

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

Overview of the Annual Performance Report Development:

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 | 100% |

Actual Target Data for FFY 2010:

98.68%

Actual Target Data for FY 2010: Seven hundred fifty eight (758) children received their services in a timely manner. Sixty seven (67) children did not receive their services in a timely manner due to documented exceptional family circumstances. One percent (n = 11) of children did not receive all their services in a timely manner due to CDSA specific delays. Therefore, services for eight hundred twenty five (825) out of eight hundred thirty six (836) children (98.68%) met the timely services indicator.

| CDSA | 2010 |
|----------------|---------------|
| Asheville | 98.08% |
| Blue Ridge* | 97.78% |
| Charlotte | 100% |
| Concord | 100% |
| Durham | 100% |
| Elizabeth City | 100% |
| Fayetteville | 100% |
| Greensboro | 100% |
| Greenville | 100% |
| Morganton | 100% |
| New Bern^ | 86.79% |
| Raleigh* | 98.33% |
| Rocky Mount | 100% |
| Sandhills | 100% |
| Shelby | 100% |
| Smokies | 97.83% |
| Wilmington | 100% |
| Winston-Salem | 100.0% |
| Total | 98.68% |

Compliance by the CDSAs in meeting the timely services compliance indicator was determined via a self-assessment record review of all children who had services added to their Individualized Family Service Plan (IFSP) in February 2010. The self-assessment record review included newly referred children and children already enrolled in the program. Eight hundred thirty six (836) records of children were reviewed for timeliness of initial and subsequent service initiation. Seven hundred fifty eight (758) received their services in a timely manner. Eight percent (n = 67) of children did not receive all their services in a timely manner due to documented exceptional family circumstances. One percent (n = 11) of children did not receive all their services in a timely manner due to CDSA specific delays. The reasons for the delays included: lack of appropriately qualified community-based providers, delay in provider initiating service and inadequate follow up.

Identification of Noncompliance in FFY 2010

Record review data indicate thirteen (13) CDSAs achieved 100% compliance (including documented family exceptional circumstances). Only one (1) CDSA (denoted in chart with ^) has been issued a finding and received a Corrective Action Plan (CAP) to show correction of noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance).

Two (2) CDSAs (denoted in chart with *) corrected noncompliance prior to the issuance of findings. In order for a CDSA to report that identified noncompliance has been corrected in a timely manner and all federal regulations are properly implemented, the CDSA must have first done the following:

- (1) Account for all noncompliance;
- (2) Identify the level of noncompliance and the root cause(s) of the noncompliance;
- (3) If needed, change policies, procedures and/or practices that contributed to or resulted in noncompliance; and

- (4) Based on its review of updated data, which may be from subsequent on-site monitoring, determine that the CDSA, within one year from identification of the noncompliance, is correctly implementing the specific statutory or regulatory requirement(s).

The EI Branch Central Office staff verified the correction of child-specific noncompliance and reviewed updated subsequent data verifying that the timely services requirement was being implemented in accordance with IDEA. During the time of monitoring, two CDSAs (Asheville and Smokies) were still in correction planning from the FFY 2009 self-assessment.

Infants and Toddlers with IFSPs who receive Early Intervention Services in a Timely Manner:

| | |
|---|---------------|
| a. Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (including exceptional circumstances) | 825 |
| b. Total number of infants and toddlers with IFSPs | 836 |
| Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (Percent = [(a) divided by (b)] times 100) | 98.68% |

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

The NC EI Program experienced progress from 95.98% (FFY 2009) to 98.68% (FFY 2010). Progress in this area can be contributed to improvement initiatives to implement a more consistent statewide Early Intervention (EI) system that supports quality services to children and their families in accordance with the principles and requirements of IDEA Part C. The system wide goal is to improve outcomes for 1) state and 2) local systems as well as for 3) children and families who receive services from those systems. Specific activities included, for example, better delineation of roles and responsibilities of staff in order to most effectively use staff time.

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 for this indicator: 95.98%

| | |
|---|-----------|
| 1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2008, through June 30, 2009) | 17 |
| 2. Number of FFY 2009 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding) | 17 |
| 3. Number of FFY 2009 findings <u>not</u> 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:

| | |
|---|----------|
| 4. Number of FFY 2009 findings not timely corrected (same as the number from (3) above) | 0 |
| 5. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”) | 0 |
| 6. Number of FFY 2009 findings <u>not</u> verified as corrected [(4) minus (5)] | 0 |

Actions Taken if Noncompliance Not Corrected:

Not Applicable

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

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

There were eleven (11) CDSAs in corrective action issued in FY 2009-2010. These CDSAs received intensive monitoring and corrected their noncompliance within one year of the findings being issued. The EI Branch Central Office staff verified through record reviews of updated subsequent data that the CDSAs: (1) are correctly implementing the specific regulatory requirements; and (2) have initiated services for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program.

The North Carolina Early Intervention Program has a system to identify and correct noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance). For those CDSAs issued finding(s), the EI Branch Central Office along with the CDSA investigate the underlying reasons that contributed to the noncompliance. The specific regulatory requirements are reviewed with the CDSA. A corrective action process is developed, matching strategies with root causes of noncompliance. During the corrective action process, the EI Branch Central Office staff monitors the status of the CDSAs’ progress through the submission of record review data, and a review of the implementation of efficient strategies. Correction of noncompliance is determined as soon as possible, but in no case more than one year from identification. The process utilized to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the timely services requirement is being implemented in accordance with IDEA. The North Carolina EI Program continues to address how to sustain correction of noncompliance across specific geographic areas of the state.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

| | |
|---|----------|
| 1. Number of remaining uncorrected FFY 2008 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator | 3 |
| 2. Number of remaining FFY 2008 findings the State has verified as corrected | 3 |
| 3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)] | 0 |

Verification of Correction of Remaining FFY 2008 findings:

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

There were nine (9) CDSAs in corrective action issued in FFY 2008. These CDSAs received intensive monitoring. Eight (8) of the CDSAs corrected their noncompliance within one year of the finding(s) being issued. The EI Branch Central Office staff verified through record reviews of updated subsequent data that the CDSAs: (1) are correctly implementing the specific regulatory requirements; and (2) have initiated services for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program.

The NC EI Program has a system to identify and correct noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance). For those CDSAs issued finding(s), the EI Branch Central Office along with the CDSA investigate the underlying reasons that contributed to the noncompliance. The specific regulatory requirements are reviewed with the CDSA. A corrective action process is developed, matching strategies with root causes of noncompliance. During the corrective action process, the EI Branch Central Office staff monitors the status of the CDSAs’ progress through the submission of record review data, and a review of the implementation of efficient strategies. Correction of noncompliance is determined as soon as possible, but in no case more than one year from identification. The process utilized to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the timely services requirement is being implemented in accordance with IDEA.

One CDSA corrected noncompliance beyond the one-year timeline. EI Branch Central Office staff along with the Part C Coordinator conducted a site visit with the CDSA to identify the root causes of continuing noncompliance. The reasons for noncompliance beyond the one-year timeline included: systemic challenges with provider availability (specifically Occupational Therapy), inefficiencies in local processes to initiate services in a timely manner, and supervisory techniques. Intensive technical assistance has been provided for service providers and CDSA staff to assure efficiency in procedures affecting timeliness of services.

A corrective action plan addressing individual areas of concern with strategies, benchmarks, and timelines was developed and revised to include on-site monitoring and the submission of monthly progress reports. EI Branch Central Office staff verified in June 2011 through record reviews of updated subsequent data that the CDSA: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program. The process utilized to determine correction of noncompliance included: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the timely services requirement is being implemented in accordance with IDEA.

APR Template – Part C (4)

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

Not applicable

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

| Statement from the Response Table | State's Response |
|-----------------------------------|------------------|
| Not applicable | |

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

The State will continue to receive technical assistance through the National Early Childhood Technical Assistance Center (NECTAC), Mid-South Regional Resource Center (Mid-South) and the Data Accountability Center (DAC) to better serve children and families by ensuring equal access and availability to all children and families to high quality EI services. See table on next page.

OUTCOME: Improve access to appropriately qualified providers

| IMPROVEMENT ACTIVITIES | TIMELINE | RESOURCES |
|--|----------------------------------|--|
| <p>1. Review program variations</p> <p>a. review existing state policies and procedures. b. review current roles/responsibilities of CDSA staff and adjust EI program personnel allocations that are not aligned with enrolled populations across catchment areas. c. assess the reimbursement system and assure revenue and fiscal sustainability. d. research other states’ policies and procedures for comparison.</p> | <p>December 2010 - June 2011</p> | <p>Mid-South, NECTAC and DAC</p> <p>Other Part C Programs</p> <p>OSEP</p> <p>Stakeholders (internal & external)</p> <p>Evidence – based practice documents</p> |
| <p>2. Develop policies and procedures for each component of the EI service system that support consistent service delivery across CDSAs</p> <p>a. adopt common talking points for initial contacts w/families; adopt standardized, norm referenced instruments for use in determining eligibility for EI; adopt revisions to the IFSP to facilitate better incorporation of child and family outcomes. b. receive technical assistance on proposed multi-level targets for state infrastructure, personnel development, CDSA infrastructure, and NC EI Program practices. c. compare proposed state policies and procedures with IDEA Part C. d. implement work plan that outlines activities, timelines and resources towards completion.</p> | <p>November 2011 - June 2012</p> | <p>Mid-South, NECTAC, and DAC</p> <p>Stakeholders (internal & external)</p> <p>Evidence – based practice documents/presentations</p> |
| <p>3. Initiate steps toward implementation of new policies and procedures</p> <p>a. identify supports and resources needed to implement procedures consistently across all CDSAs including on-demand (online) training guidance materials and implementation plans. b. identify fiscal, training, technical assistance, evaluation and monitoring considerations. c. develop a plan for evaluating local implementation.</p> | <p>December 2011 - June 2012</p> | <p>Mid-South, NECTAC and DAC</p> <p>Stakeholders (internal & external)</p> |

In FFY 2008, this plan addressed exploration of new service delivery models (working with other states, researchers, reviewing literature, stakeholder input and consultation/technical assistance from NECTAC).

During FFY 2009 and 2010, the NC EI Program refocused improvement activities. Through an extensive review of current service delivery, the NC EI Program determined that there are some variations across the state including:

- Implementation and interpretation of state policies and procedures
- Use of evidence-based practices
- Percentage of children enrolled in the NC EI Program
- Staff roles/responsibilities

In addition, across the state, children and families may not always have consistent access to dynamic, individualized services in natural settings that maximize the child's potential for physical, cognitive and emotional development. Not all families understand their rights, are aware of other supports, or are knowledgeable of their child's strengths and needs and how to assist them. These variations result in inconsistencies in access to and availability of quality services for all children and families. Our revisions to the objective of improving access to appropriately qualified providers have evolved into the implementation of a more consistent state Early Intervention (EI) system that supports access to quality services and supports for children and their families under the principles and requirements of IDEA Part C.

Related Requirements:

As a result of the FFY 2008 self-assessment, it was determined that one (1) CDSA in corrective action for more than one year from identification required focused monitoring of the statutory and regulatory requirements related to written prior notice. This CDSA was issued one (1) finding related to written prior notice during FFY 2010.

As a result of two (2) FFY 2010 formal complaint investigations, two (2) CDSAs were issued three (3) findings during FFY 2010. Two (2) findings were related to written prior notice and one (1) finding was related to service delivery.

The CDSAs received correction action plans due to the noncompliance. The EI Branch Central Office staff verified the correction of child-specific noncompliance and reviewed updated subsequent data verifying that the related requirements were being implemented in accordance with IDEA.

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

Overview of the Annual Performance Report Development:

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 | 98% |

Actual Target Data for 2010-2011: 9653 ÷ 9842 = 98%

| CDSA | Dec 1, 2010 Head Count | Number of children receiving services at home or in other natural environments | Percent of children receiving services at home or in other natural environments |
|-----------------------|---------------------------|---|---|
| Asheville | 349 | 347 | 99% |
| Blue Ridge | 216 | 203 | 94% |
| Charlotte | 1142 | 1142 | 100% |
| Concord | 775 | 758 | 98% |
| Durham | 513 | 513 | 100% |
| Elizabeth City | 228 | 228 | 100% |
| Fayetteville | 625 | 574 | 92% |
| Greensboro | 833 | 816 | 98% |
| Greenville | 558 | 550 | 99% |
| Morganton | 330 | 330 | 100% |
| New Bern | 335 | 335 | 100% |
| Raleigh | 1242 | 1237 | 100% |
| Rocky Mount | 567 | 567 | 100% |
| Sandhills | 406 | 390 | 96% |
| Shelby | 452 | 438 | 97% |
| Smokies | 209 | 177 | 85% |
| Wilmington | 348 | 344 | 99% |
| Winston-Salem | 714 | 704 | 99% |
| North Carolina | 9842 | 9653 | 98% |

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

The above table shows that the percentage of children receiving services at home or in other natural environments is 98%, which reflects slight slippage from the previous FY, but meets the target. The data from FFY 2010 document that the target was met for this indicator in North Carolina. North Carolina recognizes that there are appropriate justifications whereby the IFSP team supports the decision for a child's needs to best be met outside of a natural environment setting. The State will continue to monitor local programs to ensure that IFSP teams make service-setting decisions on an individualized basis and in compliance with this indicator.

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

None

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

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes (use for FFY 2009-2010 reporting):

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.

| FFY | Measurable and Rigorous Target | |
|------|--|--|
| 2010 | <u>Summary Statement 1</u> Outcome A: 73.5% Outcome B: 80.0% Outcome C: 78.0% | <u>Summary Statement 2</u> Outcome A: 59.6% Outcome B: 51.1% Outcome C: 57.8% |

Overview of Issue/Description of System or Process:

Our process for implementation of child outcomes measurement within North Carolina is on target and is consistent with activities outlined in our State Performance Plan. By the end of June 2007, North Carolina’s EI Program completed the process of phasing in all CDSAs for reporting on the child outcomes indicator. By November 2007, all 18 CDSAs were in the routine cycle of reporting entry and exit data to the EI Branch Central Office. North Carolina is using the ECO Child Outcomes Summary Form (COSF) as our measurement tool. Per ECO’s website, there are numerous assessment tools that States use to inform child outcomes rating. Within North Carolina, a standard tool across CDSAs is not required. North Carolina utilizes a variety of assessment procedures to inform the child’s IFSP team of the rating in each of the three outcome areas. Assessment procedures may include, but are not limited to observations, interviews, play assessments, developmental scales, criterion-referenced and norm referenced instruments. With all CDSAs actively collecting and reporting child outcomes data, we are able to use the data to inform our process of child outcome target setting, and program improvement strategies.

Specifically, all children enrolled in early intervention for a minimum of six months receive an entry and exit measurement of their developmental status when compared with same-aged peers.¹ The three areas of development are positive social-emotional skills, acquiring and using knowledge and skills, and use of appropriate action to meet needs. The measurement of these behaviors and skills is completed by reviewing all available information compiled through developmental evaluation, observation, input of caregivers, and interviews with parents of the child.

Our process in NC is embedded in the on-going delivery of early intervention services as outlined in the child’s IFSP. The initial rating in each area is assigned as the child enters services when the IFSP is signed. An exit rating is determined no more than 30 days prior to the child’s third birthday and transition from early intervention services or at exit from the program. Child outcome data from all 18 CDSAs are uploaded monthly to the state-approved database. Monthly data cleaning activities are conducted and include audits for “impossible” rating combinations and missing data elements.

¹Note: Because NC uses the ECO COSF measurement tool, “compared with same-aged peers” refers to the assignment of a score of 6 (*Child’s functioning generally is considered appropriate for his or her age but there are some significant concerns about the child’s functioning in this outcome area. These concerns may be substantial enough to suggest monitoring or possible additional support.*) or 7 (*Child shows functioning expected for his or her age in all or almost all everyday situations that are part of the child’s life. Functioning is considered appropriate for his or her age.*) on the rating scale to measure developmental status.

Targets and Actual Data for Part C Children Exiting in FFY 2010

| Summary Statements | Targets FFY 2010 (Percent of children) | Actual FFY 2010 (Percent and number 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 | 73.5% | 70.6% (n = 3302) |
| 2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program | 59.6% | 61.3% (n= 4036) |
| 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 | 80.0% | 77.6% (n = 4584) |
| 2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program | 51.1% | 51.3% (n = 3376) |
| 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 | 78.0% | 76.5% (n = 4239) |
| 2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program | 57.8% | 59.3% (n = 3904) |

Progress Data for FFY 2010

| A. Positive social-emotional skills (including social relationships): | Number of children | Percent of children |
|--|-----------------------|------------------------|
| a. Percent of children who did not improve functioning | 33 | 0.5% |
| b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1340 | 20.3% |
| c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach | 1176 | 17.9% |
| d. Percent of children who improved functioning to reach a level comparable to same-aged peers | 2126 | 32.3% |
| e. Percent of children who maintained functioning at a level comparable to same-aged peers | 1910 | 29.0% |
| Total | N= 6585 | 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 | 23 | 0.3% |
| b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1300 | 19.7% |
| c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach | 1886 | 28.6% |
| d. Percent of children who improved functioning to reach a level comparable to same-aged peers | 2698 | 41.0% |
| e. Percent of children who maintained functioning at a level comparable to same-aged peers | 678 | 10.3% |
| Total | N= 6585 | 100% |
| C. Use of appropriate behaviors to meet their needs: | Number of children | % of children |
| a. Percent of children who did not improve functioning | 22 | 0.3% |
| b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 1280 | 19.4% |
| c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach | 1379 | 20.9% |
| d. Percent of children who improved functioning to reach a level comparable to same-aged peers | 2860 | 43.4% |
| e. Percent of children who maintained functioning at a level comparable to same-aged peers | 1044 | 15.9% |
| Total | N= 6585 | 100% |

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

Data from FFY 2010 child outcomes indicate that statewide targets for Summary Statement 1 were consistently not met across all three outcome areas while Summary Statement 2 targets were consistently met across all three areas.

Our statewide efforts continue to focus on maintaining and improving our capacity to collect and report consistent, reliable data. During FFY 2010, we conducted on-site technical assistance visits with CDSAs to foster improved quality assurance efforts: Durham, Elizabeth City, Rocky Mount, Sandhills and Wilmington. These CDSAs were identified as having requested on-site technical assistance (TA) for improved program performance, or as having consistent outliers in reporting their child outcomes data. Through our on-site TA process, record reviews, staff interviews and system needs assessments were conducted. Through our continued collaboration with the Early Child Outcomes (ECO) Center, recommended resources for CDSAs to use to improve child outcomes ratings were outlined as follows:

- Child Outcomes Process Guide (prepared by the EI Branch)
- Child Outcomes Training Modules (prepared by the EI Branch & ECO Center)
- COSF with Evidence Organized by Level of Functioning (prepared by the ECO Center)
- Guidance for Documenting Ratings on the COSF with Evidence (prepared by the ECO Center)

- Documentation Key for Outcome Ratings (prepared by the ECO Center)
- Quality Assurance Record Review Tools (prepared by the ECO Center)

This process has become an ongoing component of our general supervision system.

In addition, the NC EI Program continues to participate in the ENHANCE Project, a project funded by the U.S. Department of Education looking at the quality of child outcomes data being collected with the COSF. Through this project, state data studies are being conducted over a four year period. These studies will investigate local processes, examine statewide data, explore patterns, and provide insight into how to promote data quality.

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

Data continues to increase in reliability. The improvement activities in the SPP will continue unchanged for the next FFY.

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

Overview of the Annual Performance Report Development:

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) know their rights - Strongly agree/agree = 90% b) effectively communicate their children's needs - Strongly agree/agree = 86% c) help their children develop and learn - Strongly agree/agree = 91% |

Actual Target Data for FFY 2010:

For FFY 2010, all families of children receiving services for at least six months in the early intervention program in North Carolina were mailed the *NCSEAM Family Survey – Early Intervention*. The *NCSEAM Family Survey* is designed to yield reliable, valid and useful measures of families' perceptions and involvement in early intervention. It is specifically intended to measure the outcome areas required by OSEP. For assistance in distributing surveys and analyzing results of returned surveys, NC contracted with Avatar International LLC.

Each survey mailed contained a cover letter and a postage-paid envelope for returning the completed survey. A total of 7,875 surveys were mailed by Avatar International using a client address file provided by the North Carolina EI Branch Central Office. The total number of surveys mailed represents the EI headcount (9,842) minus children who had not been enrolled at least six months (1,967).

Survey Results

The *NCSEAM Family Survey – Early Intervention* (North Carolina version) includes one demographic item (child's age at the time he/she was referred for early intervention services) and 47 rating scale items

divided into two groups: “Family-Centered Services” (FCS) and “Impact of Early Intervention Services on Your Family” (IOF).

On February 4, 2011, 6,987 surveys were mailed to the families of children ages birth to three with disabilities and receiving services under the Individuals with Disabilities Education Act (IDEA) Part C in North Carolina, using an address file provided to Avatar International, LLC by the State of North Carolina. On September 23, 2011, an additional 888 surveys were distributed to the CDSA of Charlotte to account for a lack of reporting. This resulted in a grand total of 7,875 surveys delivered. Of the surveys sent out, 1,494 surveys were returned with measurable Impact on Family (IOF) data and 1,513 surveys were returned with measurable Family-Centered Services (FCS) data. An analysis of the responses to the survey’s Impact of Early Intervention (EI) Services on Families scale is used for reporting the State Performance Plan (SPP) / Annual Performance Report (APR) indicators 4a, 4b, and 4c. The effective response rate was 18.97%. The data meet or exceed the National Center for Special Education Accountability Monitoring (NCSEAM) 2005 National Item Validation Study’s standards for the internal consistency, completeness, and overall quality.

Survey Data by Race/Ethnicity

| Data | Source | N | Am Ind. | Asian/ Pacf. Is | Black | Hispanic | White | Other |
|-----------------|---------------------------|-------|--------------|--------------------|------------------|------------------|------------------|---------------|
| EI Headcount | 12/1/10 data | 9,842 | 96 (1.0%) | 188 (1.9%) | 2,728 (27.7%) | 1,809 (18.4%) | 4,919 (50.0%) | 102 (1.0%) |
| Target Group | Total surveys distributed | 7,875 | 79 (1.0%) | 159 (1.9%) | 2,157 (27.4%) | 1,425 (18.1%) | 3,941 (50.0%) | 114 (1.5%) |
| Respondent Pool | Total surveys returned | 1,494 | 12 (0.8%) | 28 (1.9%) | 413 (27.6%) | 257 (17.2%) | 768 (51.4%) | 16 (1.0%) |

Survey Data by Gender and Language

| Data | Source | N | Male | Female | English | Spanish |
|-----------------|---------------------------|-------|------------------|------------------|------------------|----------------|
| Target Group | Total surveys distributed | 7,875 | 5,002 (63.5%) | 2,873 (36.5%) | 6,904 (87.7%) | 966 (12.3%) |
| Respondent Pool | Total surveys returned | 1,494 | 896 (60.0%) | 597 (40.0%) | 1,240 (83.2%) | 250 (16.8%) |

Representativeness of Data

Since surveys were mailed to 7,875 families with valid addresses, this is the population that the resulting sample should strive to represent. Overall, this sample is representative of the families enrolled in Part C in North Carolina. For gender, the sample is representative of the population. For ethnicity, the group “Black or African American” is slightly over-represented, while the group “Hispanic or Latino” is slightly underrepresented. For language, Spanish-speakers are equally represented. Overall, the 1,494 surveys returned represent the population of enrolled children well.

The following table provides a summary of North Carolina’s target goals and actual survey results for FFY 2010.

| Indicator | FFY 2010 NCSEAM Survey | Target Goals FFY 2010 | Actual Results FFY 2010 |
|---|--|--------------------------------------|--|
| <p>4: Percent of families participating in Part C who report that early intervention services have helped the family to:</p> | <p>NCSEAM Family Survey – Early Intervention</p> | | |
| <p>a) know their rights;</p> | <p>a) 74%= 1,106 of 1,494 families</p> <p><i>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.</i></p> | <p>a) 90%</p> | <p>a) 74%</p> |
| <p>b) effectively communicate their children’s needs; and</p> | <p>b) 71%= 1,061 of 1,494 families</p> <p><i>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.</i></p> | <p>b) 86%</p> | <p>b) 71%</p> |
| <p>c) help their children develop and learn</p> | <p>c) 84%= 1,255 of 1,494 families</p> <p><i>Over the past year, Early Intervention services have helped me and/or my family understand my child’s special needs.</i></p> | <p>c) 91%</p> | <p>c) 84%</p> |

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

The NC EI Program involved stakeholders (State Interagency Coordinating Council (ICC), additional parents, the Exceptional Children’s Assistance Center (ECAC), the Women’s and Children’s Health Section Family Council, and CDSA staff) in providing guidance on improvement activities and input on continuing challenges in meeting family outcomes indicators and targets. The Family Outcomes Resource Group was formed and began work on reviewing statewide and CDSA data and identifying strategies, activities and resources to improve family outcomes. Stakeholders shared their knowledge and experience related to the strengths of the current system as well as possible barriers or contributing factors.

Explanation of Progress or Slippage

There was a decrease in the return rate of surveys from 23.1% (FFY 2009) to 18.97% (FFY 2010) and a slight decrease in the ratings given by families for 4a (know their rights) and 4b (effectively communicate

their children's needs) , indicating the need for more systematic improvement activities. Data for 4c (helped their children develop and learn) remained stable at 84%.

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

NC Results Focus

North Carolina undertook a *Results Focus* process as part of the OSEP Continuous Improvement Monitoring visit. This process included input from various stakeholders:

- NC EI Central Office staff and CDSA staff
- External stakeholder representatives (including NC's Parent Training and Information Center, family advocacy organizations, and professional and family representatives from the ICC)
- Technical assistance providers including the National Early Childhood Technical Assistance Center (*NECTAC*), Early Childhood Outcomes Center (*ECO*), the Alliance for Systems Change/Mid-South Regional Resource Center (*SRRC*) and the Data Accountability Center (*DAC*)

The determination of the area of focus evolved from a series of stakeholder meetings, OSEP conference calls and a review of key result areas using statewide and CDSA data. It was decided that the results focus would be a more systematic approach to using evidence-based practice to better ensure that families know their rights (Indicator 4a).

Work began in November 2011, first with a webinar and later with an onsite meeting of stakeholders as an adjunct to OSEP's Continuous Improvement Monitoring visit with NC EI. Ongoing engagement before, during, and after the onsite meeting resulted in a draft state-wide capacity-building plan. This initial plan addresses timelines, evaluation methods, and the following components:

- Improving training and technical assistance by:
 - enhancing existing training for NC EI staff
 - addressing mentoring, coaching, supervision, communication, and media
 - providing various training and TA venues
 - using parents as co-trainers
 - developing talking points/scripts for providers
- Enhancing family rights materials by:
 - updating all technical assistance documents
 - disseminating materials through local advocacy groups and other partners
 - addressing cultural and linguistic appropriateness
 - providing additional languages, formats, and methods of dissemination
 - updating materials for consistency with the new "Be Early" campaign.
- Planning pilot activities using data analytics from the Data Accountability Center (DAC)
- Incorporating data from pilots back into NC's statewide plan

The next steps toward implementation include:

- obtaining feedback on the draft plan
- engaging pilot teams in an informational webinar

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

Overview of the Annual Performance Report 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 | 1.10% |

Actual Target Data for 2010: There were 1,249 children aged birth to one year enrolled in NC’s EI Program on December 1, 2010. On December 1, 2010, the state population for this group was 123,336. The actual percentage is **1.01%**.

| CDSA | Children Aged Birth to One | Population Aged Birth to One | Percent of Population Aged Birth to One |
|--|----------------------------|------------------------------|---|
| Asheville | 52 | 4273 | 1.22% |
| Blue Ridge | 24 | 1922 | 1.25% |
| Charlotte | 195 | 13679 | 1.43% |
| Concord | 76 | 9155 | 0.83% |
| Durham | 50 | 8736 | 0.57% |
| Elizabeth City | 20 | 2115 | 0.95% |
| Fayetteville | 68 | 8955 | 0.76% |
| Greensboro | 80 | 10697 | 0.75% |
| Greenville | 76 | 5371 | 1.42% |
| Morganton | 57 | 4501 | 1.27% |
| New Bern | 43 | 7325 | 0.59% |
| Raleigh | 145 | 12551 | 1.16% |
| Rocky Mount | 89 | 6197 | 1.44% |
| Sandhills | 50 | 6177 | 0.81% |
| Shelby | 53 | 5503 | 0.96% |
| Smokies | 29 | 1909 | 1.52% |
| Wilmington | 59 | 5563 | 1.06% |
| Winston-Salem | 83 | 8707 | 0.95% |
| North Carolina (US Census Bureau data) | 1249 | 123,336 | 1.01% |
| National | 40,962 | 3,989,384 | 1.03% |

This table provides the birth to one year of age data for the eighteen CDSAs. The table also shows the statewide and national percentage of children enrolled in early intervention services as compared to the same-age population.

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

North Carolina’s current data show a slight decrease in both the percentage and number of children ages birth to one year enrolled in and served by the EI program from FFY 2009 (1.04% or 1382 children) to FFY 2010 (1.01% or 1249 children)². It is noteworthy that children receiving early intervention services on military bases are counted in NC’s total population of children ages birth to one; however, these children may not be enrolled in the state’s program. Educational and Developmental Intervention Services (EDIS) is the military program that provides Part C Early Intervention Services to children in families living on military bases.

The slippage may be attributed to needed improvements in initial contacts with families as well as public awareness efforts. EI Branch Central Office staff identified common trends needing improvement across CDSAs. The EI Branch Central Office staff continue to provide technical assistance to increase the number of children birth to one year enrolled in early intervention services.

Other efforts include activities from the ICC, which has implemented a statewide Local Interagency Coordinating Council (LICC) reporting tool for the past three years. This tool allows North Carolina LICCs to report child find activities and provides LICCs a consistent method to document local efforts. FFY 2008 reflects the first full reporting year for the LICC Child Find Activities. While the submitted reports show improvements in reporting methods as compared to previous LICC reporting efforts, the process has been further streamlined and improved. The FFY 2010 annual LICC report reflects the percent of reporting LICCs that indicated they conducted at least one event/activity from July 2010 – June 2011. Respondents could indicate multiple efforts; therefore, the percentages reflected in the tables will not add to 100%.

Percent of Reporting LICCs’ Outreach Activities Discussing Part C Eligibility Process

| Primary Referral Source | FFY 07 | FFY 08 | FFY 09 | FFY 10 |
|---|---------------|---------------|---------------|---------------|
| Physicians & Medical Community | 61% | 78% | 77% | 93% |
| Parent/Family Caregiver | 67% | 74% | 82% | 80% |
| Child Care Programs | 39% | 58% | 63% | 87% |
| Public Health Department | 53% | 49% | 50% | 60% |
| Hospital(s) | 46% | 43% | 45% | 73% |
| Other: Libraries, WIC programs, More At Four, YMCA, area college ECE students | 41% | 43% | 42% | 73% |
| Department of Social Services | 56% | 39% | 52% | 73% |
| Child Care Resource & Referral Agency | 37% | 36% | 43% | 80% |
| Partnerships for Children/ Smart Start | 36% | 36% | 55% | 87% |
| Early Head Start/Head Start | 30% | 36% | 52% | 73% |
| Mental Health Agency/Provider | 29% | 32% | 28% | 47% |
| Domestic Violence Shelters & Agencies | 21% | 16% | 25% | 33% |
| Shelters for Homeless Families | 11% | 8% | 15% | 40% |
| Even Start | 6% | 5% | 7% | 20% |

² Percentages are based on U.S. Census Bureau Data.

Other improvement activities include:

1. Use of ARRA funds to support local service coordination and child find activities

- Ten (10) Early Intervention Service Coordinator positions (7 in state CDSAs, and 3 in contract CDSAs) were established on a time-limited basis.
- These positions were used, as a portion of their job responsibilities, to develop relationships and rapport with key referral sources (e.g., NICU, doctors' offices, child care centers), follow-up with families who were difficult to reach, and participate in community activities and outreach opportunities.
- Staff continue to track and analyze activities and move toward the target, locally and at the state level. Improvements have been seen at some CDSAs.

2. Public awareness campaign

- The "Be Early" Campaign launched in FFY 2010 to increase public awareness of early intervention in North Carolina.
- State activities and local activities included:
 - Launch of a redesigned website for easier, more interactive access by families and other referral sources
 - An employee campaign that unified the "Be Early" message, that involved its employees acting as "walking billboards" wearing a themed t-shirt on a specific date
 - An open house held on the office campus of the N.C. Division of Public Health to increase awareness and outreach of early intervention
 - Outreach and awareness through television and radio advertisements covering eight (8) major broadcast markets across the state
 - Awareness and outreach activities were provided to more than 150,000 attendees statewide at more than 200 festivals, health fairs and community events
 - Development and distribution of a wide variety of "Be Early" promotional materials for implementing future statewide public awareness campaigns

3. Data analysis

- Monthly headcount data continue to be shared with each CDSA. These data identify each CDSA's percentage of enrollment on the first day of each month, related to the number of children ages birth to one in the population.
- Referral disposition reports continue to be provided to CDSAs for program analysis.
- A referral analysis tool is in place and data are shared with CDSAs on a monthly basis.
- Technical assistance in local data analysis is provided as needed.
- Review and analysis of state data regarding population, referrals, enrollment across time continues.

4. LICC outreach trainings and reporting

- LICCs continue to be supported regarding outreach efforts and annual report utilization.
- Technical assistance regarding child find strategies is provided as needed.

5. Linkage with NC Birth Defects Registry

- Early Intervention Branch staff continue to work with staff from the North Carolina Birth Defects Registry program to determine whether information available from the registry can be used for child find efforts.

Although the proposed target has not been achieved, ARRA funds allowed for improved efforts. Improvement activities continue to be evaluated, updated and implemented.

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

Despite slight slippage, the improvement activities in the SPP will continue unchanged. Several activities (e.g., the public awareness campaign) were new during this fiscal year and continue to be implemented and evaluated.

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

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to three 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 | 2.00% |

Actual Target Data for FFY 2010: There were 9,842 children aged birth to three years enrolled in the NC’s EI Program on December 1, 2010. On December 1, 2010, the state population for this group was 376,163. The actual percentage is **2.62%**.

| CDSA | Children Aged Birth to Three | Population Aged Birth to Three | Percent of Population Aged Birth to Three |
|--|------------------------------|--------------------------------|---|
| Asheville | 349 | 12952 | 2.69% |
| Blue Ridge | 216 | 6152 | 3.51% |
| Charlotte | 1142 | 41197 | 2.77% |
| Concord | 775 | 29041 | 2.67% |
| Durham | 513 | 26688 | 1.92% |
| Elizabeth City | 228 | 6565 | 3.47% |
| Fayetteville | 625 | 26281 | 2.38% |
| Greensboro | 833 | 32989 | 2.53% |
| Greenville | 558 | 16101 | 3.47% |
| Morganton | 330 | 14200 | 2.32% |
| New Bern | 335 | 20656 | 1.62% |
| Raleigh | 1242 | 38525 | 3.22% |
| Rocky Mount | 567 | 19130 | 2.96% |
| Sandhills | 406 | 19041 | 2.13% |
| Shelby | 452 | 16814 | 2.69% |
| Smokies | 209 | 5865 | 3.56% |
| Wilmington | 348 | 16974 | 2.05% |
| Winston-Salem | 714 | 26992 | 2.65% |
| North Carolina (US Census Bureau data) | 9842 | 376,163 | 2.62% |
| National | 342,389 | 12,152,003 | 2.82% |

This table provides the birth to three year of age data for the eighteen CDSAs. The table also shows the statewide and national percentage of children enrolled in early intervention services as compared to the same-age population.

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

North Carolina's current data indicate continued increases in both the percentage and number of children ages birth to three years enrolled in and served by the EI program from FFY 2009 (2.48% or 9971 children) to FFY 2010 (2.62% or 9842 children). The population in North Carolina and the number of children served by the Early Intervention Program has continued to grow. As noted in Indicator 5, children receiving early intervention services on military bases are counted in NC's total population of children ages birth to three, although they may not be enrolled in the state's program. Educational and Developmental Intervention Services (EDIS) is the military program that provides Part C Early Intervention Services to children in families living on military bases.

Efforts to show more successful child find activities over the year have included local outreach and public awareness activities about early intervention as well as the use of ARRA funds to support local positions focused on child find activities. Programs continue to provide monthly headcount data based upon the number of children enrolled in the program on the first day of each calendar month. CDSAs also continue to use local strategies to increase enrollment. Most CDSAs continued to show improvements above the state target in this indicator. CDSAs that needed further technical assistance were provided additional support. Improvement activities discussed for Indicator 5 also support this indicator.

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

Not Applicable

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

Overview of the Annual Performance Report Development:

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 eligible 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 eligible infants and toddlers evaluated and assessed)] times 100.

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

| FFY | Measurable and Rigorous Target |
|------|--------------------------------|
| 2010 | 100% |

Actual Target Data for FFY 2010:

99.77%

Actual Target Data for FFY 2010: Data on eight hundred sixty (860) children were examined to verify the 45-day timeline for compliance. Seven hundred ninety four (794) children received an IFSP within 45 days of referral. Sixty four (64) children did not receive an IFSP in a timely manner due to documented exceptional family circumstances. Therefore, eight hundred fifty eight (858) out of eight hundred sixty (860) children (99.77%) met the 45 day timeline indicator. This figure represents progress of 5.17% from the FFY 2009 figure of 94.60%.

Compliance by the CDSAs in meeting the 45 day timeline indicator was determined via a self-assessment record review of all children referred to the program in January 2011. During FFY 2010, the EI Branch Central Office provided each CDSA with a list of children (extracted from the state’s database) who were referred in January 2011. The record review process is used to determine compliance or noncompliance including an account for untimely evaluations, assessments, and initial IFSP meetings, including the specific reasons for delays.

This time period for record review selection is representative of infants and toddlers with IFSPs for the full-reporting period as the record review data included the entire population of children referred to the program in January 2011.

Infants Evaluated and Assessed and provided an Initial IFSP meeting Within Part C’s 45-day timeline:

| | |
|---|---------------|
| a. Number 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 (including exceptional circumstances) | 858 |
| b. Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted | 860 |
| 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 (Percent = [(a) divided by (b)] times 100) | 99.77% |

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

In FFY 2010, of the eight hundred sixty (860) children whose records were reviewed, almost ninety three percent (n = 698) of children received an IFSP within 45 days of referral. Approximately seven percent (n = 64) showed delays due to documented exceptional family circumstances. Less than a half of a percent (n = 2) of children did not receive an IFSP within 45 days of referral. Where relevant, each program submitted reasons why any child did not receive an IFSP within 45 days. The reasons for the CDSA delays were due to delays in initial contacts and delays in IFSP scheduling. The next table displays the results of the data inquiry with the analysis as follows:

| January 2011 CDSA | Compliance |
|------------------------------|-------------------|
| Asheville | 100% |
| Blue Ridge | 100% |
| Charlotte | 100% |
| Concord | 100% |
| Durham | 100% |
| Elizabeth City | 100% |
| Fayetteville | 100% |
| Greensboro | 100% |
| Greenville | 100% |
| Morganton | 100% |
| New Bern | 100% |
| Raleigh | 100% |
| Rocky Mount | 100% |
| Sandhills | 100% |
| Shelby^ | 95.91% |
| Smokies | 100% |
| Wilmington | 100% |
| Winston-Salem | 100% |
| Total | 99.77% |

Identification of Noncompliance in FFY 2010

Record review data indicate seventeen (17) out of eighteen (18) CDSAs achieved 100% compliance (including documented exceptional family circumstances). During the time of monitoring, one CDSA (denoted in chart with ^) was still in correction planning from the FFY 2009 self-assessment.

The progress from 94.6% (FFY 2009) to 99.77% (FFY 2010) can be attributed to the following improvement activities:

- The implementation of technical assistance documents to consistently apply reasons for delays due to documented exceptional circumstances and CDSA circumstances.
- The establishment of additional internal timelines to ensure that children and families who are eligible for Part C receive appropriate services promptly.
- The provision of focused technical assistance to targeted CDSAs to support examination of causes for delay and the implementation of efficient strategies.

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 for this indicator: 94.6%

| | |
|---|-----------|
| 1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010) | 19 |
| 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) | 19 |
| 3. Number of FFY 2009 findings <u>not</u> 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:

| | |
|---|----------|
| 4. Number of FFY 2009 findings not timely corrected (same as the number from (3) above) | 0 |
| 5. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”) | 0 |
| 6. Number of FFY 2009 findings <u>not</u> verified as corrected [(4) minus (5)] | 0 |

Actions Taken if Noncompliance Not Corrected:

Not applicable

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

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

Thirteen (13) CDSAs were issued findings and received a Corrective Action Plan (CAP) in FFY 2009. Noncompliance must be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the

APR Template – Part C (4)

North Carolina
State

noncompliance). The EI Branch Central Office staff verified the correction of child-specific noncompliance and reviewed updated subsequent data verifying that the 45-day timeline requirement was being implemented in accordance with IDEA.

The North Carolina EI Program has a system to identify and correct noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance). For those CDSAs issued finding(s), the EI Branch Central Office along with the CDSA investigate the underlying reasons that contributed to the noncompliance. The specific regulatory requirements are reviewed with the CDSA. A corrective action process is developed matching strategies with root causes of noncompliance. During the corrective action process, the EI Branch Central Office staff monitors the status of the CDSAs progress through the submission of record review data, and a review of the implementation of efficient strategies. Correction of noncompliance is determined as soon as possible, but in no case more than one year from identification. The process utilized to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the 45-day timeline requirement is being implemented in accordance with IDEA. The North Carolina EI Program continues to address how to sustain correction of noncompliance across the state.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

| | |
|---|----------|
| 1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP's June 2010, FFY 2008 APR response table for this indicator | 0 |
| 2. Number of remaining FFY 2008 findings the State has verified as corrected | 0 |
| 3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)] | 0 |

Verification of Remaining FFY 2008 findings:

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

There were three (3) CDSAs in corrective action issued in FFY 2008. These CDSAs received intensive monitoring and corrected their noncompliance within one year of the finding being issued.

The EI Branch Central Office staff verified through record reviews of updated subsequent data that the CDSAs: 1) are correctly implementing the specific regulatory requirements; and 2) have conducted the initial evaluation, assessment and IFSP meeting, although late, unless the child is no longer within the jurisdiction of the CDSA/NC EI Program.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

| Statement from the Response Table | State's Response |
|-----------------------------------|------------------|
| Not applicable | |

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

CDSAs continue to use their internal quality assurance processes to monitor the 45-day timeline. The EI Branch Central Office staff will continue to verify data and ensure that CDSAs maintain compliance. Ongoing monitoring and technical assistance are occurring per the SPP. These ongoing monitoring and technical assistance efforts will focus on the identification and correction of any noncompliance as soon as possible but in no case more than one year from identification.

During FFY 2009 and 2010, the NC EI Program refocused improvement activities. Through an extensive review of current service delivery, the NC EI Program determined that there are some variations across the state including:

- Implementation and interpretation of state policies and procedures
- Use of evidence-based practices
- Percentage of children enrolled in the NC EI Program
- Staff roles/responsibilities

These variations may result in inconsistencies in access to and availability of quality services for all children and families. The NC EI Program's revisions to the objective of improving access to appropriately qualified providers have evolved into the implementation of a more consistent state Early Intervention (EI) system that supports access to quality services and supports for children and their families congruent with the principles and requirements of IDEA Part C. Improvement activities described in Indicator 1 include:

- adopting common talking points for initial contacts with families for child find,
- adopting selected standardized, norm-referenced instruments for use in determining eligibility for EI,
- adopting revisions to the IFSP to facilitate better use of data regarding child and family outcomes.

Related Requirements:

In FFY 2009, one (1) CDSA was issued a finding related to Surrogate Parent identification and received a Corrective Action Plan (CAP) due to noncompliance. EI Branch Central Office staff verified in June 2011 that the CDSA is correctly implementing the specific related requirements.

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

Overview of the Annual Performance Report Development:

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

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

Measurement:

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.

| FFY | Measurable and Rigorous Target |
|------|--------------------------------|
| 2010 | 100% |

Actual Target Data for FFY 2010:

Service Plan Includes Transition Steps and Services: 100% (513 out 513) (n=513)

Data for IFSPs with transition steps and services are collected via a self-assessment process. CDSAs were provided with a list of records for all children who were two years nine months of age in February 2011 and should have had a transition plan with steps developed, notification to the LEA, and a transition planning conference by the month of February 2011 to review as part of the self-assessment process. Reasons for noncompliance are collected when noncompliance is identified.

| CDSA | FFY 2010 |
|----------------|----------|
| Asheville | 100% |
| Blue Ridge | 100% |
| Charlotte | 100% |
| Concord | 100% |
| Durham | 100% |
| Elizabeth City | 100% |
| Fayetteville | 100% |
| Greensboro | 100% |
| Greenville | 100% |
| Morganton | 100% |
| New Bern | 100% |
| Raleigh | 100% |
| Rocky Mount | 100% |
| Sandhills | 100% |
| Shelby | 100% |
| Smokies | 100% |
| Wilmington | 100% |
| Winston-Salem | 100% |
| Total | 100% |

This table denotes 100% (n=513) compliance in FFY 2010 for children who are transitioning and have IFSPs with transition steps and services. There was improvement of 0.18% from FFY 2009 data of 99.82% to FFY 2010 data of 100%.

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 | 513 |
| b. Number of children exiting Part C | 513 |
| 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) | 100% |

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

The NC EI Program continues to focus its improvement activities on maintaining compliance regarding effective transition practices. The purpose is to become even more effective in identifying and correcting noncompliance and ensuring system-wide improvement. Strategies involve a variety of activities including collaborating with the Part B 619 program to help ensure children experience a smooth transition from Part C to Part B. A practice document, *Guiding Practices in Transition* was developed for both Part B and Part C personnel during a previous fiscal year. Currently this document is being revised to reflect

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North Carolina
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clarification received from OSEP in the December 2009 *Transition FAQ* document, TA partners and the September release of the *Federal Regulations* for Part C.

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 for this indicator: 99.82%

| | |
|---|---|
| 1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010) | 1 |
| 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) | 1 |
| 3. Number of FFY 2009 findings <u>not</u> 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:

| | |
|---|---|
| 4. Number of FFY 2009 findings not timely corrected (same as the number from (3) above) | 0 |
| 5. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction") | 0 |
| 6. Number of FFY 2009 findings <u>not</u> verified as corrected [(4) minus (5)] | 0 |

Actions Taken if Noncompliance Not Corrected:

None. All noncompliance was corrected within the one-year timeline. The process utilized to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the transition planning requirement is being implemented in accordance with IDEA.

Verification of Correction of FFY 2009 noncompliance (either timely or subsequent):

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

In FFY 2009, one CDSA was cited with one (1) finding due to inadequate follow up by CDSA personnel. Corrective actions were implemented and the CDSA corrected the noncompliance in less than a year from notification of the noncompliance. As part of correction EI Branch Central Office staff together with the individual CDSA staff investigated the underlying reasons that contributed to the noncompliance. The specific regulatory requirements were reviewed with the CDSA. A corrective action process was developed matching strategies with the root causes of noncompliance. During the corrective action process, EI Branch Central Office staff monitored the status of the CDSA's progress through the submission of record review data by the CDSA and through a review of the implementation of efficient strategies. For this CDSA correction of all noncompliance regarding policies and procedures occurred less than one year from the finding being issued. In addition, all child specific noncompliance was corrected as soon as possible, unless the child was no longer within the jurisdiction of the NC EI Program. Verification of correction occurred through a process in which EI Branch Central Office staff monitored the status of the CDSA's progress through reviewing the submission of record review data

along with reviewing the implementation of efficient strategies. EI Branch Central Office staff analyzed the progress report information, held discussions with CDSA management, and verified record review data by reviewing records on site. Through this process EI Branch Central Office staff verified that this CDSA has corrected noncompliance and is correctly implementing the specific regulatory requirement and has developed an IFSP with transition steps and services for each child specific noncompliance, unless the child is no longer within the jurisdiction of the CDSA/NC EI Program. Data verification ensured that specific regulatory requirements under IDEA were being met and that there were no additional individual child-specific instances.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

| | |
|---|---|
| 1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP’s June 2010, FFY 2008 APR response table for this indicator | 0 |
| 2. Number of remaining FFY 2008 findings the State has verified as corrected | 0 |
| 3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)] | 0 |

Verification of Correction of Remaining FFY 2008 findings:

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

None. All noncompliance was corrected within the one-year timeline.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

None. All noncompliance was corrected within the one-year timeline.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

| Statement from the Response Table | State’s Response |
|-----------------------------------|------------------|
| Not applicable | |

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

The 2005-2010 SPP improvement activities were reviewed. Compliance with this indicator remains high and ongoing monitoring and technical assistance are occurring per the SPP. These ongoing monitoring and technical assistance efforts focus on quickly identifying and remedying any noncompliance; this improvement activity will continue. The majority of the improvement activities planned for 2011-2012 will be conducted in partnership with the Part B 619 program to help ensure children experience a smooth transition from Part C to Part B. Improvement activities for 2011-2012 include the following:

- review and revision of Part C and Part B 619 programs' Interagency Agreement to include the information clarified in OSEP's December 2009 *Transition FAQ* document and September 2011 *Federal Regulations* for Part C
- review and revision of the practice document *Guiding Practices in Transition* to include the information clarified in OSEP's December 2009 *Transition FAQ* document and September 2011 *Federal Regulations* for Part C
- collaborating with Part B 619 program as they develop a training video on best practices in transitions as a method to sustain trainings conducted two years ago and including current policy per OSEP's FAQ
- recommend local Part C programs (CDSAs) review completed regional plans annually with their respective LEAs on transition to make any needed changes or updates, submit the plans to the responsible state agencies, and implement any changes made to the regional plans
- continued annual review by the ICC of the annual reporting on transition activities from the LICCs through the LICC Transitions Reporting Tool.

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

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8B: 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 Notification to LEA, if child potentially eligible for Part B;

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

Measurement:

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.

| FFY | Measurable and Rigorous Target |
|------|--------------------------------|
| 2010 | 100% |

Actual Target Data for FFY 2010:

Notification to the LEA of children deemed potentially eligible: 99.81% (517 out of 518) (n=518)

Data are from state monitoring efforts. Data for the notification to LEA, if the child is potentially eligible for Part B, are collected via self-assessment. CDSAs were provided with a list of records for all children who were two years nine months of age in February 2011 and should have had a transition plan with steps developed, notification to the LEA, and a transition planning conference by the month of February 2011 to review as part of the self-assessment process. All children who remain enrolled in Part C in NC at the time that they are transitioning out of the program at age 3 are potentially eligible for Part B in NC. Reasons for noncompliance are collected when noncompliance is identified.

| CDSA | FFY 2010 |
|----------------|----------|
| Asheville | 100% |
| Blue Ridge | 100% |
| Charlotte | 100% |
| Concord | 100% |
| Durham | 100% |
| Elizabeth City | 100% |
| Fayetteville | 100% |
| Greensboro | 100% |
| Greenville | 100% |
| Morganton | 100% |
| New Bern | 100% |
| Raleigh | 100% |
| Rocky Mount | 100% |
| Sandhills | 100% |
| Shelby^ | 95.83% |
| Smokies | 100% |
| Wilmington | 100% |
| Winston-Salem | 100% |
| Total | 99.81% |

This table denotes slight improvement in notification to the LEA of children deemed potentially eligible for Part B from 99.47% in FFY 2009 to 99.81% (n=518) in FFY 2010.

Identification of noncompliance in FFY 2010

In FFY 2010, there were 518 records reviewed to examine whether the LEA was appropriately notified of potentially eligible children. There were seventeen (17) of eighteen CDSAs which reported 100% compliance. One (1) (denoted with ^) of the eighteen CDSAs was cited with one finding. Corrective actions were developed and implemented to address internal processes for tracking of LEA notification. Correction of noncompliance is to occur within one year from written notification of the finding.

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

| | |
|---|---------------|
| a. Number of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred | 517 |
| b. Number of children exiting Part C who were potentially eligible for Part B | 518 |
| 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) | 99.81% |

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

The NC EI Program continues to focus its improvement activities on maintaining compliance regarding effective transition practices. The purpose is to become even more effective in identifying and correcting noncompliance and ensuring system-wide improvement. Strategies involve a variety of activities including collaborating with the Part B 619 program to help ensure children experience a smooth transition from Part C to Part B. A practice document, *Guiding Practices in Transition*, was developed for both Part B and Part C personnel in a previous fiscal year. Currently this document is being revised to reflect clarification received from OSEP in the December 2009 *Transition FAQ* document and the release of the *Federal Regulations* for Part C in September 2011.

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North Carolina
State

The current APR denotes a slight improvement in notification to the LEA of children deemed potentially eligible for Part B from 99.7% in FFY 2009 to 99.81% (n=518) in FFY 2010. Although there was not 100% compliance, strategies to address the finding were identified in the corrective action process and progress has already occurred in correcting noncompliance. EI Branch Central Office staff together with the CDSA staff investigated the underlying reasons that contributed to the noncompliance. The specific regulatory requirements were reviewed with the CDSA. A corrective action process was developed, matching strategies with the root causes of noncompliance. During the corrective action process, EI Branch Central Office staff members are monitoring the status of the CDSA's progress through the submission of record review data by the CDSA and through a review of the implementation of efficient strategies. For this CDSA, correction of all noncompliance regarding policies and procedures will occur less than one year from the finding being issued. In addition, all child-specific noncompliance will be corrected as soon as possible, unless the child is no longer within the jurisdiction of the NC EI Program. Verification of correction will occur through a process in which EI Branch Central Office staff monitor the status of the CDSAs' progress through reviewing the submission of record review data along with reviewing the implementation of efficient strategies. EI Branch Central Office staff will analyze the progress report information, hold discussions with CDSA management, and verify record review data by reviewing records on site. Through this process EI Branch Central Office staff will verify that this CDSA will have corrected noncompliance and is correctly implementing the specific regulatory requirement and have provided LEA notification for each child specific noncompliance, unless the child is no longer within the jurisdiction of the CDSA/NC EI Program.

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 for this indicator: 99.47%

| | |
|---|----------|
| 1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010) | 3 |
| 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) | 3 |
| 3. Number of FFY 2009 findings <u>not</u> 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:

| | |
|---|----------|
| 4. Number of FFY 2009 findings not timely corrected (same as the number from (3) above) | 0 |
| 5. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction") | 0 |
| 6. Number of FFY 2009 findings <u>not</u> verified as corrected [(4) minus (5)] | 0 |

Actions Taken if Noncompliance Not Corrected:

None. All noncompliance was corrected within the one-year timeline. The process utilized to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the transition planning requirement is being implemented in accordance with IDEA.

Verification of Correction of FFY 2009 noncompliance (either timely or subsequent):

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

For FFY 2009 strategies to address the findings were identified in the corrective action process and correction of noncompliance occurred less than one year from notification. EI Branch Central Office staff together with the individual CDSA staff investigated the underlying reasons that contributed to the noncompliance. The specific regulatory requirements were reviewed with the CDSAs. A corrective action process was developed, matching strategies with the root causes of noncompliance. During the corrective action process, EI Branch Central Office staff members monitored the status of the CDSAs' progress through the submission of record review data by the CDSAs and through a review of the implementation of efficient strategies. For these CDSAs correction of all noncompliance, regarding policies and procedures occurred less than one year from the finding being issued. In addition, all child specific noncompliance was corrected as soon as possible, unless the child was no longer within the jurisdiction of the NC EI Program. Verification of correction occurred through a process in which EI Branch Central Office staff monitored the status of the CDSAs' progress through reviewing the record review data and the implementation of efficient strategies. EI Branch Central Office staff analyzed the progress report information, held discussions with CDSA management, and verified record review data by reviewing records on site. Through this process EI Branch Central Office staff verified that these CDSAs corrected noncompliance, were correctly implementing the specific regulatory requirement and had provided LEA notification for each child-specific noncompliance, unless the child was no longer within the jurisdiction of the CDSA/NC EI Program.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

| | |
|---|----------|
| 1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP's June 2011, FFY 2009 APR response table for this indicator | 0 |
| 2. Number of remaining FFY 2008 findings the State has verified as corrected | 0 |
| 3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)] | 0 |

Verification of Correction of Remaining FFY 2008 findings:

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

None. All noncompliance was corrected within the one-year timeline.

APR Template – Part C (4)

North Carolina
State

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

| Statement from the Response Table | State's Response |
|-----------------------------------|------------------|
| Not Applicable | |

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

See detail on improvement activities in sub-indicator 8a.

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

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8C: 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:

- C. Transition conference, if child potentially eligible for Part B.
(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties, at least nine months prior to the toddler’s third birthday for toddlers potentially eligible for Part B) divided by the (# of toddlers with disabilities 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 | 100% |

Actual Target Data for FFY 2010:

Transition Planning Conference: 95.24% [(425 timely + 35 exceptional circumstance) out of 483] (n=483)

Data are from state monitoring efforts. Data for the transition conference, if a child is potentially eligible for Part B, are collected via self-assessment. CDSAs were provided a list of records for all children who were two years and nine months of age in February 2011 and should have had a transition plan with steps developed, notification to the LEA, and a transition-planning conference by the month of February 2011 to review as part of the self-assessment process. Reasons for noncompliance are collected when noncompliance is identified.

| CDSA | FFY 2010 |
|----------------|-----------------|
| Asheville^ | 95.65% |
| Blue Ridge^ | 60.00% |
| Charlotte | 97.30% |
| Concord | 100% |
| Durham | 100% |
| Elizabeth City | 95.00% |
| Fayetteville | 95.00% |
| Greensboro | 100% |
| Greenville | 95.83% |
| Morganton | 100% |
| New Bern | 100% |
| Raleigh | 100% |
| Rocky Mount | 96.97% |
| Sandhills | 100% |
| Shelby^ | 79.17% |
| Smokies | 82.61% |
| Wilmington | 100% |
| Winston-Salem | 100% |
| Total | 95.24% |

The data shows 95.24% compliance for FFY 2010, which represents 2% slippage as compared to FFY 2009 data of 97.24%.

In FFY 2010, 483 records were reviewed to examine the percentage of children potentially eligible for Part B and whether a timely transition planning conference was held no later than 90 days before the child’s third birthday. Eighty-eight percent (425 of 483) records denoted that a conference was held in a timely manner and seven percent (35) were not held in a timely manner due to documented exceptional family circumstances or late referral to Part C--defined as a referral received less than 90 days before the 3rd birthday, resulting in a total compliance of 95.24%.

Children Exiting Part C who Received Timely Transition Planning (Transition Conference):

| | |
|---|---------------|
| a. Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred (including exceptional circumstances) | 460 |
| b. Number of children exiting Part C who were potentially eligible for Part B | 483 |
| 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) | 95.24% |

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

Identification of Noncompliance in FFY 2010

The data represent 95.24% compliance for FY 2010. This APR for FFY 2010 shows 2% slippage for Indicator 8C as compared to FFY 2009 data of 97.24%. Nine (9) CDSAs reported 100% compliance. Three (3) CDSAs (denoted with ^) were cited with a finding; corrective actions were developed and

implemented. Compliance is to be corrected as soon as possible for all findings but no later than one year from the written notification.

Six (6) CDSAs corrected noncompliance prior to the issuance of findings. In order for a CDSA to report that identified noncompliance has been corrected in a timely manner and all federal regulations are properly implemented, the CDSA must have first done the following:

- (1) Account for all noncompliance;
- (2) Identify the level of noncompliance, and the root cause(s) of the noncompliance;
- (3) If needed, change policies, procedures and/or practices that contributed to or resulted in noncompliance; and
- (4) Based on its review of updated data, which may be from subsequent on-site monitoring, determine that the CDSA, within one year from identification of the noncompliance, is correctly implementing the specific statutory or regulatory requirement(s).

The EI Branch Central Office staff verified the correction of child-specific noncompliance and reviewed updated subsequent data verifying that the timely services requirement was being implemented in accordance with IDEA.

The NC EI Program continues to focus its improvement activities on maintaining compliance regarding effective transition practices. The purpose is to become even more effective in identifying and correcting noncompliance and ensuring system-wide improvement. Strategies involve a variety of activities including collaborating with the Part B 619 program to help ensure children experience a smooth transition from Part C to Part B. A practice document, *Guiding Practices in Transition* was developed for both Part B and Part C personnel in a previous fiscal year. This document is being revised to reflect clarification received from OSEP in the December 2009 Transition FAQ document and the September 2011 *Federal Regulations* for Part C. Stakeholder input has been gathered from Part C and Part B staff as part of implementing clarification received from OSEP's Transition FAQ and will assist in revising the practice document.

An ongoing improvement activity for indicators 8A, 8B, and 8C that is completed annually involves a review of data regarding transition activities gathered by all of NC's LICCs. A statewide LICC reporting tool was developed in FFY 2007 that allows NC LICCs to report child find and transition activities. The tool provides LICCs a way to document their local efforts via a consistent method and reflect the degree of early intervention activities conducted across NC. The transition reporting tool captured the frequency of six listed transition activities:

1. Discussion(s) about specific local procedures for transition between the Early Intervention and Preschool/Exceptional Children programs as indicated by the state level interagency agreement
2. Assistance in the development or dissemination of a list of community resources and contacts for children who may not qualify for early intervention services
3. Assistance in the development or dissemination of a community list of resources and contacts for children enrolled in the Early Intervention and Preschool/Exceptional Children programs.
4. Information on local orientation program for new professionals with information on community programs, contacts, referral procedures, and transition practices
5. Information on local community forum(s) that address community transition issues and procedures between programs
6. Review of written program information for families on the transition process and provide input to the Early Intervention and Preschool/Exceptional Children programs

APR Template – Part C (4)

North Carolina
State

These LICC activities focus on transition for children and families across many different age groups and settings, not just the transition from the Part C program to the Part B program. For example, activities at the LICC may target any or all of the following five programs or entities where children with or at risk for developmental disabilities may transition:

1. Early Intervention
2. Preschool/Exceptional Children's Program
3. Other Community Agencies/Programs
4. Kindergarten Settings
5. Hospital Settings

The reporting tool also documented the number of events/activities conducted by LICC partners. FFY 2010 reflects the third full reporting year for the LICC transition activities. The submitted reports for FFY 2010 reflect the number of outreach activities. The following are noted from the reporting LICC's Transition Summary:

- Local efforts targeting the Early Intervention Program and Preschool/Exceptional Children's Program continue to be the most commonly reported populations for overall transition efforts
- Other Community Agencies/Programs (Child Service Coordination, Early Head Start/Head Start, Child Care Community, Smart Start programs, and More at Four programs) are also primary referral sources

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 for this indicator: 97.24%

| | |
|---|-----------|
| 1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010) | 10 |
| 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) | 10 |
| 3. Number of FFY 2009 findings <u>not</u> verified as corrected within one year [(1) minus (2)] | 0 |

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

| | |
|---|----------|
| 4. Number of FFY 2009 findings not timely corrected (same as the number from (3) above) | 0 |
| 5. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction") | 0 |
| 6. Number of FFY 2009 findings <u>not</u> verified as corrected [(4) minus (5)] | 0 |

Actions Taken if Noncompliance Not Corrected:

None. All noncompliance was corrected within the one-year timeline. The process utilized to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the transition planning requirement is being implemented in accordance with IDEA.

Verification of Correction of FFY 2009 noncompliance (either timely or subsequent):

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

There were nine CDSAs (ten findings) in corrective action issued in FFY 2009. These nine CDSAs received intensive monitoring. EI Branch Central Office staff together with individual CDSA staff members investigated the underlying reasons that contributed to the noncompliance. A corrective action process was developed for each CDSA matching strategies with the root causes of noncompliance. During the corrective action process, EI Branch Central Office staff monitored the status of each CDSA’s progress through the submission of record review data and a review of the implementation of efficient strategies. For these nine CDSAs correction of all noncompliance, regarding policies and procedures occurred less than one year from the finding being issued. In addition, all child specific noncompliance was corrected with transition conferences occurring as soon as possible unless the child was no longer within the jurisdiction of the NC EI Program. Verification of correction occurred through a process in which EI Branch Central Office staff monitored the status of each CDSA’s progress through reviewing the submission of record review data along with reviewing the implementation of efficient strategies. EI Branch Central Office staff analyzed the progress report information, held discussions with CDSA management, and verified record review data by reviewing records on site. Through this process EI Branch Central Office staff verified that these nine CDSAs have corrected noncompliance and are correctly implementing the specific regulatory requirements and have conducted a transition conference for each child potentially eligible for Part B, although late, unless the child is no longer within the jurisdiction of the CDSA/NC EI Program.

As a result of the FFY 2009 self-assessment, it was determined that one (1) CDSA in corrective action required focused monitoring of the statutory and regulatory requirements related to Indicator 8c Timely Transition Planning as part of their corrections. In FFY 2009, one (1) CDSA has been issued two (2) findings. The first finding was issued for one instance of noncompliance related to failure to invite the LEA to the transition conference and failure in making a referral to the LEA for Part B services. The second finding was issued for one instance of noncompliance related to the procedural safeguard of consent. The CDSA received a corrective action plan due to the noncompliance. EI Branch Central Office staff verified in January 2011 that the CDSA is correctly implementing the specific, related requirements.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

None. All noncompliance was corrected and verified in the previous year.

| | |
|---|----------|
| 1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator | 0 |
| 2. Number of remaining FFY 2008 findings the State has verified as corrected | 0 |
| 3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)] | 0 |

Verification of Correction of Remaining FFY 2008 findings:

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

None. All noncompliance was corrected and verified in the previous fiscal year.

APR Template – Part C (4)

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

None. All noncompliance was corrected and verified in the previous fiscal year.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

| Statement from the Response Table | State's Response |
|-----------------------------------|------------------|
| Not applicable | |

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

See detail on improvement activities in sub-indicator 8a.

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.

| FFY | Measurable and Rigorous Target |
|----------|--------------------------------|
| FFY 2010 | 100% |

Actual Target Data for FFY 2010:

100%

APR Template – Part C (4)

North Carolina
State

| Indicator/Indicator Clusters | General Supervision System Components | # of EIS Programs Issued Findings in FFY 2009 (7/1/09 through 6/30/10) | (a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 through 6/30/10)) | (b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification |
|---|--|--|---|--|
| 1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 11 | 17 | 17 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| 2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 0 | 0 | 0 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| 3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 0 | 0 | 0 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| 4. Percent of families participating in Part C who report that early intervention services have helped the family | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 0 | 0 | 0 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |

APR Template – Part C (4)

North Carolina
State

| Indicator/Indicator Clusters | General Supervision System Components | # of EIS Programs Issued Findings in FFY 2009 (7/1/09 through 6/30/10) | (a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 through 6/30/10)) | (b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification |
|--|--|--|---|--|
| 5. Percent of infants and toddlers birth to 1 with IFSPs | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 0 | 0 | 0 |
| 6. Percent of infants and toddlers birth to 3 with IFSPs | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| 7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 13 | 20 | 20 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| 8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A. IFSPs with transition steps and services; | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 1 | 1 | 1 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |

APR Template – Part C (4)

North Carolina
State

| Indicator/Indicator Clusters | General Supervision System Components | # of EIS Programs Issued Findings in FFY 2009 (7/1/09 through 6/30/10) | (a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 through 6/30/10)) | (b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification |
|---|--|--|---|--|
| 8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: B. Notification to LEA, if child potentially eligible for Part B; and | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 3 | 3 | 3 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| 8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: C. Transition conference, if child potentially eligible for Part B. | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 9 | 10 | 10 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| OTHER AREAS OF NONCOMPLIANCE: Surrogate Parent | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 1 | 1 | 1 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |

APR Template – Part C (4)

North Carolina
State

| Indicator/Indicator Clusters | General Supervision System Components | # of EIS Programs Issued Findings in FFY 2009 (7/1/09 through 6/30/10) | (a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 through 6/30/10)) | (b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification |
|--|--|--|---|--|
| OTHER AREAS OF NONCOMPLIANCE: Related Requirements re: Indicator 8C Transition Conference | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 1 | 2 | 2 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| OTHER AREAS OF NONCOMPLIANCE: | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other | 0 | 0 | 0 |
| | Dispute Resolution: Complaints, Hearings | 0 | 0 | 0 |
| Sum the numbers down Column a and Column b | | | 54 | 54 |
| Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100. | | | 54 / 54 X 100 = | 100.00% |

Describe the process for selecting EIS programs for Monitoring:

All CDSAs (local lead agencies) received monitoring activities this year. These monitoring activities included: on-site focused visits, self-assessment data submission/analysis, data verification and/or desk review/data review. CDSAs that are in corrective action planning receive more intensive monitoring and technical assistance and have more data verification and data collection requirements than CDSAs in which no noncompliance findings were issued.

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

Indicator 1 – Did not meet target of 100%, but very high levels of compliance are noted. For FY 2010-2011, North Carolina has reported 98.68% compliance, as compared to 95.98% for FY 2009-2010.

Indicator 2- Target met. The statewide percentage is 98.0%

Indicator 3- Did not meet targets for all Summary 1 Statements; met and exceeded targets for all Summary 2 Statements. Continued work with technical assistance partners regarding child outcomes. See Indicator for details regarding improvement activities.

Indicator 4- Did not meet target. The EI Program selected this Indicator as the “Results” topic as a component of the program’s recent Continuous Improvement Visit with OSEP and other stakeholders. See Indicator for details regarding improvement activities.

Indicator 5- Did not meet target. Minimal slippage is noted from 1.04% in FY 2009 to 1.01% in FY 2010.

Indicator 6- Target met at 2.62%, representing improvement over last year's reported data of 2.48%.

Indicator 7- Did not meet target of 100%, but very high levels of compliance are noted. For FY 2010-2011, North Carolina has reported 99.77% compliance, as compared to 94.6% for FY 2009-2010.

Indicator 8a- Met target of 100%.

Indicator 8b- Did not meet target of 100%, but very high levels of compliance are noted. For FY 2010-2011, North Carolina has reported 99.81% compliance, as compared to 99.47% for FY 2009-2010.

Indicator 8c- Did not meet target of 100%, but very high levels of compliance are noted. For FY 2010-2011, North Carolina has reported 95.24% compliance, as compared to 97.24% for FY 2009-2010. While these data represent a slight slippage in performance, there remains a strong rate of compliance for this indicator across the two years.

Indicator 9 - Met target of 100%.

Indicator 10- Met target of 100%.

Indicator 11- Did not meet target of 100%. The state lead agency received a due process hearing request, which was fully adjudicated, although not within the specified timeline.

Indicator 12 - Not applicable to North Carolina as Part C due process procedures are used.

Indicator 13- Met target of 100%.

Indicator 14- Met target of 100%.

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

| | |
|---|-----------|
| 7. 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) | 54 |
| 8. 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) | 54 |
| 9. Number of findings <u>not</u> 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:

| | |
|--|----------|
| 10. Number of FFY 2009 findings not timely corrected (same as the number from (3) above) | 0 |
| 11. Number of FFY 2009 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”) | 0 |
| 12. Number of FFY 2009 findings <u>not</u> yet verified as corrected [(4) minus (5)] | 0 |

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

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):

In FY 2009, there were a total of fifty-four (54) findings of noncompliance identified in thirteen (13) CDSAs. All findings of noncompliance were corrected within one year of identification. The Early Intervention Program verified that each CDSA with findings of noncompliance identified in FY 2009 was correctly implementing the specific regulatory requirements, (i.e., achieved 100% compliance) based on a review of updated data. This subsequent data was collected through on-site monitoring or desk audits. The Early Intervention Program also verified that each CDSA had corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the CDSA, consistent with OSEP Memo 09-02, dated October 17, 2008.

The North Carolina Early Intervention Program’s general supervision system continues to essentially function as previously described to OSEP. The program has implemented a new data system, named the “Health Information System”. This system currently is not fully operational for the purposes of monitoring; therefore child record review is the primary method for verifying the correction of noncompliance.

CDSAs are required to complete child record review self-assessments annually. The EI Branch Central office collects self-assessment data at designated points and times each year for indicators 1, 8a, 8b, and 8c as these data are not collected in the program’s data system. These data are either collected based on a month or quarter. In order to continue to improve compliance in timeliness of services (Indicator 1), the Central Office provides each CDSA with the names of all children enrolled in the program who had a new service added to their IFSP (newly enrolled children and children already receiving services) during a

given month. In order to maintain compliance with transition indicators (Indicator 8 sub-components), the Central Office provides the CDSAs with the names of all children who should have had a transition planning conference as of a specific date. Data are also collected to assure that: 1) there was a transition plan with steps and services in place; and 2) if a child was potentially eligible for preschool services, the LEA was notified. Data and a data analysis report are submitted by each CDSA to the EI Branch Central office with reasons why any timeline is not being met and any unique data related to specifics regarding each individual child. Data verification occurs by the EI Branch Central office staff through an on-site verification visit.

If a finding is issued, the CDSA receives a written notification of the finding and a written corrective action plan within 30 days. Corrective Action Plans (CAPs) are issued when there is noncompliance and a finding is noted. Corrective action plans include strategies and required evidence of change. These CAPs are written by the EI Branch Central Office staff in collaboration with the CDSAs. Required reporting occurs until noncompliance is corrected. The EI Branch verifies data throughout the CAP process to ensure the local program is correctly implementing the regulatory requirements of IDEA, correcting any child specific instances (although late), unless the child is not enrolled in the NC EI Program and that the root cause of noncompliance has been addressed.

As a result of FFY 2010 formal complaint investigations, two (2) CDSAs were issued three (3) findings during FFY 2010. Two (2) findings were related to written prior notice and one (1) finding was related to service delivery.

The CDSAs have an opportunity to correct noncompliance prior to the issuance of a written notification of a finding. The CDSA must provide updated data that demonstrates 1) CDSA is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data and 2) CDSA 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. The EI Branch Central office staff verifies (through record reviews) that correction has occurred for both of these steps.

Improvement plans may be issued during monitoring activities. Improvement plans are generally related to performance and include measurable benchmarks over time. Improvement plan strategies and activities are written by the CDSA in partnership with or with direct guidance from the Early Intervention Branch Central Office.

Throughout the year, activities are completed by the EI Branch Central Office to verify the reliability, accuracy and timeliness of data reported by the CDSAs. Several methods for data verification are utilized, such as error reports, routine data reports, data reports summarizing contract performance and on-site data verification visits. Point in time data are routinely provided to CDSAs to ensure reliable, valid data for 619 data reporting.

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 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 = $[(1.1(b) + 1.1(c)) \text{ divided by } 1.1]$ times 100.

| FFY | Measurable and Rigorous Target |
|------|--------------------------------|
| 2010 | 100% |

Actual Target Data for FFY 2010:

The State lead agency received four (4) written complaints in FFY 2010. Two (2) complaints had reports issued within the specified timeline, and therefore actual percentage of compliance was 100%. The other two (2) signed, written complaints were withdrawn or dismissed.

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

Not Applicable

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

Not Applicable

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

Overview of the Annual Performance Report Development:

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 | 100% |

Actual Target Data for FFY 2010:

The state lead agency received a due process hearing request, which was fully adjudicated, although not within the specified timeline. Therefore, actual percentage data for FFY 2010 is 0%.

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

Not applicable.

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

Not applicable.

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

Overview of the Annual Performance Report Development:

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 | Not Applicable |

Actual Target Data for FFY 2010:

Not applicable to North Carolina as Part C due procedures are used.

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

Not applicable

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

Not applicable

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

Overview of the Annual Performance Report Development:

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 | 100% |

Actual Target Data for FFY 2010:

The lead agency received two (2) requests for mediation, both resulting in a mediation agreement.

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

Not Applicable

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

Not Applicable

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

Overview of the Annual Performance Report Development:

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 |
|----------|--------------------------------|
| FFY 2010 | 100% |

Actual Target Data for FFY 2010:

| 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 (5 pts for submission of APR/SPP by February 1, 2011) | | 5 |
| | Grand Total | | 33 |

| Indicator 14 - 618 Data | | | | | |
|--|--------|---------------|---|---------------------------------|-------|
| 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 – Settings Due Date: 2/1/11 | 1 | 1 | 1 | 1 | 4 |
| Table 3 – Exiting Due Date: 11/1/11 | 1 | 1 | 1 | NA | 3 |
| Table 4 – Dispute Resolution Due Date: 11/1/11 | 1 | 1 | 1 | N/A | 3 |
| | | | | Subtotal | 14 |
| | | | Weighted Total (subtotal X 2.5; round ≤ .49 down and ≥ .50 up to whole number) | | 35 |
| Indicator # 14 Calculation | | | | | |
| | | | A. APR Total | 33 | |
| | | | B. 618 Total | 35 | |
| | | | C. Grand Total | 68 | |
| Percent of timely and accurate data = (C divided by 68 times 100) | | | (C) / (68) X 100 = | | 100% |

EI Branch Central Office staff reviewed the results of the self-assessment data submitted to the state office regarding the compliance indicators. The CDSA was contacted if any clarification was needed on the reported results. This ensured that the data were reported accurately and consistently across CDSAs.

EI Branch Central Office staff worked with CDSA staff to ensure that their data in HIS, the database used for 618 reporting, was kept accurate through periodic data-cleaning activities. Focused technical assistance was provided as needed.

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

Continued very high compliance is present for this indicator. Development has continued on the Health Information System (HIS), implemented in the North Carolina Department of Health and Human Services as of July 1, 2010. The core product is being implemented for the Division of Public Health, of which the North Carolina Part C program is a part. HIS is collecting client specific data needed for reporting 618 data as well as data for the compliance indicators in the APR; reporting mechanisms are planned.

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

During FFY 2011, as continuous improvement activities, Early Intervention Central Office staff will use the Client Services Data Warehouse (CSDW) to develop report queries. These report queries can then be used to audit data entry errors and to improve overall data integrity by CDSAs.