan strategies to demonstrate improvement within one year if any region drops below state average performance or established target of previous year.</li> <li>2. Post Service Setting data, including regional performance results will be posted annually on the Idaho Department of Health and Welfare, Infant Toddler Program website, included in the published Progress Report that is widely distributed, and provided to the interagency coordinating council and the regional committees.</li> </ol>	<ol style="list-style-type: none"> <li>1. Central office completed quarterly (and in many instances, monthly) reviews of service setting data via phone conference and in some instances on-site visits to consistently examine regional performance.</li> <li>2. ITP quarterly performance data was reported to central office administration, management team, regional program managers, early intervention specialists, and supervisors. In addition, quarterly performance data has been posted on the internal Department of Health and Welfare website. Semi-annual reports regarding performance</li> </ol>

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Improvement Activity	Improvement Activities Planned in SPP for 2011-2012	Activity Status Update 2011 – 2012
		data were provided to the Early Childhood Council (EC3), serving as the State Interagency Coordinating Council (ICC).
Contracts	3. Maintain contract requirement for delivery of service in natural environments unless the child cannot benefit from the service in the natural environment.	3. Contracts and memoranda of agreements were maintained for the delivery of service in natural environments unless the child could not benefit from the service in the natural environment. Regions continue to monitor service provider contracts to ensure the provision of services in natural environments.
IFSP	4. New IFSP requiring comprehensive documentation of justification statements and specific timelines to review any service provided outside a natural environment.	4. A new IFSP was developed in 2011. In addition to identifying whether a service is being provided in a natural environment on the Summary of Services page, a new page to document the justification for services provided outside a natural environment was added. This page is required if any service in the IFSP is identified to be provided outside the NE by the IFSP team.
Evidence Based Early Intervention Practice	5. Implement Evidence Based Early Intervention Practices includes identifying functional outcomes that are addressed in natural environments within the context of everyday learning environments.	5. Evidence Based Early Intervention Practices have been implemented statewide. This practice includes the identification of functional outcomes that are addressed in natural environments within the context of everyday learning environments.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (FFY 11):**

N/A

Part C State Annual Performance Report (APR) for FFY2011

Overview of the Annual Performance Report Development:

See the Overview of the Annual Performance Report Development, Page 1.

**Monitoring Priority: Early Intervention Services In Natural Environments**

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

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

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

**Measurement:**

Outcomes:

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

Progress categories for A, B and C:

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

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

**Measurement for Summary Statement 1:**

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

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

Measurement for Summary Statement 2: **Percent = # of infants and toddlers reported in**

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

**Targets and Actual Data for Part C Children Exiting in FFY2011 (2011-12)**

Summary Statements	Actual FFY 2010 (# & % of children)	Actual FFY 2011 (# & % of children)	Targets FFY 2011 (% of children)
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>			
1. 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 exited the program	545/888 = 61.4%	501/831 = 60.28%	65.0%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	590/1145= 51.5%	599/1106 = 54.16%	53.7%
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>			
1 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 exited the program	599/962= 62.3%	586/916 = 63.97%	67.5%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	549/1145= 47.9%	553/1106 = 50.0%	50.8%
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>			
1 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 exited the program	594/878= 67.6%	589/884 = 66.6%	70.6%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	654/1145= 57.1%	645/1106 = 58.3%	58.6%

Progress Data for Part C Children FFY 2011

A. Positive social-emotional skills (including social relationships):	<b>Number of children</b>	<b>% of children</b>
a. Percent of children who did not improve functioning	42	3.8%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	288	26.0%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	177	16.0%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	324	29.3%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	275	24.9%
<b>Total</b>	<b>1106</b>	<b>100%</b>
B. Acquisition and use of knowledge and skills (including early language/communication):	<b>Number of children</b>	<b>% of children</b>
a. Percent of children who did not improve functioning	33	3.0%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	297	26.9%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	223	20.2%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	363	32.8%
e. Percent of children who maintained functioning at level comparable to same-aged peers	190	17.2%
<b>Total</b>	<b>1106</b>	<b>100%</b>
C. Use of appropriate behaviors to meet their needs:	<b>Number of children</b>	<b>% of children</b>
a. Percent of children who did not improve functioning	38	3.4%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	257	23.2%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	166	15.0%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	423	38.2%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	222	20.1%
<b>Total</b>	<b>N= 1106</b>	<b>100%</b>

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2011:**

<b>Improvement Activity planned for 2011-2012</b>	<b>Activities Status Update 2011-2012</b>
1. Early Childhood Outcome data integrity will be monitored at both the regional and state level on a semiannual basis.	Completed. Data reports pulled and shared with Regional staff in June and December. Since implementation of web-based system, Region has capacity to view reports and correct data errors on a regular basis. This provides ability to maintain a much higher level of data integrity.
2. Dialogue will occur with regional Early Intervention Specialists and Supervisors addressing system challenges they encounter, completion of anchor assessments and the COSF.	Completed. ECO data was shared and discussed at EIS/Supervisor and Hub Leadership meetings. Individualized discussions and training was provided regionally in areas with atypical data patterns or identified data errors that needed correction.
3. Continued training on the Decision tree, requirement for team participation in completing the COSF, inter-rater reliability, and timely data entry will be provided by staff to front-line personnel.	Completed. Regional and Hub leadership reviewed the listed tools and processes with their staff at routine all-staff meetings. In addition they assured that “new hires” were oriented to the tools, materials, and processes required for accurate completion of the COSF. Some regions required staff to review the ECO Center training materials for orientation to the ECO requirements.
4. Infant Toddler Program staff will assist with data analysis, development of training materials, and provision of training activities.	Partially completed. Infant Toddler Program Staff completed ECO data analysis and reviewed data with various groups. Regional and Hub Supervisory staff provided training to their personnel using existing materials and resources.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2012**

<b>Improvement Activities Currently in SPP for FFY 2012 (2012-2013)</b>	<b>Revision with Justification</b>
1. Early Childhood Outcome data integrity will be monitored at both the regional and state level on a semiannual basis.	No change
2. Dialogue will occur with <u>Regional and Hub Leadership</u> <del>Early Intervention Specialists and supervisors</del> addressing system challenges they encounter, completion of anchor assessments and the COSF.	Change as noted. Delete content with <del>strikethrough</del> and insert <u>underlined</u> text.
3. Continued training on the Decision tree, requirement for team participation in completing the COSF, inter-rater reliability, and timely data entry will be provided by staff to front-line personnel.	No change
4. Infant Toddler Program staff will assist with data	No change

analysis, development of training materials, and provision of training activities.	
	<p><b>Proposed New Strategy</b></p> <p>5. Explore incorporating ECO rating process into IFSP development. Research strategies used by other states and propose a process for combining requirements for Idaho.</p> <p>This strategy is being used by many states and may improve consistency and reliability of the ECO data.</p>

**Part C State Annual Performance Report (APR) for FFY2011**

**Overview of the Annual Performance Report Development:**

This indicator presents findings of the NCSEAM Family Survey conducted by the Idaho Infant Toddler Program (ITP) to address Indicator 4, the “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.”

The survey administered by ITP included two rating scales developed and validated by the National Center for Special Education Accountability Monitoring (NCSEAM). The 22-item Impact on Family Scale (IFS) measures the extent to which early intervention helped families achieve positive outcomes including the three outcomes specified in Indicator #4.

A total of 2,609 paper-based surveys were distributed across 7 regions to all parents enrolled in the Infant Toddler Program as of June 30, 2012. To increase the number of possible respondents and to assure a wider age distribution, families who had exited the Program in the preceding 3 months were also mailed a survey. Both a Spanish and English survey were enclosed for all families identified with Spanish as their primary language (n=189). Sampling was not used in the survey distribution process.

The survey along with a postage-paid Business Reply Envelope and a cover letter in both English and Spanish were mailed out in mid-August, 2012. The final cutoff date for processing surveys was October 18, 2012 in order to allow families the maximum amount of time possible to respond. The cover letter explained the purpose of the survey and how to complete and return it. A unique identifier was included in each survey to enable tracking of respondent demographics.

In total, 391 surveys were returned for a 15% return rate. Of these, 383 provided useable data (others skipped too many questions or the survey wasn’t legible). This number is high enough for the estimated statewide percent on the indicator to be within an adequate confidence interval, based on established survey sample guidelines (e.g., <http://www.surveysystem.com/sscalc.htm>). Data from each of the scales were analyzed through the Rasch measurement framework.

OSEP requires that the state’s performance be reported as the *percent* of families who report that early intervention services helped them achieve specific outcomes. Deriving a percent from a continuous distribution requires application of a standard, or cutscore. The Infant Toddler Program and stakeholders elected to apply the Part C standards recommended by NCSEAM as a way to derive the percentages to be reported for indicators 4a, 4b, and 4c. The recommended standards established based on item content expressed in the scale were as follows: for Indicator 4a, *know their rights*, a measure of 539; for Indicator 4b, *effectively communicate their children’s needs*, a measure of 556; and for Indicator 4c, *help their children develop and learn*, a measure of 516.

**Monitoring Priority: Early Intervention Services In Natural Environments**

- Indicator 4:** Percent of families participating in Part C who report that early intervention services have helped the family:
- A. Know their rights;
  - B. Effectively communicate their children’s needs; and
  - C. Help their children develop and learn.

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

**Measurement:**

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s

needs) divided by the (# of respondent families participating in Part C)] times 100.  
 C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
2011	A. 63% of respondent families participating in Part C will report that early intervention services have helped the family know their rights. B. 60% of respondent families participating in Part C will report that early intervention services have helped the family effectively communicate their children's needs. C. 74% of respondent families participating in Part C will report that early intervention services have helped the family help their children develop and learn.

**Actual Target Data for (FFY 2011):**

**SPP/APR Indicator #4a:** Percent of families participating in Part C who report that early intervention services have helped the family.

**Know their rights.**

Standard: A. .95 likelihood of a response of “strongly agree” or “very strongly agree” with this item on the NCSEAM survey’s Impact of EI Services on Your Family scale:  
 “Over the past year, Early Intervention services have helped me and/or my family: know about my child’s and family’s rights concerning Early Intervention services.” The measure representing the standard for indicator 4A is 539.

**Percent at or above established cutscore for Indicator 4A standard: 266/383 = 69.5%**

**SPP/APR Indicator #4b:** Percent of families participating in Part C who report that early intervention services have helped the family:

**Effectively communicate their children’s needs.**

Standard: A. .95 likelihood of a response of “strongly agree” or “very strongly agree” with this item on the NCSEAM survey’s Impact of EI Services on Your Family scale:  
 “Over the past year, Early Intervention services have helped me and/or my family: communicate more effectively with the people who work with my child and family.” The measure representing the standard for indicator 4B is 556.

**Percent at or above established cutscore for Indicator 4B standard: 251/383 = 65.5%**

**SPP/APR Indicator #4c:** Percent of families participating in Part C who report that early intervention services have helped the family:

**Help their children develop and learn.**

Standard: A .95 likelihood of a response of “strongly agree” or “very strongly agree” with this item on the NCSEAM survey’s impact of EI Services on Your Family scale:

“Over the past year, Early Intervention services have helped me and/or my family understands my child’s special needs.” The measure representing the standard for indicator 4C is 516.

**Percent at or above established cut score for Indicator 4C standard: 305/383 = 79.6%**

The table below displays the distribution of race/ethnicity in the survey respondents.

Distribution of Race/Ethnicity in the Sample			
Race	Number	Percentage	% Idaho 0-3 Population*
White	325	83%	76.2%
Black or African/American	3	<1%	1.7%
Hispanic or Latino	33	8%	19.0%
Asian or Pacific Islander	0	0%	1.7%
American Indian or Alaskan Native	0	0%	1.5%
Multi-Racial	23	6%	NA
Missing	7	2%	NA

\*Idaho 0-3 Populations Data - July 1, 2011 Idaho Vital Records

The percent of Hispanic returns (8%) was below expected levels based on state demographics, however, the categories for multi-racial may account for some of this shortfall.

Age distribution of children of respondents was generally aligned with the distribution of ages of children served by the Program.

This survey data is valid and representative of the population served by the Program as evidenced by geographic distribution and age of the children represented. When analyzed by race/ethnicity the White population is over represented and Hispanic population is under-represented. When considering these data, it is important to bear in mind that the sampling plan was not designed to yield a representative sample of parents *within* each racial/ethnic category. Therefore, the data are presented for illustrative purposes only.

Please see the Improvement Activities/Timelines section for strategies that will be implemented to increase the overall return rate, strengthen returns from selected regions with below expected return rates, and improve representation of minority populations in the 2013 survey process.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2011:**

	Data for FFY 2010	Data for FFY 2011	Targets for FFY 2011
Number valid surveys returned	399	391	
Return Rate	16.23%	14.99%	

# APR Template – Part C

	Data for FFY 2010	Data for FFY 2011	Targets for FFY 2011
% Responses above established cut score			
4A – know rights	63.4%	69.5%	63%
4B – communicate child's needs	60.9%	65.5%	60%
4C – help child develop and learn	76.9%	79.6%	74%

As evidenced by the chart above, the Idaho Infant Toddler Program has exceeded all targets set for FFY 2011. Please see below for a status update on the improvement activities that were completed during FFY 2011 and the additional strategies we intend to implement during FFY 2012.

Improvement Activity planned for 2011-2012	Activities Status Update 2011 – 2012
1) Develop and implement strategies to address program strengths and need areas identified through analysis of the NCSEAM Family Outcome Survey.	1) Partially completed-ongoing activity.  Information from FFY 2010 Family Survey has been shared with key regional representatives. Regions will develop and implement strategies to address program need areas and to adjust their interactions with families to improve outcomes for families.
2) Report on EIS regional program performance related to targets on DHW, ITP website, ITP Progress reports, and to interagency coordinating council and regional committees.	2) Completed as written

<p>3) Increase responses of the Parent Survey by all parents with a special focus on the Hispanic and Native American populations using a selection of the following strategies:</p> <ul style="list-style-type: none"> <li>• Print postcard for distribution to families prior to survey distribution in Spanish as well as English.</li> <li>• Notify service coordinators of all children, including those coordinating for Hispanic and Native American families, when survey is being distributed and have them encourage their families to complete and return the survey.</li> </ul> <p>Explore opportunities for targeted outreach to the Hispanic/Latino community through Migrant Head Start, Spanish-language support groups, and the Hispanic Community Center.</p>	<p>3) Completed. The state again made outreach efforts to reach both English and Spanish speaking families and encourage them to return the survey. Activities included the following:</p> <ul style="list-style-type: none"> <li>• Distributed flyers in both English and Spanish to parents before the survey was mailed alerting them that the survey was coming.</li> <li>• Included copy of Spanish survey in all Survey packets identified as “Spanish primary language” in ITP Web.</li> <li>• Requested service coordinators and therapists to remind the family during home visits to complete and return the survey.</li> </ul> <p>Regions have maintained ongoing contact with Migrant Head Start and the Hispanic Community Center throughout the year. However, these agencies were not used to provide outreach regarding distribution of the ITP’s Family Survey because most of their clientele are not members of the age population being targeted for survey response.</p>
<p>4. Continue with Statewide implementation of the evidence-based early intervention practices of teaming, coaching, and effective service delivery in natural learning environments through training and technical assistance to assure adherence to practices.</p>	<p>4) Completed, All regional teams have received in-depth training and a structured 6-month follow-up process on implementation of evidence-based practices. Four half-day “booster-shot” training opportunities were provided by Dathan Rush and M’Lisa Shelden via video-conferencing to participants across the state. Teams in every region are now successfully implementing these practices in their routine interventions with families. Fidelity measures are being implemented to promote consistent use of the practices. These practices will increase positive outcomes for families served by the Infant Toddler Program.</p>

<p>5. Continue development and full implementation of statewide TA network utilizing experienced ITP staff to ensure ongoing training of the evidence-based practices as taught by Dathan Rush and M’Lisa Sheldon. Provide quarterly conference calls with Dathan and M’Lisa to assure quality and ensure TA providers maintain fidelity to practices</p>	<p>Completed. The TA mentor system was actively engaged and supporting regions throughout FFY 2011. However, due to Program reorganization, many of the TA Mentors were hired into different positions in the Infant Toddler system. With very few exceptions, these individuals no longer have the time to serve actively in this role. System development is needed in FFY 2012 to assure a strong and effective TA system is in place.</p>
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**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2012**

<b>Currently in SPP for 2012-2013</b>	<b>Revision with Justification</b>
<p>1. Develop and implement strategies to address program strengths and need areas identified through analysis of the NCSEAM Family Outcome Survey results.</p>	<p>No change</p>
<p>2. Report on EIS regional program performance related to performance targets on DHW, ITP website, ITP Progress reports and to interagency coordinating council and regional committees.</p>	<p>No change</p>
<p>3) Increase responses of the Parent Survey by all parents with a special focus on the Hispanic and Native American populations using a selection of the following strategies:</p> <ul style="list-style-type: none"> <li>• Print postcard for distribution to families prior to survey distribution in Spanish as well as English.</li> <li>• Notify service coordinators of all children, including those coordinating for Hispanic and Native American families, when survey is being distributed and have them encourage their families to complete and return the survey.</li> <li>• Explore opportunities for targeted outreach to the Tribes and the Hispanic/Latino community.</li> </ul>	<p>No change</p>
<p>4. Continue with Statewide implementation of the evidence-based early intervention practices of teaming, coaching, and effective service delivery in natural learning environments through training and technical assistance to assure adherence to practices</p>	<p>No change</p>

	<p><b>Proposed New Strategy</b></p> <p>5. Restructure and retrain statewide TA network utilizing experienced ITP staff, contractors, and faculty from higher education to ensure ongoing training of the evidence-based practices as taught by Dathan Rush and M’Lisa Shelden. Provide quarterly conference calls with Dathan and M’Lisa to assure quality and ensure TA providers maintain fidelity to practices</p>
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**Part C State Annual Performance Report (APR) for FFY 11**

**Overview of the Annual Performance Report Development:**

See page one for general overview of APR development

**Monitoring Priority: Effective General Supervision Part C / Child Find**

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

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

**Measurement:** Percent = [(# of infants and toddler birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
2011  (2011-2012)	<b>1.60% of infants under 1 year of age receive early intervention services</b>

**Actual Target Data for (FFY 11): 1.61% of infants under 1 year of age**

Date	0 – 1 Population Served	OSEP 0-1 State Population	% 0-1 Served
December 1, 2011	367 *	22,761 **	<b>1.61% **</b>

\* 618 Count Data

\*\* Reference Source is OSEP Table C-13: 2012

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (FFY 11):**

The Actual Target for FFY 11 in infants aged birth to one enrolled was 0.01% above the target of 1.60% and 0.39% above the FFY 2010 target data. The following practices have increased the state’s performance for this indicator:

- Coordinated outreach to families with infants that received a new born hearing screen.
- Increased statewide outreach to Healthy Connection physicians.
- Statewide outreach and education to WIC programs.
- Screening clinics offered throughout the state.
- Implementing activities identified in Idaho’s Result Visit Action Plan (refer to improvement activities below).

More recent data as of December 2012 shows infants aged birth to one at 1.68%. This increase reflects the continuous efforts of the program to increase the percentage of infants less than one year of age receiving early intervention services.

With all the efforts identified above, Idaho continues to face the following challenges:

# APR Template – Part C

Idaho  
State

- Idaho’s birth rate dropped from 16.5/1000 children in 2008 to 14.1/1000 children in 2011.
- Idaho’s number of twins born dropped significantly from 2010 to 2011.

## Comparison to National Data

Idaho is a state that does not serve “at risk” children. According to OSEP’s Table C-13, Idaho’s identification of infants from birth to one for FFY 2011 compares to other states as follows:

- On December 1, 2011, 367 infants aged birth to one were enrolled in Idaho. Idaho placed 3rd in the nation when ranked among other states with Category C (established by the ITCA Data Committee, 2011) eligibility criteria (obtained from IDEA Infant Toddlers Coordinators Association).
- Idaho served 1.61% of its state’s infant’s age birth to one. This figure is 0.59% above the OSEP National Baseline average of 1.02% for all 50 states, D.C., and P.R.

The following is the status of improvement activities conducted during FFY 11.

Improvement Activities Planned in SPP for FFY 2011	Activity Status Update FFY 2011
1. Continue full development of electronic system of ASQ distribution. Continue activities to increase public awareness, education, outreach, screening, and coordination with Part B.	<p>Centralized Developmental Monitoring continued and expanded during 2011. Most families in Idaho are still opting for participation in the program using hard copies of the ASQ and having them mailed out at the designated intervals. Our enrollment in the electronic ASQ program did increase from 8% to 10% over the last year. Through the centralized child find activities we have seen the enrollment in the centralized monitoring program grow from 2.9% of the state birth to three population (snapshot as of Dec 1 2011) to 3.6% as of Dec 1, 2012.</p> <p>Awareness of the monitoring program is done at the both the state and hub level with outreach activities, referrals for children who are evaluated but not eligible for early intervention, and coordination with community programs like Early Head Start, Homeless Shelters and community screenings and working with the 3-5 preschool screenings.</p>
2. Provide orientation for new employees, and technical assistance/support for staff related to new ASQ system and related Child Find system as needed.	Presentations are made to orient new staff to the Child Find Program, which includes how to make referrals to monitoring and what to do with a referral to direct services from Child Find. These presentations are done on an as needed basis and are on-going.
3. Exhibit Infant Toddler Program information at conferences and health fairs. Conduct regional and statewide outreach activities targeting the general public, hospitals, child care and other social	Over the past year, brochures and other outreach materials were updated and distributed by the Regions to target audiences. Information has been shared statewide at conferences and health fairs. Several regions have implemented regular community screenings. Updates to the Idaho Resource and Referral line (211 Careline) are done every 6 months and is on-going. Outreach to all of the WIC programs have taken place over the last year and will occur

<p>service providers to encourage timely referral of eligible children.</p>	<p>again in the spring of 2013. Child Find information, Developmental Checklists and the Idaho Infant Toddler Program Brochures are displayed and available to families when they access other services like food stamps, etc. at their local Health and Welfare Offices.</p>
<p>4. Report on EIS regional program performance on the Department of Health and Welfare’s website, ITP Progress reports, and to the interagency coordinating council and regional committees.</p>	<p>Completed as written</p>
<p>5. Child Find brochures and Developmental Checklists will be broadly distributed to hospitals, child care settings through Idaho Stars, and through Idaho Sound Beginnings (EHDl) mailings.</p> <p>6. Outreach to target birth to one enrollment. At both the statewide and regional levels, programs will target outreach to hospitals, doctors, health departments, and child care providers to increase referrals</p>	<p>During the last year an Outreach plan has been implemented and has included outreach targeting Physicians. These activities included having Information packets delivered by Easter Seals during their Bloom Fest Campaign. Previous years this activity occurred in one region, in FFY 2011 this was expanded to the entire West Hub and included approximately 600 physicians. In coordination with the Bloom-fest Activities, all Idaho Healthy Connection Physicians received the information packet by personal delivery or mail.</p> <p>Outreach and education has occurred for all WIC programs throughout the state. This outreach has had a moderate effect on increasing enrollment in developmental monitoring and good referrals for eligible children directly to Early Intervention Services</p> <p>During FFY 2011, through coordination with Idaho Sound Beginnings (Idaho’s Early Hearing Detection and Intervention Program) all families who have infants that receive a newborn hearing screen are sent a letter of invitation to participate in the developmental monitoring program. This is limited to families who have provided the EHDl program with contact information. This centralized statewide activity and has accounted for the largest growth in the monitoring program.</p>
<p>7. Implement Outreach Plan developed during Results Visit.</p> <ul style="list-style-type: none"> <li>• Development a plan for technical and social media outreach.</li> <li>• Utilize existing infrastructure within lead agency related to our programs.</li> </ul>	<p>Idaho Infant Toddler Program, with the support of the Idaho Early Childhood Coordinating Council , now has a link on the ECCC’s face book page. The Idaho Infant Toddler Program is currently in the process of researching a Facebook site and a Pinterest site – we are still working out the logistics of how to monitor these sites, keep them up to date, and interesting.</p> <p>We have worked with the health departments statewide to have our link put on their sites, this will be reviewed again in the Spring of 2012</p>

<ul style="list-style-type: none"> <li>Evaluate strategies for branding and targeted messaging. Standardize information, look, and forms used in program. Develop an electronic referral form and process</li> </ul>	<p>Outreach and education has occurred for all WIC programs throughout the state. This outreach has had a moderate effect on increasing enrollment in developmental monitoring and good referrals for eligible children directly to Early Intervention Services</p> <p>During FFY 2011, through coordination with Idaho Sound Beginnings (Idaho’s Early Hearing Detection and Intervention Program) all families who have infants that receive a newborn hearing screen are sent a letter of invitation to participate in the developmental monitoring program. This is limited to families who have provided the EHDI program with contact information. This centralized statewide activity and has accounted for the largest growth in the monitoring program.</p> <p>In process is the establishment of two kiosks, one at a local Walmart Store and one at a WIC office. These Kiosks would have a computer and internet access to allow families to go on- line and complete the Ages and Stages Questionnaires.</p> <p>Currently the Idaho Commission of Libraries and the Idaho Infant Toddler Program are working together to upgrade computer systems in rural libraries to provide families with internet access to complete the Ages and Stages on line.</p> <p>Researching rural community grocery stores to have the Developmental Checklists provided to families at checkout.</p>
<p>8. Reorganize the statewide early intervention system. Administrative oversight has been changed from 7 regions to 3 Hubs with Central supervision. This will assist in ensuring consistency in outreach, referral and direct intervention services.</p>	<p>Completed as written. Each hub has submitted specific child find action plans for FFY2012</p>

**Part C State Annual Performance Report (APR) for FFY 11**

**Overview of the Annual Performance Report Development:**

See page one for general overview of APR development

**Monitoring Priority: Effective General Supervision Part C / Child Find**

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

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

**Measurement:** Percent = [(# of infants and toddler birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
2011  (2011-2012)	<b>2.74% of infants and toddlers birth to three receive early intervention services</b>

**Actual Target Data for (FFY 11): 2.45% of infants and toddlers birth to three**

Date	0 – 3 Population Served	OSEP 0-3 State Population	% 0-3 Served
December 1, 2011	1,717 *	70,068 **	<b>2.45% **</b>

\* 618 Count Data

\*\* Reference Source is OSEP Table C-13: 2012

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (FFY 2011):**

The Actual Target for FFY 11 of infants aged birth to three enrolled in Idaho was missed by 0.29% but was 0.06% above the FFY 2010 target data. Upon further examination, the following have impacted the state's performance for this indicator:

- Due to the reorganization of the Early Intervention System in the state of Idaho (a change from seven individual regions to three hubs), child find efforts were primarily done at the statewide level. Since the completion of the reorganization, the three hubs have identified child find action plans for FFY 2012.
- Counties hardest hit by the economic downturn are the slowest in ITP enrollment growth. Due to the frontier and rural status of the state, families living in these counties are continuing to experience a shift in priorities and are not seeking voluntary programs such as Early Intervention.
- Idaho's overall population growth decreased last year following the flat no growth rate of the past few years.
- Idaho's birth rate dropped from 16.5/1000 children in 2008 to 14.1/1000 children in 2011.
- Idaho's number of twins born dropped significantly from 2010 to 2011.

# APR Template – Part C

Idaho  
State

More recent data as of December 2012 shows infants age birth to three at 2.65%. Although we did not meet the FFY 2011 target, this increase reflects the continuous efforts of the program to increase the percentage of infants birth to three years of age receiving early intervention services.

### Comparison to National Data

Idaho is a state that does not serve “at risk” children. According to OSEP’s Table C-13, Idaho’s identification of infants from birth to one for FFY 2011 compares to other states as follows:

- On December 1, 2011, 1,717 infants aged birth to three were enrolled in Idaho. Idaho placed 8th in the nation when ranked among other states with Category C (established by the ITCA Data Committee, 2011) eligibility criteria (obtained from IDEA Infant Toddlers Coordinators Association).
- Idaho served 2.45% of its state’s infant’s age birth to one. This figure is 0.34% below the OSEP National Baseline average of 2.79% for all 50 states, D.C., and P.R.

The following is the status of improvement activities conducted during FFY 11.

Improvement Activities Planned in SPP for FFY 2011	Activity Status Update FFY 2011
1. Continue full development of electronic system of ASQ distribution. Continue activities to increase public awareness, education, outreach, screening, and coordination with Part B.	<p>Centralized Developmental Monitoring continued and expanded during 2011. Most families in Idaho are still opting for participation in the program using hard copies of the ASQ and having them mailed out at the designated intervals. Our enrollment in the electronic ASQ program did increase from 8% to 10% over the last year. Through the centralized child find activities we have seen the enrollment in the centralized monitoring program grow from 2.9% of the state birth to three population (snapshot as of Dec 1 2011) to 3.6% as of Dec 1, 2012.</p> <p>Awareness of the monitoring program is done at the both the state and hub level with outreach activities, referrals for children who are evaluated but not eligible for early intervention, and coordination with community programs like Early Head Start, Homeless Shelters and community screenings and working with the 3-5 preschool screenings.</p>
2. Provide orientation for new employees, and technical assistance/support for staff related to new ASQ system and related Child Find system as needed.	Presentations are made to orient new staff to the Child Find Program, which includes how to make referrals to monitoring and what to do with a referral to direct services from Child Find. These presentations are done on an as needed basis and are on-going.
3. Exhibit Infant Toddler Program information at conferences and health fairs. Conduct regional and statewide outreach activities targeting the general public, hospitals,	Over the past year, brochures and other outreach materials were updated and distributed by the Regions to target audiences. Information has been shared statewide at conferences and health fairs. Several regions have implemented regular community screenings. Updates to the Idaho Resource and Referral line (211 Careline) are done every 6 months and is on-going. Outreach to all of the WIC

<p>child care and other social service providers to encourage timely referral of eligible children.</p>	<p>programs have taken place over the last year and will occur again in the spring of 2013. Child Find information, Developmental Checklists and the Idaho Infant Toddler Program Brochures are displayed and available to families when they access other services like food stamps, etc. at their local Health and Welfare Offices.</p>
<p>4. Report on EIS regional program performance on the Department of Health and Welfare's website, ITP Progress reports, and to the interagency coordinating council and regional committees.</p>	<p>Completed as written</p>
<p>5. Child Find brochures and Developmental Checklists will be broadly distributed to hospitals, child care settings through Idaho Stars, and through Idaho Sound Beginnings (EHD) mailings.</p> <p>6. Outreach to target birth to one enrollment. At both the statewide and regional levels, programs will target outreach to hospitals, doctors, health departments, and child care providers to increase referrals</p>	<p>During the last year an Outreach plan has been implemented and has included outreach targeting Physicians. These activities included having Information packets delivered by Easter Seals during their Bloom Fest Campaign. Previous years this activity occurred in one region, in FFY 2011 this was expanded to the entire West Hub and included approximately 600 physicians. In coordination with the Bloomfest Activities, all Idaho Healthy Connection Physicians received the information packet by personal delivery or mail.</p> <p>Outreach and education has occurred for all WIC programs throughout the state. This outreach has had a moderate effect on increasing enrollment in developmental monitoring and good referrals for eligible children directly to Early Intervention Services</p> <p>During FFY 2011, through coordination with Idaho Sound Beginnings (Idaho's Early Hearing Detection and Intervention Program) all families who have infants that receive a newborn hearing screen are sent a letter of invitation to participate in the developmental monitoring program. This is limited to families who have provided the EHD program with contact information. This centralized statewide activity and has accounted for the largest growth in the monitoring program.</p>
<p>7. Implement Outreach Plan developed during Results Visit.</p> <ul style="list-style-type: none"> <li>• Development a plan for technical and social media outreach.</li> <li>• Utilize existing infrastructure within lead agency related to our programs.</li> </ul>	<p>Idaho Infant Toddler Program, with the support of the Idaho Early Childhood Coordinating Council , now has a link on the ECCC's face book page. The Idaho Infant Toddler Program is currently in the process of researching a Facebook site and a Pinterest site – we are still working out the logistics of how to monitor these sites, keep them up to date and interesting and in the case of Facebook, how to pay for the site when community parents access it.</p> <p>We have worked with the health departments statewide to have our link put on their sites, this will be reviewed again in</p>

<ul style="list-style-type: none"> <li>Evaluate strategies for branding and targeted messaging. Standardize information, look, and forms used in program. Develop an electronic referral form and process</li> </ul>	<p>the Spring of 2013.</p> <p>Outreach and education has occurred for all WIC programs throughout the state. This outreach has had a moderate effect on increasing enrollment in developmental monitoring and good referrals for eligible children directly to Early Intervention Services</p> <p>During FFY 2011, through coordination with Idaho Sound Beginnings (Idaho’s Early Hearing Detection and Intervention Program) all families who have infants that receive a newborn hearing screen are sent a letter of invitation to participate in the developmental monitoring program. This is limited to families who have provided the EHDI program with contact information. This centralized statewide activity and has accounted for the largest growth in the monitoring program.</p> <p>In process is the establishment of two kiosks, one at a local Walmart Store and one at a WIC office. These Kiosks would have a computer and internet access to allow families to go on- line and complete the Ages and Stages Questionnaires.</p> <p>Currently the Idaho Commission of Libraries and the Idaho Infant Toddler Program are working together to upgrade computer systems in rural libraries to provide families with internet access to complete the Ages and Stages on line.</p> <p>Researching rural community grocery stores to have the Developmental Checklists provided to families at checkout.</p>
<p>8. Reorganize the statewide early intervention system. Administrative oversight has been changed from 7 regions to 3 Hubs with Central supervision. This will assist in ensuring consistency in outreach, referral and direct intervention services.</p>	<p>Completed as written. Each hub has submitted specific child find action plans for FFY2012</p>

**Part C State Annual Performance Report (APR) for FFY 11**

**Overview of the Annual Performance Report Development:**

See the Overview of the Annual Performance Report Development on page 1.

**Monitoring Priority: Effective General Supervision Part C / Child Find**

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

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

**Measurement:**

Percent = [(# of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

FFY	Measurable and Rigorous Target
2011 (2011-2012)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted with Part C’s 45-day timeline

**Actual Target Data for (FFY 2011): 465/474 = 98.1%**

Referral Range	Number/Percent within 45 days	Number/Percent delayed due to family-related reasons	Total Number/Percent in compliance with timeline
FFY 2011 *Data from 4/1/12 – 6/30/12  n = 474	411  86.7%	54  11.4%	465  98.1%

The report is based on the calculation of actual number of days between the date of referral and the date of the initial IFSP meeting for each child. When an untimely IFSP occurs, (46 days or later following the referral date) regions must record the reason for the late meeting in the Idaho web based data system (ITP Web). Data was generated from ITP Web for all children enrolled between 4/1/012 and 6/30/2012. Selection of this quarter’s data best reflects the status of the state as it provides time within the targeted fiscal year for regions to correct any findings of non-compliance that had previously been identified

## APR Template – Part C

Idaho  
State

through the states monitoring process. See indicator #14 for reference to the validity and reliability of the ITP Web data system.

54 children had IFSPs delayed past the 45 day timeline due to exceptional family circumstances as defined by IDEA Part C. They are included in both the actual target data numerator and denominator. Please refer to the table below for examples.

<b>Reasons due to Exceptional Family Circumstances (Justifiable)</b>
Child or family illness or hospitalization
Difficulty making contact with family
Conflict with family scheduling/appointment
Family indecisiveness to participate in program
Family cancelled
Family moved

Nine (9) children had IFSPs delayed past the 45 day timeline due to agency reasons. They were included in only the denominator of the actual target data for this indicator. Please refer to the table below for examples of agency reasons.

<b>Agency Reasons (Non-Justifiable)</b>
High referrals/caseloads
Staff unavailable
Conflict w/ agency scheduling appointment
Delay in receiving documentation to determine eligibility

The initial evaluation, assessment and IFSP meeting was conducted, although late, for all of the 63 children reported as delayed during FFY 2011 unless the child was no longer within the jurisdiction of the EIS program.

### **Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance)**

Level of compliance (93.6%) State reported for FFY 2010 for this indicator: 100%

7. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	<b>4</b>
8. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	<b>4</b>
9. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

The initial evaluation, assessment, and IFSP meeting were conducted, although late, for all of the 85 children reported in the R-APR as having services delayed during FFY 2010 unless the child was no longer within the jurisdiction of the EIS program. This is consistent with OSEP Memorandum 09-02. Correction of each individual incidence of non-compliance was verified through review of data from ITP Web, our new web-based data system. Correction included initial evaluation and IFSP development. Four regions had not corrected prior to notification and were issued findings of non-compliance. All instances of non-compliance were corrected within a timely manner and no later than one year from the date of identified non-compliance.

# APR Template – Part C

Idaho  
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Subsequent, on-site monitoring activities and data review functions conducted by Central Office staff verified that regions were correctly implementing the specific regulatory requirements related to the 45 day timeline.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (FFY 2011):**

**Explanation of Progress or Slippage**

Actual target data for FFY 2011 represents progress from FFY 2010 data by 4.5% (98.1% and 93.6% respectively). The 45 Day timeline is routinely reviewed by regions with data from ITP Web using Crystal Reporting software. In addition, service coordinators receive alerts in ITP Web notifying them when an initial IFSP is due. The consistent review of data has allowed the state and regions to focus on improving their performance.

Improvement Activity	Improvement Activities Planned in SPP for 2011-2012	Activity Status Update 2010–2011
Monitoring and Public Reporting	<ol style="list-style-type: none"> <li>1. Central office staff will report on EIS regional program performance related to targets on DHW, ITP website, ITP Progress reports, and to interagency coordinating council and regional committees.</li> </ol>	<ol style="list-style-type: none"> <li>1. ITP quarterly performance data was reported to central office administration, regional program managers, early intervention specialists, and supervisors. In addition, quarterly performance data has been posted on the internal Department of Health and Welfare website. Semi-annual reports regarding performance data was provided to the Early Childhood Coordinating Council (EC3), serving as the State Interagency Coordinating Council (ICC).</li> </ol>
Training Activities	<ol style="list-style-type: none"> <li>1. Ensure regional orientation and annual training is provided for interim SC regarding the required timelines, policies, procedures, family-centered practice, and collaboration with Children and Family Services</li> </ol>	<ol style="list-style-type: none"> <li>1. As part of the SC requirements, every service coordinator received training that includes information on the required timelines, policies, procedures, and family centered practice requirements of IDEA Part C, including the 45 Day IFSP development requirement. In addition, the Infant Toddler Program continues to work closely with Children and Family Services to foster and facilitate effective collaboration with staff from both programs. The CQI process for CFS includes a review of indicators regarding timely referral for all children birth to 3 with substantiated reports of child abuse and neglect. An electronic training module for service</li> </ol>

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Improvement Activity	Improvement Activities Planned in SPP for 2011-2012	Activity Status Update 2010–2011
		<p>coordinators that specifies requirements for referral between the Infant Toddler Program and the CFS system is under development.</p>
<p>Data System</p>	<ol style="list-style-type: none"> <li>1. Interim service coordinators using ITP Web track the 45 day timeline using the work list function in ITP Web.</li> <li>2. Regional Admin data system users track the 45 day timeline using the work list summary function in ITP Web.</li> <li>3. Continue tracking 45 day timeline to ensure all initial IFSPs are developed within 45 days from referral date.</li> <li>4. Central office and regions use consistent reporting templates to track the 45 day timeline.</li> </ol>	<ol style="list-style-type: none"> <li>1. The ITP Web data system has a built-in work list for Interim Service Coordinators to track the 45 day timeline. The system automatically generates and removes the work list based on action taken by the user in the system. This work list allows ISCs the ability to track when initial IFSP's are due. It also allows supervisors to monitor the completion of initial IFSP's within the 45 day timeline.</li> <li>2. Regional program specialist and supervisors are the regional admin data system users. These users are able to access all work lists to track the 45 day timeline in their region.</li> <li>3. Regional program specialists and supervisors and central office staff consistently use the 45 Day data report from ITP Web using Crystal Reports software to ensure all initial IFSPs are developed within 45 days from the referral date.</li> <li>4. A single report template using Crystal Reports software has been developed for regional supervisors and program specialists and central office to track the 45 day requirement in a consistent manner.</li> </ol>
<p>General Supervision</p>	<ol style="list-style-type: none"> <li>1. When non-compliance is identified in any region, require development of a corrective action plan (CAP) outlining strategies to correct the deficit within one year from date of identification.</li> </ol>	<ol style="list-style-type: none"> <li>1. Regional non-compliance is identified using data from ITP Web. If regional non-compliance is identified, a Corrective Action Plan is developed which documents the noncompliance and specific strategies and timeframes required for correction. Central office monitors the completion and implementation of the Corrective Action Plan.</li> </ol>

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Improvement Activity	Improvement Activities Planned in SPP for 2011-2012	Activity Status Update 2010–2011
Monitoring	<ol style="list-style-type: none"> <li>1. Monitor all regions with active CAPs through periodic data submission, quarterly reports, routine phone contact, and on-site visits as required and/or specified in their plan.</li> </ol>	<ol style="list-style-type: none"> <li>1. Central office monitored all regions with Corrective Action Plans using data from ITP Web and file reviews, routine conference calls, and on-site visits.</li> </ol>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (FFY 11):**

N/A

**Part C State Annual Performance Report (APR) for FFY2011**

**Overview of the Annual Performance Report Development:**

To obtain the data for Indicator 8 A, B, and C, Central office personnel randomly selected 15 files per region or 100% eligible files if fewer than 15 were eligible in any region. This process resulted in the selection of 105 records from the seven regions. Once selected, the names were provided to the regions. The regions then completed a file review to gather data for components A, B and C of this indicator. This data was submitted to CO as part of the Regional-APR, which is part of our monitoring process. Information from the ITP Web system and in some instances, on-site file review by Central Office staff was used to validate the regional information.

Idaho will post the FFY11 monitoring results to the public regarding ‘measurable and rigorous targets’ and performance on each EIS program in the SPP on the Idaho Department of Health and Welfare Infant Toddler home page as soon as possible but no later than May of 2013. In addition, information will be shared through other public forums such as the Hub Leadership and Supervisor’s quarterly meetings, Early Childhood Coordinating Council, etc.

**Monitoring Priority: Effective General Supervision Part C / Effective Transition**

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

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B;
- C. Transition conference, if child potentially eligible for Part B.

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

**Measurement:**

A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.

B. Percent = [(# of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition conferences, including reasons for delays.

FFY	Measurable and Rigorous Target
2011	<b>8A 100%; 8B 100%; 8C 100%</b>

**Actual Target Data for FFY2011:**

<b>A. 96/105 = 91.4%</b>
<b>B. 105/105 = 100%</b>
<b>C. 98/100 = 98%</b>

To obtain the data for Indicator 8 A, B, and C, Central office personnel randomly selected 15 files of children that met the requirements to be included in this indicator per region, or 100% eligible files if fewer than 15 were available in any region. This process resulted in the selection of 105 records from the seven regions. Once selected, the names were provided to the regions. The regions then completed a file review to gather data for components A, B and C of this indicator. This data was submitted to CO as part of the Regional-APR, which is part of our monitoring process. Information from the ITP Web system and in some instances, file review by Central Office staff was used to validate the regional information.

NOTE: Idaho did not report in its calculation children for whom we identified the cause for the delay as exceptional family circumstances.

**A. Children Exiting Part C who Received Timely Transition Planning:**

a. Number of children exiting Part C who have an IFSP with transition steps and services	<b>96</b>
b. Number of children exiting Part C	<b>105</b>
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Percent = [(a) divided by (b)] times 100)	<b>91.4%</b>

**B. Children Exiting Part C who Received Timely Transition Planning (Notification to LEA):**

c. Number of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred	<b>105</b>
d. Number of children exiting Part C who were potentially eligible for Part B	<b>105</b>
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Notification to LEA) (Percent = [(a) divided by (b)] times 100)	<b>100%</b>

**C. Children Exiting Part C who received Timely Transition Planning (Transition Conference):**

e. Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred	<b>98</b>
f. Number of children exiting Part C who were potentially eligible for Part B	<b>100</b>
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Transition Conference) (Percent = [(a) divided by (b)] times 100)	<b>98%</b>

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2011:

Improvement Activity	Improvement Activities planned in SPP for 2011-2012	Activity Status update 2011 – 2012
Monitoring Activities	Infant Toddler Program central office staff will conduct monitoring activities in accordance with the state monitoring plan outlined in Indicator #9.	Completed
Training	Update joint Policy Documents with State Department of Education, Statewide Interagency Agreement, local interagency protocol boilerplate, and other tools developed to fully comply with new Part C regulations.	Completed
Interagency Agreement	SDE and ITP central office staff will review regional protocols between LEA and IT programs to assure inclusion of required policies, procedures, and documentation requirements.	Completed – the Interagency Agreement and Regional protocol boilerplate was updated to meet requirements in new Part C regulations. Training reviewing required content and format was provided to Hub Leadership and Supervisors.
Public Reporting of Data	Report on EIS regional program performance on DHW, ITP website, ITP Progress reports, and to Interagency Coordinating Council (known in Idaho as the Early childhood Coordinating Council) and regional committees.	Public reporting activities were completed as planned.
Training	Track use by staff of electronic training modules on a variety of topics including the key principles of early intervention, service coordination responsibilities including transition, and quality IFSP development.	Completed as written.

The *Actual Target Data (Performance)* reported above reflects an excellent level of achievement with Transition indicators 8B and 8C but shows some slippage with indicator 8A.

Transition 8A shows a drop from 99% in FFY 2010 to 91.4% in FFY2011. Five regions scored 100% with this indicator. However, two of the seven regions monitored show slippage from the previous year. Region 1 accounts for two of the children missed. Region 5 reported seven of 15 who did not have transition related steps in the child’s IFSP.

Transition 8B shows 100% compliance by all seven regions monitored with the requirement to provide notice of potentially eligible children to the LEA. This stellar achievement shows improvement from the 99% compliance reported in FFY 2009 and FFY2010.

Transition 8C shows consistent data of 98% for this year and last year. This percentage reflects two potentially eligible children identified during State monitoring activities (both in Reg. 1) that did not benefit from a timely transition meeting with the LEA.

Statewide Interagency Agreements with participating agencies (Part B and C lead agencies and Head Start) are in place.

Central Office monitors and verifies regional performance as described in Indicator 9 to assure ongoing compliance and continued progress toward the 100% target.

### **Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):**

Level of compliance (actual target data) State reported for FFY 2010 (period from July 1, 2010, through June 30, 2011) for this indicator:

Transition 8 A FFY 2010 Actual Target Data was 104/105= **99%**

Two findings of non-compliance were made during FFY 2010. Both were verified as corrected within one year by Central Office.

Transition 8 B FFY 2010 Actual Target Data was 104/105= **99%** One finding of non-compliance was made during FFY 2010. It was verified as corrected within one year by Central Office.

Transition 8 C FFY 2010 Actual Target Data was 98/100 = **98%** One finding of non-compliance was made during FFY 2010. It was verified as corrected within one year by Central Office.

### **Correction of Previously Identified Non-compliance from FFY 2010, and Specific Action Taken to Verify Correction**

All findings of noncompliance identified in FFY 2010 related to transition (IFSP transition steps (8A), notification to LEA is provided (8B) and timely transition conferences (8C) were timely corrected in FFY 2011 (see Indicator 9).

**8A.** *Idaho Part C verifies that each EIS program with noncompliance reflected in the data reported for this indicator: (1) is correctly implementing the IFSP transition content requirements (i.e., achieved 100% compliance) in 34 CFR §303.148(b)(4) and 303.344(h) (i.e., achieved 100% compliance) based on a review of data subsequently collected through on-site monitoring; and (2) has developed an IFSP with transition steps and services for each child, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02.*

In FFY 2010, transition steps on the IFSP were missing for two children, one from Region 2 and one from Region 3. Both children exited the Program prior to correction. Correction was not possible as both children were no longer within the jurisdiction of the EIS program.

Training was provided to assure the regions are correctly implementing and documenting the regulatory transition requirements.

In monitoring subsequent data, both these regions were found to have 100% of IFSPs with transition steps, demonstrating full correction and compliance with this indicator.

**8B.** *Idaho Part C verifies that each EIS program with noncompliance reflected in the data reported for this indicator: (1) is correctly implementing the LEA notification requirements (i.e., achieved 100% compliance) in IDEA section 637(a)(9)(A)(ii)(I) and 34 CFR §303.148(b)(1) based on a review of updated data subsequently collected through on-site monitoring; and (2) has provided notification to the LEA for*

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*each child, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02.*

In FFY 2010, notification of the LEA wasn't provided for one child in Region 1. This child exited the Program prior to correction. Correction was not possible as the child was no longer within the jurisdiction of the EIS program.

To assure the regions are correctly implementing the regulatory transition requirements, training was provided to both LEA and Part C staff on transition-related requirements and timelines for both Programs. In addition, the ITP Web system provides service coordinators an advance reminder when notices to the LEA are due and tracks the date the notice is provided.

In monitoring subsequent data in Region 1, the LEA was notified for 100% of potentially eligible children. This demonstrates full correction and compliance with this indicator.

**8C.** *Idaho verifies that each EIS program with noncompliance reflected in the data reported for this indicator: (1) is correctly implementing the timely transition conference requirements in 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100% compliance) based on a review of data subsequently collected through on-site monitoring; and (2) has conducted a transition conference, although late, for any child potentially eligible for Part B whose transition conference was not timely, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02.*

In FFY 2010, a timely transition meeting wasn't held for two potentially eligible children, one in Region 1 and one in Region 5. These children exited the Program prior to correction. Correction was not possible as the children were no longer within the jurisdiction of the EIS program.

To assure the regions are correctly implementing the regulatory transition requirements, training was provided to both LEA and Part C staff on transition-related requirements and timelines. In addition, The ITP Web system now provides service coordinators an advance reminder when transition conferences are due and tracks the date the conference is held.

In monitoring subsequent data in both regions, the transition conference was held for 100% of potentially eligible children. This demonstrates full correction and compliance with this indicator.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2012:**

Improvement Activities planned in SPP for 2012-2013	Proposed Change	Justification
1. Infant Toddler Program central office staff will conduct monitoring activities in accordance with the state monitoring plan outlined in Indicator #9.	No Change	
2. Conduct periodic checks to assure compliance with newly revised joint Policy Document with SDE, Statewide Interagency Agreement, local interagency protocol boilerplate, and other tools developed to enhance and streamline transition-related activities for both Part C and Part B personnel	No Change	

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<p>3. State Department of Education and ITP central office staff will review regional protocols between LEA and Infant Toddler programs to assure inclusion of required policies, procedures, and documentation requirements.</p>	<p>No change</p>	
<p>4. Report on EIS regional program performance on DHW, ITP website, ITP Progress reports, and to interagency coordinating council and regional committees.</p>	<p>No change</p>	
<p>5. Track use by staff/contractors of electronic training modules that are available through KLC or other learning programs. Training will include topics like the following; key principles of early intervention, service coordination responsibilities including transition procedures, and quality IFSP development.</p>	<p>No change</p>	
	<p><b>Proposed New Strategy</b></p> <p>6. Explore strategies to centralize notification of potentially eligible children to LEA and SEA. If feasible, move to a streamlined and centralized notification process</p>	<p>Current notification process is difficult to monitor and doesn't adequately meet new requirement to notify SEA in addition to the LEA. A centralized process has potential to correct both of these issues.</p>

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

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

**Overview of the Annual Performance Report Development:** See page 1 of report.

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

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

**Measurement:**

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
  - b. # of corrections completed as soon as possible but in no case later than one year from identification.
- Percent = [(b) divided by (a)] times 100.

**States are required to use the “Indicator C 9 Worksheet” to report data for this indicator (see Attachment A).**

FFY	Measurable and Rigorous Target
FFY 2011	100%

**Actual Target Data for FFY 2011:**

**Target data for FFY 2011; 25/26=96%**

**Describe the process for selecting EIS programs for Monitoring:**

All Regions are monitored annually through a process of Regional Annual Performance Reports (R-APR) and a data review conducted by central office personnel. In addition, regions are selected for on-site monitoring through a focused monitoring process. Details about the monitoring system can be found in the SPP under indicator 9.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2011:**

During FFY 2010, Idaho continued to have all but one identified non-compliance corrected within 12 months of identification. We had slippage from the target of 100% due to one instance of uncorrected noncompliance.

**Discussion of Data Table (Attachment A)**

**1. Timely Services:**

Seven regions were found to be out of compliance regarding Timely Service during FFY 2010. Seven regions had systemic non-compliance identified and one region (Region 7) had additional findings of individual non-compliance identified for 10 children. All individual instances of non-compliance in Region 7 were verified as corrected within 12 months, which is consistent with prong 1 of memo 09-02).

Timely systemic correction (within 12 months) was verified for six of the seven findings of systemic non-compliance. Systemic correction for the final region (Region 3) was subsequently verified on October 16, 2012. Although one instance was not timely, all findings of non-compliance identified during FFY 2010 are now corrected. Corrections were verified by central office.

Please see Indicator 1 for the a description of the specific steps taken to ensure full correction consistent with OSEP memo 09-02.

**7. 45 Days**

Four regions were found to be out of compliance during FFY 2010. Region 1, 4, 6 and 7 had findings of non-compliance requiring a CAP. All non-compliance was corrected within 12 months. Please see Indicator 7 for additional details regarding activities used to promote correction of regional non-compliance and to verify correction consistent with OSEP memo 09-02.

**8. Transition**

A. Two regions were found to be out of compliance during FFY 2010. Region 2 and Region 3 both had one instance of individual non-compliance identified for 8A. Both findings of noncompliance were corrected within 12 months.

B. One region was found to be out of compliance during FFY2010. Region 3 had one instance of individual non-compliance identified for 8B. This finding of noncompliance was corrected within 12 months).

C. One region was found to be out of compliance during FFY2010. Region 3 had one instance of individual non-compliance identified for 8C. This finding of noncompliance was corrected within 12 months).

Please see Indicator 8 for additional details regarding activities used to promote correction of regional non-compliance and to verify correction consistent with OSEP memo 09-02 for the Transition indicators.

<b>Improvement Activities planned in SPP for 2011 - 2012</b>	<b>Activity Status update 2011– 2012</b>
<p>Monitor statewide use of ITP web data system by ITP employees and contractors. Track the quality of data entry and utilization of reports for supervision/program management.</p> <p>Complete redesign and fully implement version 2 ITP Web, the web-based data system being developed.</p>	<p>Completed as written</p> <p>Partially completed. ITP Web Version 2 (now called ITP KIDS) continues in production. It is in the testing phase. Roll-out is anticipated by Spring, 2013.</p>

<p>Report on statewide and regional program performance on the Department of Health and Welfare’s website, ITP Progress reports, and to the interagency coordinating council and regional committees.</p>	<p>Completed as written.</p>
<p>Implement fee rules which established a system for family cost participation</p>	<p>Not completed. Implementation of ITP Fee rules is on hold as a result of changes in the Part C regulations issued September 2011. The rules need to be significantly revised to align with new requirements prior to implementation. Target timeframe for rule revision is Winter of 2013.</p>
<p>Conduct focused monitoring visits to two regions addressing a selected topic area based on current program data and stakeholder input.</p>	<p>Not completed. Regional monitoring was conducted using ITP Web data reports and verification activities rather than a focused monitoring process. Focused monitoring activities will be resumed in FFY 2012.</p>
<p><b>Improvement Activities planned in SPP for 2012 - 2013</b></p>	<p><b>Proposed change and Justification</b></p>
<p>1. Monitor statewide use of ITP web data system by ITP employees and contractors. Track the quality of data entry and utilization of reports for supervision/program management.</p>	<p>No change</p>
<p>2. Report on statewide and regional program performance on the Department of Health and Welfare’s website, ITP Progress reports, and to the interagency coordinating council and regional committees.</p>	<p>No change</p>
<p><del>3. Track implementation and use of fee rules which established a system for family cost participation. Track additional funding available to the ITP as a result of this revenue source.</del></p>	<p>Change as noted. Delete content with <del>strikethrough</del> and insert <u>underlined</u> text.</p> <p><u>Revise Family Fee Rules to align with Federal Requirements outlined in Part C regulations issued September 2011. Following rule revision, modify ITP KIDS (new data system) to accommodate revised billing structure and implement billing requirements. Target timeframe for full implementation is July, 2015.</u></p>

<p>4. Conduct focused monitoring visits to two regions addressing a selected topic area based on current program data and stakeholder input.</p>	<p>No change</p>
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**Part C State Annual Performance Report (APR) for FFY 2011**

**Overview of the Annual Performance Report Development:**

See the Overview of the Annual Performance Report Development, Page 1.

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

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

FFY	Measurable and Rigorous Target
2011 (2011-2012)	Not applicable--Part B due process procedures are not adopted

**Actual Target Data for FFY 2011:** Not applicable. Part B due process procedures were not adopted.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:**

NA--Part B due process procedures were not adopted.

**Improvement Activities/Timelines/Resources:** NA

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:** N/A

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

**Overview of the Annual Performance Report Development:**

See the Overview of the Annual Performance Report Development, Page 1.

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

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

FFY	Measurable and Rigorous Target
2011 (2011-2012)	<b>Not applicable, no mediation requests received.</b>

**Actual Target Data for FFY 2011:** Not applicable. No mediation requests were received.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:**

Although there were no requests for mediation in FFY 2011, all improvement activities planned were addressed.

**Improvement Activities/Timelines/Resources:**

Improvement Activity	Improvement Activities planned in SPP for 2011-2012	Activity Status update 2011 – 2012
Parent Education	Develop unit for service coordination training in on-line learning modules that incorporates information about informing families of their rights and procedural safeguards including how to request and use mediation for dispute resolution.	Infant Toddler Program shifted the focus of the contract with Idaho Parents Unlimited to provide information support related to family rights and procedural safeguards and instruction to families about how to prepare and file written complaints and how to request mediation as an option to resolve disputes. Rather than training sessions for families related to procedural safeguards, individual contacts were used to achieve this. As planned, a Service Coordinator training module was developed and implemented. Service Coordinators handled providing this information to families through regular contacts.

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Improvement Activity	Improvement Activities planned in SPP for 2011-2012	Activity Status update 2011 – 2012
Review Complaint Data	Review status of complaint data, review with stakeholders and revise targets and activities/strategies, as needed. Submit changes in APR, as needed.	Complaint data was reviewed with the EC3, an Infant Toddler Program AD Hoc Committee. However, the low level of activity does not warrant changes to targets and activities/strategies in the APR will remain unchanged for another year. Informal complaint logs were collected quarterly from regional programs and reviewed.
Training	Provide training to mediators to assure they have understanding of Part C requirements and processes.	While specific training was not provided, coordination occurred with Part B to maintain trained mediator lists and to assure continued commitment for joint training efforts at such time as mediators are convened in the future. Until that time, individual training in Part C procedures and requirements will be provided.
Report Performance	Report regional program performance on the Department of Health and Welfare’s website, ITP Progress reports, and to the interagency coordinating council and regional committees.	Reports of regional performance were posted on the DHW website in June, 2012.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

N/A

**Part C State Annual Performance Report (APR) for FFY 10**

**Overview of the Annual Performance Report Development:**

For General Overview Information, see page 1.

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

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

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

FFY	Measurable and Rigorous Target
2011 (2011-2012)	100% timely and accurate submission of 618 Data and Annual Performance Report

**Actual Target Data for (FFY 2011):**

Date	Accurate OSEP Reports submitted “Timely”	Total OSEP Reports Required	% Accurate Reports submitted “Accurate & Timely” **
December 1, 2012	5	5	<b>100%</b>
** Calculated as per Indicator 14 Self-Scoring Rubric worksheet			

Idaho’s actual FFY 2011 performance (based on the total of 5 annual OSEP required reports) was **100%**. As defined by the Self-Scoring Rubric for Part C – Indicator 14 APR and 618 – State Reported Data, all of these data were reported as “Timely”, “Complete”, having “Passed the Edit Check”, and having “Responded to Data Note Requests” as necessary. They have also been determined to be “Valid and Reliable”, “Correctly Calculated”, and “Follow Instructions” as required.

State 618 Data Reports (Tables 1, 2, 3, and 4) were submitted as follows: Tables 1 and 2 prior to February 1, 2012 and Table 3 and Table 4 prior to November 1, 2012.

The following is a table which summarizes how each of the system routines, backups, and other detailed safeguards work in combination to assure Idaho’s state reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

Indicator Data Source	Method of Verification	
	Valid & Reliable	Timely
<p><b>1, 3, 7, 8</b></p> <p><b>compliance</b></p> <p>ITPWEB Primary</p>	<p>Periodic examination of pertinent data elements relative to indicator; Individual client record level edit checks as necessary; Routine review of report errors; Identification and correction of errors; Personnel contact regarding missing or errant data; Instruction / training / TA for personnel to assure understanding of requirements, timelines, fundamentals, and methodologies; Determination and selection of report samples; On site hard copy record verification and validation</p>	<p>Communication with Hub and regional supervisors and Data Personnel identifying expected due dates</p> <p>Reported by CO as per OSEP guidance</p>
<p><b>2, 5, 6,</b></p> <p><b>618 rpts &amp; performance</b></p> <p>ITP Web primary</p>	<p>Periodic examination of pertinent data elements relative to indicator; Individual client record level edit checks as necessary; Routine review of report errors; Identification and correction of errors; Personnel contact regarding missing or errant data; Instruction / training / TA for personnel to assure understanding of requirements, timelines, fundamentals, and methodologies; Assure compliance with reporting requirements; On site hard copy record verification and validation</p>	<p>Communication with Hub and regional supervisors and Data Personnel identifying expected due dates</p> <p>Reported by CO as per OSEP guidance</p>
<p><b>4</b></p> <p>Contractor NCSEAM Family Survey</p>	<p>Determination and selection of report samples; Assure contractual quality criteria are met; Confirm participant representativeness (age, ethnicity, geographic, etc.)</p>	<p>Reported by CO as per OSEP guidance</p>
<p><b>9</b></p> <p><b>compliance</b></p> <p>GEN SUPERVISION</p>	<p>Periodic examination of pertinent data elements relative to R-APR; Review and validate R-APR data via methods previously detailed; Individual client record level edit checks as necessary; Identification and correction of errors; Personnel contact regarding missing or errant data; Instruction / training / TA for personnel to assure understanding of requirements, timeliness, fundamentals, and methodologies; On site hard copy record verification and validation of R-APR &amp; CAP data</p>	<p>Review and insure compliance with terms and scheduled timelines detailed in issued CAPs to demonstrate correction ASAP and no later than 12 months from identification; Require timely submission of R-APR data; Associated reporting by CO as per OSEP guidance</p>
<p><b>13</b></p> <p><b>Mediation</b></p>	<p>Maintain Complaint Protocol; Review Complaint Logs; Discovery and collection of information; Annual review of required timelines; Timely issuance of report(s)</p>	<p>Reported by CO as per OSEP guidance</p>

# APR Template – Part C

Idaho  
State

Indicator Data Source	Method of Verification	
	Valid & Reliable	Timely
12  Complaint Resolution	N/A - Idaho does not use PART B process procedures	N/A - Idaho does not use PART B process procedures

## FFY 2011 APR (State)

Indicator 14 - SPP/APR Data			
APR Indicator	Valid and reliable	Correct calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8A	1	1	2
8B	1	1	2
8C	1	1	2
9	1	1	2
12	N/A	N/A	N/A
13	1	1	2
		<b>Subtotal</b>	24
<b>APR Score Calculation</b>	<b>Timely Submission Points</b> - If the FFY 2011 APR was submitted on-time, place the number 5 in the cell on the right.		5
	<b>Grand Total</b> – (Sum of subtotal and Timely Submission Points) =		29

618 Data – Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Date Note Requests	Total
Table 1 – Child Count Due Date: 2/1/12	1	1	1	1	4
Table 2 – Program Settings Due Date: 2/1/12	1	1	1	1	4
Table 3 – Exiting Due Date: 11/7/12	1	1	1	N/A	3
Table 4 – Dispute Resolution Due Date: 11/7/12	1	1	1	N/A	3
				<b>Subtotal</b>	14
<b>618 Score Calculation</b>			<b>Grand Total</b> (subtotal x 2.2)		30.8

Indicator #14 Calculation	
A. APR Grand Total	29.00
B. 618 Grand Total	30.80
C. APR Grand Total (A) + 618 Grand Total (B) =	59.80
Total N/A in APR	0.00
Total N/A in 618	0.00
<b>Base</b>	<b>59.80</b>
D. Subtotal (C divided by Base*) =	1.000
E. Indicator Score (Subtotal D x 100) =	100%

\* Note any cell marked as N/A will decrease the denominator by 1 for APR and 2.2 for 618

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (FFY11):**

The current Infant Toddler Program web-based data system has capabilities to pull in-depth reports electronically that eliminate previous manual hand-tabulation and calculation. In addition, the system allows users to pull reports at any time without having to complete regional server downloads. The data system is currently undergoing a redesign including development of enhancements to incorporate the billing system features as an integrated component of the system. The development is near completion

# APR Template – Part C

Idaho  
State

with plans to implement both system and user testing and to complete statewide training and roll-out by early 2013.

Improvement Activities Planned in SPP for 2011-2012	Activity Status Update 2011 – 2012
Provide training to staff and contractors for new billing system.	Delayed. Training and implementation of billing system is planned for Spring 2013 due to delays in system development. Training videos are currently being developed to assist with training staff and contractors.
As needed, develop additional report templates for regional and state management and program monitoring.	In progress. Crystal reports are currently being developed using the updated data base structure. Once completed, regional and state management can access reports when the updated web-based data system is implemented.
Continue detailed semi-annual reporting of program data at the Central Office for maintaining baseline data and progress reporting for each region and Hub.	Ongoing. Existing crystal reports are being used for detailed quarterly and semi-annual reporting of program data. Administrative oversight is now being provided through Hubs.
Maintain timely reporting of all 618 data and annual performance reporting.	Completed. All 618 reports and the FF 2011 APR were submitted timely.
Evaluate data needs and ability of Idaho Infant Toddler Program data system to meet those needs.	Ongoing. With the development and upcoming implementation of the updated web-based data system, the program has continually evaluated the data needs of the program and the capacity of the data system.
Continue routine data verifications for accuracy, reliability, non-duplication, etc.	Ongoing. The program completed routine data verifications for accuracy, reliability, non-duplication, etc.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (FFY 11): NA**