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

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 new web-based data system , ITP Web for the first time. This resulted in extensive effort to define the report criteria for the new database structure and parameters and to analyze the data and assure that the measurement definitions were met by the new reports. Idaho will now have more timely and accurate data with a future decrease in manual effort. This year, however, due to slight variance in how reports are designed from previous years, it resulted in slight variations in data. Any variances are noted within the indicators. The Idaho Infant Toddler Program returned to the routine use of December 1 data for the 618 count in FFY 10 following a one year approved variance to accommodate the implementation of the new system and data conversion operations last year.

- Data that was not reportable from the Data-Tot or ITP Web 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 continued to assure the new web-based data system was implemented. Work on enhancements and a redesign for a Version 2 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: regional program managers, early intervention specialists, 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 the revised SPP targets that they assisted with the previous year.

- 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 09 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. 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 10 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 as soon as possible but no later than May of 2012. In addition, information will be reviewed through other public forums such as the early intervention specialist/supervisor, program manager, and the Early Childhood Coordinating Council meetings.

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

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 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
2010 (2010-2011)	**100%** of infants and toddlers with IFSPs receive the early intervention services on their IFSPs in a timely manner.

Actual Target Data for (FFY 2010): 1,612/1,682 = **96%**

NOTE: The Actual Target Data for FFY 2010 includes six of the seven regions in Idaho. Please see below for explanation.

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
1,682	1,443 **86%**	169 **10%**	1,612 **96%**

In Idaho, timely services are defined as the actual start date is equal to or less than the projected start date for initial and ongoing IFSPs. A report encompassing all services projected to start in FFY 10 (July 1, 2010 – June 30, 2011) was generated from the ITP Web data system for six of the seven regions. For one region, a report encompassing all services projected to start within the last quarter of FFY 10 (4/1/11 – 6/30/11) was generated from ITP Web. See below for the explanation of the single regional variance in the dates for the timely service reporting. 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. See indicator #14 for reference to the validity and reliability of data generated from the ITP Web data system.

In the six regions with data for the entire fiscal year, 169 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.

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

In the six regions with data for the entire fiscal year, 70 children had a delay in timely service due to agency reasons. They were only included in the actual target data denominator. Please refer to the table below for examples of agency reasons.

Agency Reasons
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 239 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.

Correction of FFY 2009 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance State reported for FFY 2009 for this indicator: 100%

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

The services identified in IFSP's were provided, although late, for all of the 89 children reported as delayed during FFY 09 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 was corrected in a timely manner. Four individual instances of non-compliance were identified for a single region. All of the four individual instances were corrected within a timely manner.

This is consistent with OSEP Memorandum 09-02. Correction of each individual incidence of non-compliance was verified through ITP Web. On-site monitoring activities and desk audit functions conducted by Central Office staff verified that regions were correctly implementing the specific regulatory requirements and state's definition related to timely services. Please refer to indicator 9 for further details.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *(FFY 10)*:

The *Actual Target Data* reported for FFY 10 including six of the seven regions shows an increase in performance. Six regions showed that 96% of children are received timely services in FFY 10. The Idaho Infant Toddler Program continues to work diligently each year to improve performance to ensure children with IFSP's receive timely services.

Upon further examination, the following strategies have positively impacted the state's performance in providing services to children in a timely manner:

- 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 data system for service providers and service coordinators.
- Timely Service Alert generates to regional admin users (regional early intervention specialists and 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.

In FFY 10, central office identified one region using incorrect dates for timely services. This was discovered during a data verification process while monitoring timely service data reports. It was discovered that the region had indicated the same date in multiple instances for the IFSP, the projected start date and in some instances the actual start date. In response, central office and the identified region took the following actions:

1. Central office provided timely service policy documentation and held a training/Q & A session with the region.
2. Central Office generated a crystal report using data from ITP Web. The individual region completed a hard copy record review and provided correct dates to determine if services were timely.
3. Central office and IT completed data corrections in ITP Web to ensure accurate data.
4. The regional program was notified of a finding of their failure to provide timely and accurate data and a Corrective Action Plan is being developed.
5. Central office is providing additional ITP Web data system training to supervisors, staff, and contractors.
6. Prior Written Notices were sent to families when services were incorrectly identified to be provided in IFSP's
7. Central office completes monthly reviews of timely services data from ITP Web.

When reviewing the incorrect timely services data for the identified region, it was determined that the Infant Toddler Program did not have the manpower and resources to update the entire FFY 10 data. As a result, the region was asked to provide correct data for the last quarter in FFY 2010 (April 1, 2011 – Jun 30, 2011). The identified region's data reflects 58/93 = 62.4% of children receiving timely services and 92/106 – 86.8% of timely services provided for FFY 10.

In addition to cleaning up the last quarter in FFY 10, the region was found out of compliance and was required to correct documentation for timely and accurate data for the first quarter's data in FFY 2011 (July 1, 2011 – September 30, 2011) and to assure maintenance of timely and accurate data in the future. According to the Corrective Action Plan, reporting and monitoring will continue on a monthly basis to ensure understanding of the program's timely service definition and that correct data is being recorded in ITP Web.

Improvement Activity	Improvement Activities Planned in SPP for 2010 - 2011	Activity Status Update 2010 - 2011
Monitoring	1. Continue tracking service start dates to ensure all children are served in a timely manner. 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. 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. 4. Evaluate progress and status of performance to determine need for additional resource recruitment or other strategies to assure timely delivery of early intervention services in accordance with IFSPs. If strategies are added or changed, report in next APR.	Completed as written. Please refer to indicator #9 for details.
Training	1. 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.	1. Regions provide regular update trainings to existing Service Coordinators and trainings for new Service Coordinators on a regular basis.
Maintenance of Interagency Agreements (IAA) and Contracts	1. 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. 2. Annual review and renewal of contracts issued to early intervention providers to service children through an IFSP. Ensure requirements regarding timelines	1. Regions review 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 continue to be addressed.

Improvement Activity	Improvement Activities Planned in SPP for 2010 - 2011	Activity Status Update 2010 - 2011
	and procedural safeguards continue to be included in all early intervention contracts as specified in the boilerplate and are monitored for compliance.	2. Regions review and renew 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 10, regions monitored these contracts on a regular basis to ensure compliance.
Reporting	1. 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.	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).
Data	**Additional Improvement Activities Completed** 1. Generate crystal reports using ITP Web data for identified region to correct data and to ensure future timely service data is accurate.	1. Reports were generated for the last quarter of FFY 10 for the identified region. Correct data was provided by the region to central office. Data fixes were completed by central office and IT developers in ITP Web. A report was also generated for the first quarter of FFY 11 and the same

Improvement Activity	Improvement Activities Planned in SPP for 2010 - 2011	Activity Status Update 2010 - 2011
		process was followed to correct data.
Training	1. Provide additional timely services training and Q&A session for identified region.	1. A training and Q&A session was provided via video conference on 9/7/11 for the identified region.

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

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
2010 (2010-2011)	**Services in Home or Community-Based Settings = 93%**

Actual Target Data for (FFY 2010): 1650/1732 = **95.3%**

Data Source: ITP Web Data System 618 Report Data – December 1, 2010		
Service Setting	**Data**	**Percent**
EI CTR	14	0.8%
HOME	1486	86%
SVC PROV	56	3.2%
COMMUNITY SETTING	164	9.4%
IN-HOSP	2	0.1%
RESIDENT	0	0.0%
OTHER	10	0.6%
TOTAL N.E.	**1650**	**95.3%**
Total Services Provided	1732	100%

Idaho's FFY 2010 target was **93%** of children in Idaho receive services in homes and community based settings. Actual target (performance) from the 618 December 1, 2010 data revealed that **95.3%** infants and toddlers are primarily receiving services in their homes and community based settings, exceeding the established target for FFY 2010.

Snapshot data for enrolled children as of December 1, 2010 was generated from all ITP Web to report data for this indicator. Please refer to indicator # 14 for reference to the validity and reliability of the IFP Web data system.

Correction of FFY 2009 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (99%) State reported for FFY 2009 for this indicator: 100%

4. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010)	**0**
5. Number of FFY 2009 findings the State verified as timely corrected	**0**

(corrected within one year from the date of notification to the EIS program of the finding)	
6. Number of FFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *(FFY 10)***:**
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 seven 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 2010-2011	Activity Status Update 2010–2011
Monitoring and Public Reporting	1. Routine reviews of 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. 2. 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.	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. 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 data were provided to the Early Childhood Council (EC3), serving as the State Interagency Coordinating Council (ICC).
Contracts	2. Maintain contract requirement for delivery of service in natural environments unless the child cannot benefit from the service in the natural environment.	2. 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 incorporate financial incentives in service

Improvement Activity	Improvement Activities Planned in SPP for 2010-2011	Activity Status Update 2010–2011
		provider contracts (i.e. reimbursement for travel time and no shows, etc.) to ensure the provision of services in natural environments.
Training Activities	5. Include sessions to enhance practices of the provision of services in natural supports through routine based interventions in the bi-annual Early Years conference. Support and promote attendance of ITP early interventionists.	1. Notices were sent to all regions to promote attendance of ITP early interventionists. Online registration provided a smooth and easy way for interventionists to register. Sessions were offered to enhance practices of the provision of services in natural supports through routine based interventions. There were approximately 210 participants that attended the conference.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *(FFY2011)***:**
N/A

Part C State Annual Performance Report (APR) for FFY2010

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.**

Actual Target Data for *FFY2010*:

Targets and Actual Data for Part C Children Exiting in FFY2010 (2010-11)

Summary Statements	Actual FFY 2009 (# & % of children)	Actual FFY 2010 (# & % of children)	Targets FFY 2010 (% of children)
Outcome A: Positive social-emotional skills (including social relationships)			
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	578/895 = 64.6%	545/888 = 61.4%	64.8%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	646/1212= 53.3%	590/1145= 51.5%	53.5%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
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	657/979= 67.1%	599/962= 62.3%	67.3%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	611/1212= 50.4%	549/1145= 47.9%	50.6%
Outcome C: Use of appropriate behaviors to meet their needs			
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	635/904= 70.2%	594/878= 67.6%	70.4%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	705/1212= 58.2%	654/1145= 57.1%	58.46%

Progress Data for Part C Children FFY 2010

A. Positive social-emotional skills (including social relationships):	**Number of children**	**% of children**
a. Percent of children who did not improve functioning	29	2.5%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	314	27.4%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	212	18.5%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	333	29.1%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	257	22.4%
Total	**N=1145**	**100%**
B. Acquisition and use of knowledge and skills (including early language/communication):	**Number of children**	**% of children**
a. Percent of children who did not improve functioning	17	1.5%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	346	30.2%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	233	20.3%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	366	32.0%
e. Percent of children who maintained functioning at level comparable to same-aged peers	183	16.0%
Total	**N=1145**	**100%**
C. Use of appropriate behaviors to meet their needs:	**Number of children**	**% of children**
a. Percent of children who did not improve functioning	27	2.4%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	257	22.4%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	207	18.1%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	387	33.8%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	267	23.3%
Total	**N=1145**	**100%**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *FFY2010*:

Improvement Activity planned for 2010-2011	Activities Status Update 2010-2011
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 meetings and was reviewed by EC3 Infant Toddler Subcommittee (comparable to ICC stakeholder's group). Individualized discussions and training was provided by CO to regions 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 EISs and Supervisors 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.
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 Supervisory staff provided training to their personnel using existing materials and resources

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *FFY2011*

Improvement Activities Currently in SPP for FFY 2011 (2011-2012)	Revision with Justification
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 regional Early Intervention Specialists and supervisors addressing system challenges they encounter, completion of anchor assessments and the COSF.	No change
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 analysis, development of training materials, and provision of training activities.	No change

Part C State Annual Performance Report (APR) for FFY2010

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 2,489 paper-based surveys were distributed across 7 regions to all parents enrolled in the Infant Toddler Program as of June 30, 2011. 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=178). 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, 2011. The final cutoff date for processing surveys was September 15, 2011 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, 404 surveys were returned for a 16.23% return rate. Of these, 399 provided useable data (others skipped too many questions or the survey wasn't legible). This number is high enough for the estimated statewide percents 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
2010	A. 62% of respondent families participating in Part C will report that early intervention services have helped the family know their rights. B. 58% of respondent families participating in Part C will report that early intervention services have helped the family effectively communicate their children's needs. C. 73.5% 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 2010*:

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

A. 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: 253/399 =63.4%

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

B. 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: 243/399 = 60.9%

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

C. 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 understand 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: 307/399 = 76.9%

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	324	80%	74.8%
Black or African/American	3	<1%	1.3%
Hispanic or Latino	41	10%	18.1%
Asian or Pacific Islander	6	2%	1.2%
American Indian or Alaskan Native	2	<1%	1.4%
Multi-Racial	20	5%	3%
Missing	8	2%	NA
*Idaho 0-3 Populations Data - July 1, 2009 Idaho Vital Records			

The percent of Hispanic returns (10%) 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. The numbers of respondents in the categories of American Indian or Alaskan Native, Asian or Pacific Islander, and Black or African American are very small which may cause significant fluctuation in the percentages over time.

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 2012 survey process.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *FFY2010*:

	Data for FFY 2009	Data for FFY 2010	Targets for FFY 2010
Number valid surveys returned	501	399	
Return Rate	17.98%	16.23	
% Responses above established cut score			
4A – know rights	64.8%	63.4%	62%
4B – communicate child's needs	60.5%	60.9%	58%
4C – help child develop and learn	79.0%	76.9%	73.5%

As evidenced by the chart above, the Idaho Infant Toddler Program has exceeded all targets set for FFY 2010. Please see below for a status update on the improvement activities that were completed during FFY 2010 and the additional strategies we intend to implement during FFY 2011.

Improvement Activities/Timelines/Resources 2010-2011

Improvement Activity planned for 2010-2011	Activities Status Update 2010 – 2011
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

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: • Print postcard for distribution to families prior to survey distribution in Spanish as well as English. • 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. Explore opportunities for targeted outreach to the Hispanic/Latino community through Migrant Head Start, Spanish-language support groups, and the Hispanic Community Center.	3) Completed. The state again made targeted outreach efforts to reach both English and Spanish speaking families and encourage them to return the survey. Activities included the following: • Distributed flyers in both English and Spanish to parents before the survey was mailed alerting them that the survey was coming. • Included copy of Spanish survey in all Survey packets identified as "Spanish primary language" in ITP Web. • Requested service coordinators and therapists to remind the family during home visits to complete and return the survey. 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 population being targeted for survey response.
4) Continue with Statewide implementation of the evidence-based early intervention practices of teaming, coaching, and effective teaching in natural learning environments through additional training to six new teams representing 5 regions of the state and provide ongoing TA to assure each Team's adherence to practices.	4) Completed, A total of 18 Regional teams (at least two from every region) have received in-depth training and a structured 6 month follow-up process. These teams are now successfully implementing these evidence-based practices in their routine interventions with families. These practices will increase positive outcomes for families served by the Infant Toddler Program.
5) Develop a statewide Technical Assistance/Mentoring network utilizing both experienced ITP staff and representatives from higher education to ensure ongoing training of and adherence to the evidence-based practices as taught by Dathan Rush and M'Lisa Shelden.	Completed and Ongoing. Seven experienced ITP staff and four faculty representing four Idaho universities were trained to be TA mentors. All were actively engaged with their assigned regions through FFY 2010.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *FFY2011*

Currently in SPP for 2011-2012	Revision with Justification
1. Develop and implement strategies to address program strengths and need areas identified through analysis of the NCSEAM Family Outcome Survey results.	No change
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.	No change
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: • Print postcard for distribution to families prior to survey distribution in Spanish as well as English. • 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. • Explore opportunities for targeted outreach to the Tribes and the Hispanic/Latino community.	No change
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	No change
	Proposed New Strategy 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 Shelden. Provide quarterly conference calls with Dathan and M'Lisa to assure quality and ensure TA providers maintain fidelity to practices.

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

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
2010 (2010-2011)	**1.68% of infants under 1 year of age receive early intervention services**

Actual Target Data for *(FFY 10)*: **1.22% of infants under 1 year of age**

Date	0 – 1 Population Served	OSEP 0-1 State Population	% 0-1 Served
December 1, 2010	289 *	23,610 **	**1.22% ****

* 618 Count Data
** Reference Source is OSEP Table C-13: 2010

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (*FFY 10*)**:**
Explanation of Slippage:

The Actual Target for FFY 10 in infants aged birth to one enrolled in Idaho was missed by 0.46%. Upon further examination, the following challenges have impacted the state's performance for this indicator:

- Due to the continued economic downturn and reduced fiscal resources in FFY '08 through FFY'10, the Program's outreach budget and activities were significantly scaled back.
- Fewer families are seeking voluntary programs, including the Infant Toddler Program as a result of a shift in priorities due to continued economic hardships.
- Idaho's overall population growth has been flat following a significant increase in previous years.
- Idaho's birth rate dropped from 16.5/1000 children in 2008 to 14.8/1000 children in 2010.
- Idaho saw a reduced rate of multiple births in 2009 and 2010 from previous years.

Following is the status of improvement activities conducted during FFY 10.

Improvement Activities Planned in SPP for 2010-2011	Activity Status Update 2010 – 2011
1. Implement electronic system of ASQ distribution. Refocus regional child find activities on public awareness, education, and outreach to high risk population through increased home visiting activities.	In August 2010 we launched a campaign to implement electronic ASQs. Due to unexpected complications of the Electronic system's inability to track data and create data reports, we are continuing a secondary data system while investigating other electronic systems. The current process allows us to have families participate on line using the electronic ASQs or receive paper questionnaires. Currently 92% of families are opting for paper. Awareness of the monitoring program is done at the regional level with outreach activities, referral if children who are evaluated but not eligible for early intervention, and home visiting programs.
2. Provide orientation for new employees, and technical assistance/support for staff related to new ASQ system and related Child Find system revisions	Notice of child find changes was made to regional staff and presentations were made to partner agencies to inform them of the centralization and changes to developmental monitoring, including the implementation of the on-line system. Regional programs have been required to pick up/increase community screening activities.
3. Exhibit Infant Toddler Program information at conferences and health fairs. Conduct regional outreach activities with birthing hospitals and local physicians to encourage early referrals of children to intervention services.	Over the past year, brochures and other outreach materials were updated and then distributed by the Regions to the target audiences. Information has been shared statewide at conferences and health fairs. Developmental information has been published in local newspapers. Idaho has witnessed a consolidation of hospital providers, as few larger hospitals have acquired many

	of the smaller, rural hospitals across the state. Work is in progress to develop new referral protocols with new hospital providers.
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.	Completed as written
5. Regional programs will coordinate with newly established child care health consultants for outreach to child care settings	Orientation to the ASQ on line, Developmental Milestones and eligibility criteria were provided to the Child Care Health care consultants. In-service trainings were provided directly to child care providers discussing monitoring programs and referrals to Infant Toddler Program was completed. Training and coursework for people seeking an AAS degree in Child Development has been provided to requesting colleges and universities.
6. Infant Toddler Program website is to be updated to increase prominence and ready access for developmental monitoring and self referral.	Completed as written – On-going activity
7. Child Find brochures and developmental checklists to be redesigned and broadly distributed.	Completed as written On – going activity
8. Coordinate with Early Head Start and physicians' offices to implement hubs for online developmental monitoring (Developmental Milestone).	Not completed. Implementation has been delayed due to ASQ publisher roll-out problems. Prior to system purchase and hub development by ITP, publisher must resolve concerns regarding inadequate tracking/reporting capabilities.

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

The following revisions are proposed for the FFY 11 SPP.

Improvement Activities Planned in SPP for 2011-2012	Proposed Revision for FFY 2011	Justification
~~1.~~ Continue with implementation of electronic system of ASQ distribution. ~~Realign child find activities within the regional programs. Continue activities to increase public awareness, education, outreach, screening and coordination with Part B.~~	As written with deletions noted by ~~strikethrough~~.	Activity as written is too complex.
2. Provide orientation for new employees, and technical assistance/support for staff related to new ASQ system and related Child Find system revisions	No change	
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 service providers to encourage timely referral of eligible children.	No change	
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.	No change	
5. Child Find brochures and developmental checklists will be broadly distributed to hospitals, child care settings through Idaho Stars, and through Idaho Sound Beginnings (EHDI) mailings	As written with additions noted by underline.	Activity needed further clarification.

~~6. Coordinate with Early Head Start, child care health consultants, and physician's offices to implement hubs for online developmental monitoring (Developmental Milestones).~~	Delete	Implementation has been delayed due to ASQ publisher roll-out problems. Prior to expanded system purchase and hub development by ITP, publisher must resolve concerns regarding inadequate tracking/reporting capabilities.

Proposed Revisions for 2011-2012

The following new improvement activities are proposed for the FFY 11 SPP.

Additional Improvement Activities for FFY 2011	**Justification**
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	Statewide the number of children birth to one that are being served is below the 2011 target of 1.60%
7. Implement Outreach Plan developed during Results Visit. Develop a plan for technical and social media outreach. Utilize existing infrastructure within lead agency related to our programs. Evaluate strategies for branding and targeted messaging. Standardize information, look, and forms used in program. Develop an electronic referral form and process.	A specific outreach plan was developed using stakeholder input as part of "Results Activity".
8. Reorganize the statewide early intervention system. Shift administrative oversight from 7 regions to 3 Hubs with Central supervision. This will assist in ensuring consistency in outreach, referral and direct intervention services.	Regions differ in the intensity and type of outreach and public awareness—the re-organization will assist with standard materials, branding and a consistent processes for referrals.

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

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
2010 (2010-2011)	**2.80% of infants and toddlers birth to three receive early intervention services**

Actual Target Data for *(FFY 10)***: 2.39% of infants and toddlers birth to three**

Date	0 – 3 Population Served	OSEP 0-3 State Population	% 0-3 Served
December 1, 2010	1,732 *	72,475 **	**2.39% ****

* 618 Count Data
** Reference Source is OSEP Table C-13: 2009

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *(FFY 2010)***:**
Explanation of Slippage:

The Actual Target for FFY 10 of infants aged birth to three enrolled in Idaho was missed by 0.41%. Upon further examination, the following challenges have impacted the state's performance for this indicator:

- Due to the continued economic downturn and reduced fiscal resources in FFY '08 through FFY'10, the Program's outreach budget and activities were significantly scaled back.
- Fewer families are seeking voluntary programs, including the Infant Toddler Program as a result of a shift in priorities due to continued economic hardships.
- Idaho's overall population growth has been flat following a significant increase in previous years.
- Idaho's birth rate dropped from 16.5/1000 children in 2008 to14.8/1000 children in 2010.
- Idaho saw a reduced rate of multiple births in 2009 and 2010 from previous years.

Following is the status of improvement activities conducted during FFY '10.

Improvement Activities Planned in SPP for 2010-2011	Activity Status Update 2010 – 2011
1. Implement electronic system of ASQ distribution. Realign Child Find activities within the regional programs to continue activities on public awareness, education, outreach, screening, and coordination with Part B.	1. Completed. Software license for electronic system was purchased. Implementation was postponed due to ASQ publisher roll-out delays and other changes made due to the economy. In August 2010 we launched a campaign to implement electronic ASQs.
2. Provide orientation for new employees, and technical assistance/support for staff related to new ASQ system and related Child Find system revisions.	2. Completed. Notice of child find changes was made to regional staff and presentations were made to partner agencies to inform them of the centralization and changes to developmental monitoring, including the implementation of the on-line system. Regional programs have been required to pick up/continue community screening activities.
3. Conduct regional and statewide outreach activities targeting the general public, hospitals, child care, and other social service providers to encourage timely referral of eligible children.	3. Completed. Program information continues to be presented at regional events including Idaho Stars Regional staff meetings, training for QRIS registered childcare providers, Elks Rehabilitation audiology training.
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.	4. Completed. Reports have been provided and discussed at regularly scheduled meetings.
5. Regional programs will coordinate with newly established child care health consultants for outreach to child care settings.	5. Completed. Initial training of the child care health consultants has taken place.
6. Infant Toddler Program website is to be updated to increase prominence and ready access for developmental monitoring and self referral.	6. Completed. Websites have been updated and are routinely monitored.
7. Child Find brochures and developmental checklists to be redesigned and broadly distributed.	7. Completed. Brochures and checklists have been updated and distributed statewide

8. Coordinate with Early Head Start and physicians' offices to implement hubs for online developmental monitoring (Developmental Milestones).	8. Not Completed. Implementation has been postponed due to ASQ publisher roll-out delays. Concerns about insufficient tracking and reporting capabilities still need to be addressed/resolved by publisher – prior to purchase being made and hubs being implemented

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

The following revisions are proposed for the FFY 11 SPP.

Improvement Activities Planned in SPP for 2011-2012	Proposed Revision for FFY 2010	Justification
1. Continue full implementation of electronic system of ASQ distribution. Realign Child Find activities within the regional programs. Continue activities to increase public awareness, education, outreach, screening, and coordination with Part B.	No change	
2. Provide orientation for new employees, and technical assistance/support for staff related to new ASQ system and related Child Find system as needed.	No change	
3. Conduct regional and statewide outreach activities targeting the general public, hospitals, child care, and other social service providers to encourage timely referral of eligible children.	No change	
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.	No change	
5. Child Find brochures and developmental checklists will be broadly distributed.	No change	

6. ~~Coordinate with Early Head Start, child care health consultants, and physicians' offices to implement hubs for online developmental monitoring (Developmental Milestones).~~	Delete	Implementation has been delayed due to ASQ publisher roll-out problems. Prior to expanded system purchase and hub development by ITP, publisher must resolve concerns regarding inadequate tracking/reporting capabilities.

The following new improvement activities are proposed for the FFY 11 SPP.

New Improvement Activities for 2011-2012	**Justification**
6. Implement Outreach Plan developed during Results Visit. Develop a plan for technical and social media outreach. Utilize existing infrastructure within lead agency related to our programs. Evaluate strategies for branding and targeted messaging. Standardize information, look, and forms used in program. Develop an electronic referral form and process.	A specific outreach plan was developed using stakeholder input as part of "Results Activity" during the OSEP verification visit.
7. Reorganize the statewide early intervention system. Shift administrative oversight from 7 regions to 3 Hubs with Central supervision. This will assist in ensuring consistency in outreach, referral and direct intervention services.	Regions differ in the intensity and type of outreach and public awareness—the re-organization will assist with standard materials, branding and a consistent processes for referrals.

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

Overview of the Annual Performance Report Development:
See the Overview of the Annual Performance Report Development, Indicator 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
2010 (2010-2011)	**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 2010): 394/421 = **93.6%**

Referral Range	Number/Percent within 45 days	Number/Percent delayed due to family-related reasons	Total Number/Percent in compliance with timeline
FFY 2010 *Data from 4/1/10 – 6/30/11	336	58	394
n = 421	**79.8%**	**13.8%**	**93.6%**

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 later than 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 4/1/011 and 6/30/2011. 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 through the states monitoring process. See indicator #14 for reference to the validity and reliability of the ITP Web data system.

58 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

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

27 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.

Agency Reasons (Non-Justifiable)
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 85 children reported as delayed during FFY 2010 unless the child was no longer within the jurisdiction of the EIS program.

Correction of FFY 2009 Findings of Noncompliance (if State reported less than 100% compliance)

Level of compliance (93.6%) State reported for FFY 2009 for this indicator: 100%

7. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010)	**10**
8. Number of FFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	**10**
9. Number of FFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

The initial evaluation, assessment, and IFSP meeting were conducted, although late, for all of the 114 children reported in the R-APR as having services delayed during FFY 2009 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. Most regions corrected t for each child prior to the state issuing a notice of non-compliance. Correction included initial evaluation and IFSP development. Two regions had not corrected prior to notification and were issued findings of non-compliance.

An additional eight instances of non-compliance were identified for a single region through a focused monitoring activity. All eight instances of non-compliance were corrected within a timely manner.

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 2010)***:**

Explanation of Progress or Slippage

Actual target data for FFY 2010 represents progress from FFY 2009 data by 6.2% (93.6% and 87.4% 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 20010-2011	Activity Status Update 2010–2011
Monitoring and Public Reporting	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.	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).
Training Activities	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	1. As part of the SC requirements, every service coordinator must receive 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 reports of child abuse and neglect dispositioned as substantiated.

Improvement Activity	Improvement Activities Planned in SPP for 20010-2011	Activity Status Update 2010–2011
Data System	1. New web-based data system allows users to track the 45 day timeline using the worklist function in ITP Web.	1. The ITP Web data system has a built-in worklist for Interim Service Coordinators to track the 45 day timeline. The system automatically generates and removes the worklist based on action taken by the user in the system. This worklist allows SC 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.
Policy/Procedure	1. Develop a pre-referral protocol for children referred to the Infant Toddler Program by someone other than their parent or legal guardian (ex: physician, hospital, child care, etc.) 2. The Infant Toddler Program will develop a policy regarding use of screening instruments during the intake process to identify whether a child needs to be evaluated, as appropriate.	1. A pre-referral policy was developed and implemented statewide in FFY 10. 2. A policy regarding the use of screening instruments was developed and implemented statewide in FFY 10.
Monitoring	1. Central office staff will provide quarterly monitoring of regional corrective action plans for any regions found to be out of compliance with this indicator. 2. Central office staff will track regional performance on selected indicators using ITP Web and 618 data.	1. Please refer to indicator # 9 for activity status update. 2. Central office tracks regional performance for this indicator with data from ITP Web using Crystal Reporting software.
Budget	1. Central office staff will conduct an annual review and budget distribution process based on a formula to ensure equity across regions.	1. Regional budget and staff allocations were analyzed and reviewed by the Division Administrator to assure equitable distribution to each regional program. This analysis and necessary adjustments result in staffing distribution that is aligned

Improvement Activity	Improvement Activities Planned in SPP for 20010-2011	Activity Status Update 2010–2011
		with the population and client count so accountability and expectations for performance can be equivalent across all early intervention programs in the state.

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

N/A

Part C State Annual Performance Report (APR) for FFY2010

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 FFY10 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 2012. In addition, information will be shared through other public forums such as the early intervention specialist/supervisor quarterly meeting, program managers, 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
2010	**8A *100%;* 8B *100%;* 8C *100%***

Actual Target Data for *FFY2010*:

A. 104/105 = 99%
B. 104/105 = 99%
C. 98/100 = 98%

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.

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	**104**
b. Number of children exiting Part C	**105**
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)	99%

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	**104**
d. Number of children exiting Part C who were potentially eligible for Part B	**105**
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)	99%

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	**98**
f. Number of children exiting Part C who were potentially eligible for Part B	**100**
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)	98%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *FFY2010*:

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
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	Provide joint training to Infant Toddler Program and LEA personnel on the revised Policy Document, 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.	Completed
Training	Develop and disseminate 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 – Some modules are currently available to regional staff and contractors. Two additional modules are available to contractors only and will become available to staff in FFY 2011.
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 Regional protocol document was revised and statewide training reviewing required content and format was provided.
Public Reporting of Data	Report on EIS regional program performance on DHW, ITP website, ITP Progress reports, and to interagency coordinating council and regional committees.	Public reporting activities were completed as planned.

The *Actual Target Data (Performance)* reported above reflects an excellent level of achievement with all Transition indicators.

Transition 8A shows a gain from 98.2% in FFY 2009 to 99% in FFY 2010. The data shows progress and is moving closer to the target of 100%. This percentage reflects two children identified during State monitoring activities (one in Reg. 2 and one in Reg. 3) who did not have transition related steps in the child's IFSP.

Transition 8B shows very high and steady performance with no change from 99% between FFY 2009 and FFY2010. This percentage reflects one potentially eligible child identified during State monitoring activities (in Reg. 1) that did not have appropriate notification to the LEA.

Transition 8C shows slight slippage from 99% to 98%. This percentage reflects two potentially eligible children identified during State monitoring activities (one in Reg. 1 and one in Reg. 5) who 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 2009 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2009 (period from July 1, 2009, through June 30, 2010) for this indicator:

Transition 8 A FFY 2009 Actual Target Data was 109/111= **98.2%**
Two findings of non-compliance were made during FFY 2009. Both were verified as corrected within one year by Central Office.

Transition 8 B FFY 2009 Actual Target Data was 110/111= **99.1%** One finding of non-compliance was made during FFY 2009. It was verified as corrected within one year by Central Office.

Transition 8 C FFY 2009 Actual Target Data was 110/111= **99.1%** One finding of non-compliance was made during FFY 2009. It was verified as corrected within one year by Central Office.

Correction of Previously Identified Non-compliance from FFY 2009, and

Specific Action Taken to Verify Correction

All findings of noncompliance identified in FFY 2009 related to transition (IFSP transition steps (8A), notification to LEA is provided (8B) and timely transition conferences (8C) were timely corrected in FFY 2010 (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 2009, 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.

To assure the regions are correctly implementing the regulatory transition requirements, the IFSP transition page was modified to better meet requirements and training was provided on how to complete the page correctly.

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

In FFY 2009, notification of the LEA wasn't provided for one child in Region 5. 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, joint 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 has been updated to provide 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 5, 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 2009, a timely transition meeting wasn't held for one potentially eligible child in Region 3. 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, joint 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 has been updated to provide service coordinators an advance reminder when transition conferences are due and tracks the date the conference is held.

In monitoring subsequent data in Region 3, 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 *FFY2011:*

Improvement Activities planned in SPP for 2011-2012	**Proposed Change**	**Justification**
Infant Toddler Program central office staff will conduct monitoring activities in accordance with the state monitoring plan outlined in Indicator #9.	No Change	
~~Conduct periodic checks to assure compliance with newly revised~~ Update joint Policy Documents with State Department of Education, 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.~~ fully comply with new Part C regulations.	Change as noted with ~~strike through~~ text deleted and underlined text added.	Must make modifications in Policy materials and boilerplates to assure compliance with new Part C Regulations.

Improvement Activities planned in SPP for 2011-2012	Proposed Change	Justification
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.	No change	
Report on EIS regional program performance on DHW, ITP website, ITP Progress reports, and to interagency coordinating council and regional committees.	No change	
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.	No change	

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

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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 2010	*100%*

Actual Target Data for FFY 2010:

Target data for FFY 2010; 19/19 = 100%

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 2010:

During FFY 2010, Idaho continued to have all identified non-compliance corrected within 12 months of identification. We continue to meet the target of 100% for this indicator.

Discussion of Data Table (Attachment A)

1. Timely Services:

Two regions were found to be out of compliance during FFY 2009 (Region 3 and Region 4). Region 3 had systemic non-compliance requiring a CAP and Region 4 had four instances of individual non-compliance. All instances of non-compliance were corrected within 12 months (during FFY 2010). Please see indicator #1 for details regarding activities used to promote correction of regional non-compliance and to verify correction consistent with OSEP memo 09-02.

7. 45 Days

Three regions were found to be out of compliance during FFY 2009. Region 1 and Region 3 had findings of non-compliance requiring a CAP and Region 4 had four instances of individual non-compliance. All non-compliance was corrected within 12 months (during FFY 2010). 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 2009. 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 (during FFY 2010).
B. One region was found to be out of compliance during FFY2009. Region 5 had one instance of individual non-compliance identified for 8B. This finding of noncompliance was corrected within 12 months (during FFY 2010).

C. One region was found to be out of compliance during FFY2009. Region 3 had one instance of individual non-compliance identified for 8C. This finding of noncompliance was corrected within 12 months (during FFY 2010).

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.

Improvement Activities planned in SPP for 2010 - 2011	**Activity Status update 2010– 2011**
Complete redesign and fully implement version 2 ITP Web, the web-based data system being developed.	Partially completed. ITP Web Version 2 continues in production. It is in the testing phase. Roll-out is anticipated by summer, 2012.
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.	Completed as written.
Begin implementation of fee rules to establish a system for family cost participation to assist with funding of selected early intervention services.	Partially Completed. Fee related tools, policies, and procedures are ready to implement. However, roll-out is tied to implementation of ITP Web Version 2 as it is required to support billing for family fees. New implementation date is targeted for Summer, 2012.

Timely Correction of FFY 2009 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

10. Number of findings of noncompliance the State identified in FFY 2009 (the period from July 1, 2009, through June 30, 2010) (Sum of Column a on the Indicator C9 Worksheet)	**19**
11. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C9 Worksheet)	**19**
12. Number of findings not verified as corrected within one year [(1) minus (2)]	**0**

Correction of FFY 2009 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

13. Number of FFY 2009 findings not timely corrected (same as the number from (3) above)	**0**
14. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
15. Number of FFY 2009 findings not yet verified as corrected [(4) minus (5)]	**0**

Verification of Correction for findings of noncompliance identified in FFY 2009 (either timely or subsequent):

Idaho Infant Toddler Program verifies that each EIS program with findings of noncompliance identified in FFY 2009: (1) is correctly implementing the specific regulatory requirements, (i.e., achieved 100% compliance) based on a review of data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02, dated October 17, 2008.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

- For each region identified as non-compliant, a Corrective Action Plan (CAP) was developed which documented the noncompliance and specific strategies and timeframes required for correction. CO monitored completion of the CAP activities and periodically reviewed data reports. The data reports were used to track progress toward correction and to inform TA and training needs for each region.

- To verify correction, CO conducted a review of updated regional data to assure each program is correctly implementing the regulatory requirements as required in OSEP memo 09-02. Specifically, a sample of the regions data from a subsequent timeframe was reviewed which was representative of the region and which documented full correction. Typically, the ITP Web data system or a file review was used to obtain subsequent data reports.

- When appropriate, CO required submission of Regional policy changes or other documentation targeted to impact the area of non-compliance.

- To verify correction on the individual child level, the IFSP and/or other documentation in the individual child's file in question was reviewed by CO staff to verify correction for each child impacted. In addition, several parents were contacted by phone during focused monitoring activities. These activities allowed verification of the accuracy of data entered into the ITP Web system and the child's file.

- To verify that both R-APR data and data entered into ITP is correct and accurate, CO conducted file reviews in several regions comparing specific information from the different sources to assure consistency.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011 (if applicable):

Improvement Activities planned in SPP for FFY 2011 (2011 – 2012)	**Proposed Change**	**Justification**
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.	No Change	
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.	No Change	
3. Implement ~~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.~~	Change as noted. Insert underlined text and delete ~~strikethrough~~ text.	Fee rules are scheduled for implementation summer 2012.
4. Conduct focused monitoring visits to selected regions addressing a selected topic area based on current program data and stakeholder input.	No Change	

Part C State Annual Performance Report (APR) for FFY 2010
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 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

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

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

FFY	Measurable and Rigorous Target
2010 *(2010-2011)*	**100% of signed written complaints have reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.**

Actual Target Data for FFY 2010: N/A

Idaho received one written complaint with a request for a hearing during the 2010-2011 reporting year. The request was withdrawn by the parent following discussions informing the parent of their right. This occurred prior to the 30 day hearing and report timeline.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Improvement Activities/Timelines/Resources:

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
1. Monitoring Procedural Safeguards/PWN	Monitor regional programs for consistent use of prior written notice at all required intervals by conducting a verification record review in those regions scheduled for data verification.	Regional programs were monitored for consistent use of prior written notice at all required intervals by conducting a verification record review in three regions. This data is incorporated as an element in Regional, Annual Performance Reports to ensure a statewide sampling of this procedural safeguard practice. Record

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
		reviews were conducted by central office for verification in three regional on-site visits.
	File written complaints, as appropriate.	Procedures for handling complaints were reviewed with regional Infant Toddler Program Staff and Management, as well as with the staff in the Administrative Procedure Section. This review assured that family inquiries or complaints are handled in order to assure full information and timely response in accordance with Part C regulations and Idaho's Infant Toddler Program Procedural Safeguards.
	Provide training for hearing officers to assure a core understanding of Part C requirements and timelines	With no hearing requests for multiple years, it is inefficient to provide annual training and individual training will be provided when needed.
	Review status of complaint data, review with stakeholders and revise targets and activities/strategies, as needed. Submit changes in APR, as needed.	A log for complaints was maintained to track and measure timeliness of adjudication, however, the log was only used to report the one written complaint and request for hearing that was subsequently withdrawn by the family. Complaint data was reviewed with the EC3 A 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 the same for another year. Based on recommendation in the December 2011 Verification visit by OSEP, there will be one strategy added to the SPP to evaluate the possibility of incorporating a routine training requirement for Part C in the DHW Hearing Officer contract.
	Report on regional program performance on the Department of Health and Welfare's website, ITP Progress reports, and to the interagency coordinating council and regional committees.	Idaho has no relevant complaint

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
		data to report on the Department of Health and Welfare's website, ITP Progress reports, and to the interagency coordinating council and regional committees due to the fact that there were no formal complaints that resulted in substantial information.
2. Parent Education on Procedural Safeguards	Develop unit for service coordination training in on-line learning modules that incorporates information about informing families of their rights and procedural safeguards.	A service coordination on-line training module was developed using ARRA funds. Service Coordinators provide training to families and information support related to family rights and procedural safeguards, including instruction to families about how to prepare and file written complaints ITP Service Coordinators provide this through individual contacts with families. Families were routinely provided with information about the availability of the information and that IPUL is a resource when they need basic information about family rights.
3. Report Regional 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.	Completed as written. Reports regarding regional program performance were posted on the Department of Health and Welfare's website and provided to the interagency coordinating council and regional committees.

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

Proposed Revision for 2011-2012	New Improvement Activity	Justification
Hearing Officer Training	Evaluate contract amendments to require contracted DHW hearing officers to independently access specific IDEA, Part C, and FERPA training prior to serving as a hearing officer for complaints related to early intervention.	OSEP recommended that we evaluate this strategy in order to assure a timely and informed response to any future hearing requests.

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

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

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

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

FFY	Measurable and Rigorous Target
2010 (2010-2011)	**100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.**

Actual Target Data for FFY 2010: Not Applicable

There were no hearing requests on which to measure timely adjudication.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2010:

Improvement Activities/Timelines/Resources:

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
1. Monitoring Procedural Safeguards	Review procedures for Hearing requests with regional Infant Toddler Program Staff and Management to assure that families' inquiries or complaints are handled in order to assure full information and timely response.	Completed as written.
	Maintain log for complaint tracking and to measure timeliness of adjudication.	A log was prepared and was only used to report the one written complaint and request for hearing that was subsequently withdrawn by the family during the reporting period.

	Review status of complaint data and hearing timelines with stakeholders and revise targets and activities/strategies, as needed. Submit changes in APR, as needed.	Complaint data was reviewed with the EC3, 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. Based on recommendation in the December 2011 Verification visit by OSEP, there will be one strategy added to the SPP to evaluate the possibility of incorporating a routine training requirement for Part C in the DHW Hearing Officer contract.
	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.	Completed as written.
2. Regional complaint Logs	Require all regional programs to submit complaint logs on quarterly basis so they can be reviewed by central office for potential areas of non-compliance and to support analysis of potential systemic issues or patterns in concerns identified.	Regional complaint logs were collected on a quarterly basis. Logs were reviewed to detect trends or patterns that might be reflective of systemic concerns or non-compliance. No findings of non-compliance resulted from the review of the logs.

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

No change.

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

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
2010 (2010-2011)	**Not applicable--Part B due process procedures are not adopted**

Actual Target Data for FFY 2010: 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 2010:

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 2010

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
2010 (2010-2011)	**Not applicable, no mediation requests received.**

Actual Target Data for FFY 2010: Not applicable. No mediation requests were received.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2010:

Although there were no requests for mediation in FFY 2010, all improvement activities planned were addressed.

Improvement Activities/Timelines/Resources:

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
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.

Improvement Activity	Improvement Activities planned in SPP for 2010-2011	Activity Status update 2010 – 2011
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 May, 2011.

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

Proposed Revision for 2011--2012	New Improvement Activity or Revision	Justification

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
2010 (2010-2011)	100% timely and accurate submission of 618 Data and Annual Performance Report

Actual Target Data for *(FFY 2010)*: 100%

Date	Accurate OSEP Reports submitted "Timely"	Total OSEP Reports Required	% Accurate Reports submitted "Accurate & Timely" **
December 1, 2010	5	5	**100%**
** Calculated as per Indicator 14 Self-Scoring Rubric worksheet			

Idaho's actual FFY 2010 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, 2011 and Table 3 and Table 4 prior to November 1, 2011.

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**
1, 3, 7, 8 **compliance** ITPWEB Primary	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	Communication with Early Intervention Specialists, Data Entry Personnel, and Children's Program Supervisors identifying expected due dates Reported by CO as per OSEP guidance
2, 5, 6, **618 rpts & performance** ITP Web primary	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	Communication with Early Intervention Specialists, Data Entry Personnel, and Children's Program Supervisors identifying expected due dates for regional server downloads. Reported by CO as per OSEP guidance
4 Contractor NCSEAM Family Survey	Determination and selection of report samples; Assure contractual quality criteria are met; Confirm participant representativeness (age, ethnicity, geographic, etc.)	Reported by CO as per OSEP guidance
9 **compliance** GEN SUPERVISION	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 & CAP data	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
10, 11, 13 **Complaint Resolution**	Maintain Complaint Protocol; Review Complaint Logs; Discovery and collection of information; Annual review of required timelines; Timely issuance of report(s)	Reported by CO as per OSEP guidance

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 2010 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
10	1	1	2
11	1	1	2
12	N/A	N/A	N/A
13	1	1	2
		Subtotal	28
APR Score Calculation	**Timely Submission Points** - If the FFY 2010 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total – (Sum of subtotal and Timely Submission Points) =		33

618 Data – Indicator 14					
Table	**Timely**	**Complete Data**	**Passed Edit Check**	**Responded to Date Note Requests**	**Total**
Table 1 – Child Count Due Date: 2/1/11	1	1	1	1	4
Table 2 – Program Settings Due Date: 2/1/11	1	1	1	1	4
Table 3 – Exiting Due Date: 11/1/11	1	1	1	N/A	3
Table 4 – Dispute Resolution Due Date: 11/1/11	1	1	1	N/A	3
				Subtotal	14
618 Score Calculation			**Grand Total** (subtotal x 2.5)		35

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

* Note any cell marked as N/A will decrease the denominator by 1 for APR and 2.5 for 618.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for *(FFY10)***:**

During FFY 09, the Infant Toddler Program implemented a new web-based data system. The new data system incorporates data elements from the previous data system as well as additional data elements and enhanced features. As a result, the program has capabilities to pull more 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. Since that implementation, the Infant Toddler Program's data system, ITP Web has undergone a redesign including development of enhancements to incorporate the billing system features as an integrated component of ITP Web. The development is near completion with plans to implement both system and user testing and to complete statewide training and roll-out by the end of the FFY11.

Following is the status of improvement activities conducted during FFY 10.

Improvement Activities Planned in SPP for 2010-2011	Activity Status Update 2010 – 2011
If feasible, design and develop an interface between DAR billing system and ITP Web	Completed as written. Design of the billing components is complete. Development is proceeding however, timeline for completion is extended.
Provide training to staff and contractors for new billing system.	Delayed. Training and implementation of billing system is planned for Spring 2012 due to delays in system development.
Develop report templates for OSEP reports	Not Completed. Due to issues with data conversion from the old system to the new, report analysis had to be done manually.
Develop report templates for regional and state management and program monitoring.	Completed as written. Multiple report templates were developed for ITP Web, Version 1 and put is use by regions and central office.

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

The following improvement activities are proposed for the FFY 11 SPP.

New Improvement Activities for FFY 2011	Proposed Revision	Justification
Provide training to staff and contractors for new billing system	No Change.	
As needed, develop additional report templates for regional and state management and program monitoring.	No Change	
Continue detailed semi-annual reporting of program data at the Central Office for maintaining baseline data and progress reporting for each region and Hub.	As written with additions noted by underline.	Administrative oversight will now be provided through Hubs
Maintain timely reporting of all 618 data and annual performance reporting.	No Change	
Evaluate data needs and ability of Idaho Infant Toddler Program data system to meet those needs.	No Change	
Continue routine data verifications for accuracy, reliability, non-duplication, etc.	No Change	