

ANNUAL PERFORMANCE REPORT FOR NORTH CAROLINA 2008

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In this Annual Performance Report (APR), North Carolina's Early Intervention Program will describe specifics on progress and slippage on all required indicators previously described in the State Performance Plan (SPP).

North Carolina's early intervention program is organizationally located in the North Carolina Department of Health and Human Services, in the Division of Public Health. Within the Women's and Children's Health Section of the Division of Public Health, the Early Intervention Branch manages the program on a statewide level, and its eighteen (18) employed and contracted Children's Developmental Services Agencies (CDSAs) manage the program on a local level.

The North Carolina Early Intervention Program will describe the state's continued approach to its general supervision system, as well as statewide efforts that will continue to improve results for eligible infants, toddlers and their families. The program has continued to face challenges in meeting its child find (birth to one) and family outcomes targets, although progress was made based upon implementation of improvement strategies.

The North Carolina Early Intervention Program continues to obtain broad input from several different stakeholder groups throughout the year, as was done with the SPP, and for this year's APR. These stakeholder groups include the North Carolina Interagency Coordinating Council, the Division of Public Health Women's and Children's Health Section Family Advisory Council, and the Commission for Children with Special Health Care Needs.

When the APR is approved by OSEP, the North Carolina Early Intervention Program will disseminate the report to stakeholders through the local lead agencies and post it on the program's website (www.ncei.org/publications). Consistent with OSEP guidance for Indicator 3, targets were established this year, baseline data provided as well as improvement activities. Program specific data (with the exception of Indicators 4) are included in the APR; therefore once posted the state will meet the requirements of public reporting of data. Program specific data is not included in Indicator 4 due to small numbers for which data were not statistically relevant to disaggregate by each local program.

Part C State Annual Performance Report (APR) for 2008-2009

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
2008-2009	100%

Actual Target Data for 2008-2009: Five hundred twelve (512) children received their services in a timely manner. Eighty (80) children did not receive their services in a timely manner due to documented exceptional family circumstances. Therefore, five hundred ninety two (592) out of six hundred nine (609) children (97.21%) met the timely services indicator.

CDSA	2008-2009
Asheville	100%
Blue Ridge ^{^*}	89.29%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City [^]	92.86%
Greensboro ^{^*}	96.67%
Greenville ^{^*}	96.30%
New Bern ^{^*}	96.77%
Raleigh ^{^*}	96.67%
Rocky Mount [^]	92.00%
Shelby	100%
Smokies [^]	72.73%
Winston-Salem [^]	97.73%
Total	97.21%

Compliance by the Children’s Developmental Services Agencies (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 IFSP in January 2009. The self assessment record review included newly referred children and children already enrolled in the program. Six hundred nine (609) records of children were reviewed for timeliness of initial and subsequent service initiation. Eighty-four percent (n = 512) of children received their services in a timely manner. Thirteen percent (n = 80) of children did not receive all their services in a timely manner due to documented exceptional family circumstances. About three percent (n =17) 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 physical therapy providers, lack of bilingual speech providers, and failure to follow policies and procedures.

Identification of Noncompliance in FFY 2008-2009

Record review data indicate five (5) CDSAs achieved 100% compliance (including documented family exceptional circumstances). Nine (9) CDSAs (denoted in chart with ^) have been issued finding(s) 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). From the time of monitoring, five (5) CDSAs (denoted in chart with *) have since corrected findings of noncompliance. The EI Branch Central Office staff verified the correction of child-specific noncompliance and reviewed current data verifying that the timely services requirement was being implemented in accordance with IDEA. The remaining four (4) CDSAs are being monitored following the process outlined in the “Verification of Correction” section.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009:

The progress from 93% (FY 2007-2008) to 97% (FY 2008-2009) has continued as expected. This progress can be attributed to the following improvement activities: direct service staff hired at the local CDSAs provide services when a community provider is not available; streamlined local processes initiate timely services and focused technical assistance with each CDSA. Challenges have continued in providing services in a timely manner due to the lack of appropriately qualified community-based providers, particularly in very rural areas of the State. When there are no appropriately qualified community-based providers, the CDSA staff must provide the service themselves. We expect that this challenge will continue, therefore we initiated the exploration of new service delivery models in order to improve and have greater access to community-based providers. We plan to continue to explore evidence based service delivery models, including the primary service provider model to address long term compliance.

Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2007 for this indicator: 93%

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	6
2. Number of FFY 2007 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	5
3. Number of FFY 2007 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2007 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
6. Number of FFY 2007 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

For FFY 2007 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

None necessary.

Verification of Correction (either timely or subsequent):

For those findings for which the State has reported correction, describe the process the State used to verify that the EIS program: (1) is correctly implementing the specific regulatory requirements; and (2) has provided the required services, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02.

There were six CDSAs in corrective action issued in FY 2007-2008. These CDSAs received intensive monitoring with five out of the six CDSAs correcting their noncompliance within one year of the finding being issued. The EI Branch Central Office staff verified 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.

There was one CDSA that 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 obtaining service orders from families' insurance companies to access qualified community-based providers and staff shortages preventing the CDSA's ability to provide the services themselves. In October 2009, the EI Branch Central Office staff determined that the CDSA corrected noncompliance within sixteen months from notification of the finding being issued. The EI Branch Central Office staff verified 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 North Carolina Early Intervention Program has put a system in place 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 current data verifying that the timely services requirement is being implemented in accordance with IDEA.

The North Carolina Early Intervention Program continues to address how to sustain correction of noncompliance across the state.

Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable):

For FFY 2006 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

1. Number of remaining FFY 2006 findings of noncompliance noted in OSEP’s June 1, 2009, FFY 2007 APR response table for this indicator	0
2. Number of remaining FFY 2006 findings the State has verified as corrected	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	0

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable):

Provide information for FFY 2006 regarding correction of any remaining findings of noncompliance from FFY 2005 or earlier using the same format provided above.

None necessary.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009:

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 integrate and implement a new service delivery model into the program’s existing service delivery system.

OUTCOME: Improve access to appropriately qualified providers

IMPROVEMENT ACTIVITIES	TIMELINE	RESOURCES
<p>1. Review of current service delivery system</p> <ul style="list-style-type: none"> a. review current policies and procedures to examine any barriers to accessing providers b. review current roles/ responsibilities of CDSA staff c. assess reimbursement system 	<p>December 2009- June 2010 (for a, b, and c)</p>	<p>(for a, b, and c) Mid-South, NECTAC and DAC OSEP Stakeholders (internal & external) Evidence – based practice documents</p>

<p>2. Exploration of new service delivery models</p> <ul style="list-style-type: none"> a. receive technical assistance on the primary service provider model and similar models b. develop a work plan that outlines activities, timelines and resources towards implementation of the primary service provider model 	<p>November 2009-June 2010</p>	<p>Mid-South, NECTAC, and DAC Other Part C Programs Stakeholders (internal & external) Evidence – based practice documents/presentations</p>
<p>3. Initiate steps toward implementation of new service delivery model</p>	<p>March 2010-June 2011</p>	<p>Mid-South, NECTAC and DAC Stakeholders (internal & external)</p>

In 2008-2009, this plan addressed exploration of new service delivery models (working with other states, researchers, reviewing literature, stakeholder input and consultation/technical assistance from NECTAC). In 2009-2010, the program will concentrate on involving stakeholders in short and long range strategies and create a systematic work plan with steps toward implementation of the primary service provider model.

Part C State Annual Performance Report (APR) for 2008-2009

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
2008-2009	97.0%

Actual Target Data for 2008-2009: $9199 \div 9290 = 99.0\%$

CDSA	Dec 1, 2008 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	342	342	100.0%
Blue Ridge	230	229	99.6%
Charlotte	899	898	99.9%
Concord	691	690	99.9%
Durham	584	582	99.7%
Elizabeth City	200	200	100.0%
Fayetteville	575	575	100.0%
Greensboro	807	795	98.5%
Greenville	529	519	98.1%
Morganton	318	317	99.7%
New Bern	370	370	100.0%
Raleigh	1029	1024	99.5%
Rocky Mount	506	505	99.8%
Sandhills	461	426	92.4%
Shelby	474	457	96.4%
Smokies	244	242	99.2%
Wilmington	334	331	99.1%
Winston-Salem	697	697	100.0%
North Carolina	9290	9199	99.0%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009:

The above table shows that the percentage of children receiving services at home or in other natural environments is 99%. The data from FY 2008-2009 documents that the target was met and exceeded (by 2.0%) for this indicator in North Carolina. The State will continue to monitor local programs through the State's data verification process 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 2008-2009:

None necessary

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan 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 2008-2009 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.

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 Early Intervention 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, there is no standard tool that is required for usage across our 18 CDSAs. 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 local 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 data base. Monthly data cleaning activities are conducted and include audits for "impossible" rating combinations and missing data elements.

In July 2006, the NC EI Program's eligibility criteria were changed: "at risk" categories were no longer used for newly referred children. Therefore, children who were referred and/or enrolled in the program prior to that time were possibly "at risk." For this APR, child outcomes progress data is presented for children exiting the program excluding "at risk"; and separate tables are presented for "at risk" children. As of FY 2009-2010 however, we will no longer be reporting data for "at risk" children as they will have all aged-out of NC's EI Program.

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.

Actual Target Data for (2008-2009): N/A. FFY 2008-2009 is the baseline year.

Progress Data for Infants and Toddlers Exiting 2008-2009 (Excluding “At Risk”)

A. Positive social-emotional skills (including social relationships):	# of children	% of children
a. Percent of infants and toddlers who did not improve functioning	44	1.0%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	823	18.6%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	949	21.4%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1387	31.3%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1227	27.7%
Total	N= 4430	100%

B. Acquisition and use of knowledge and skills (including early language/communication):	# of children	% of children
a. Percent of infants and toddlers who did not improve functioning	32	0.7%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	789	17.8%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	1374	31.0%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1810	40.9%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	425	9.6%
Total	N= 4430	100%

C. Use of appropriate behaviors to meet their needs:	# of children	% of children
a. Percent of infants and toddlers who did not improve functioning	32	0.7%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	826	18.6%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	1038	23.4%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1930	43.6%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	604	13.6%
Total	N= 4430	100%

Progress Data for “At Risk” Infants and Toddlers Exiting 2008-2009

A. Positive social-emotional skills (including social relationships):	# of children	% of children
a. Percent of infants and toddlers who did not improve functioning	1	4.2%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3	12.5%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	3	12.5%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	11	45.8%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	6	25.0%
Total	N= 24	100%

B. Acquisition and use of knowledge and skills (including early language/communication):	# of children	% of children
a. Percent of infants and toddlers who did not improve functioning	1	4.2%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3	12.5%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	3	12.5%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	11	45.8%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	6	25.0%
Total	N= 24	100%

C. Use of appropriate behaviors to meet their needs:	# of children	% of children
a. Percent of infants and toddlers who did not improve functioning	1	4.2%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	4	16.7%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	2	8.3%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	10	41.7%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	7	29.2%
Total	N= 24	100%

Baseline Data for Infants and Toddlers Exiting 2008-2009 (Excluding “At Risk”)

Summary Statements	% of children
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	72.9%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	59.0%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	79.5%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	50.5%
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	77.6%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	57.2%

Discussion of Baseline Data for 2008-2009:

In summary across all three developmental areas, the results of summary statement 1 are 10+ percentage points higher than the summary statement 2 results. This finding is consistent with our general expectation of performance across the two measurement areas as summary statement 1 measures growth while summary statement 2 measures the attainment of age appropriate behavior. Of those children who enter the program below age expectation, they are more likely to improve functioning in outcome B, followed by C and then outcome A. It is difficult to say why this trend is observed but it is one we will continue to monitor. The lower performance on “positive-social emotional skills” could be a factor of the age cohort that the NC EI Program serves. At any rate, the data overall looks very similar to the distribution of data from previous years. This trend gives us some degree of confidence in the reliability of the data.

Setting Measurable and Rigorous Targets for Child Outcomes:

Consistent with OSEP guidance, the NC EI Program has developed targets by summary statement for the three child outcomes areas. The process used to develop these targets came from child outcomes progress data collected for FY 2006-2007, FY 2007-2008 and 2008-2009. Please note that FY 2006-2007 was the initial year of child outcomes data collection and reflected an N size of 311 children.

We went back to previous fiscal years to calculate the summary statements for these periods since summary statements were only issued last year by OSEP. We then took state averages for the three years of data to assess the figures and the trends.

Measurable and Rigorous Target				
		<i>Positive social-emotional skills</i>	<i>Acquisition and use of knowledge and skills</i>	<i>Use of appropriate behaviors to meet their needs</i>
<i>FFY 2009 (2009-2010)</i>	<i>Summary Statement I</i>	<i>71.2%</i>	<i>76.4%</i>	<i>75.2%</i>
	<i>Summary Statement II</i>	<i>57.9%</i>	<i>49.6%</i>	<i>56.0%</i>
<i>FFY 2010 (2010-2011)</i>	<i>Summary Statement I</i>	<i>73.5%</i>	<i>80%</i>	<i>78%</i>
	<i>Summary Statement II</i>	<i>59.6%</i>	<i>51.1%</i>	<i>57.8%</i>

Measurable and Rigorous Targets for FY 2009-2010

As our program is no longer serving “at risk” children (as of July 1, 2009), we anticipate that our program will be serving fewer children in the “e” category across all three developmental areas. As a result, FY 2009-2010 targets represent a decrease over the baseline year due to the anticipated impact that the exclusion of “at risk” children will have on our numbers in the future.

For summary statement 1, FY 2006-2007 data was consistently close to the three-year average, falling midway between FY 2007-2008 and FY 2008-2009 data. Viewing these data trends and projecting a similar rate of performance, we used the three-year average as the target for this summary statement.

For summary statement 2, FY 2006-2007 averages tended to skew the data upward, indicating higher achievement than in the ensuing years. During FY 2006-2007, the NC EI Program was rolling out child outcomes data collection on a phase-in basis. Also, OSEP was clarifying the guidance and methods to be used for data collection. As a result, we determined that summary statement 2 data for this period may not accurately reflect statewide performance. We omitted this year’s data from the analysis in determining targets for FY 2009-2010.

Measurable and Rigorous Targets for FY 2010-2011

For FY 2010-2011 in all instances, we placed targets at 0.5 points above the baseline year figures. The justification used was based on the assumption that: 1) we would have no major statewide programmatic shifts in our program during FY 2010-2011 that would impact our performance on child outcomes; and that 2) growth trends which were less than or equal to trends observed between FY 2007-2008 and FY 2008-2009 were reasonable. During this period, we will continue our ongoing monthly data quality checks and will have instituted a system for child outcomes data verification to maintain the data quality of this indicator.

These targets were shared with our stakeholders for discussion between August-September 2009. They were also presented to the ICC for input in October 2009.

Improvement Activities/Timelines/Resources

Overall, our improvement activities have been in line with the plan outlined in our SPP. As stated in our SPP for FY 2008-2009, the NC EI Program partnered with the ECO Center to develop technical assistance tools to strengthen local capacity for reporting valid and reliable child outcomes data to develop child outcomes training modules for local personnel development activities. These training modules were rolled out via webinar sessions that took place during May-June 2009. The module topics include: Professional Development for New Staff and COSF Refresher, Quality Assurance, and Data Analysis and Use. Each module comes with associated training materials, discussion notes, handouts, pop-quizzes, interactive activities, and supplemental resources. CDSAs use the modules for staff professional development as needed.

While we will continue to target efforts around data accuracy and reliability, we will also focus our efforts on developing meaningful strategies to improve child outcomes. In 2009-2010, the NC EI Program will also be targeting efforts to develop technical assistance activities for CDSAs who “need assistance” as a result of their performance on the child outcomes indicator.

Part C State Annual Performance Report (APR) for 2008-2009

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
2006 (2006-2007)	See Table On Next Page
2007 (2007-2008)	See Table On Next Page
2008 (2008-2009)	See Table On Next Page
2009 (2009-2010)	See Table On Next Page
2010 (2010-2011)	See Table On Next Page

Indicator	Target Goals			Actual Results		
4. Percent of families participating in Part C who report that early intervention services have helped the family to:				NCSEAM Survey		
a) know their rights	<u>2006</u> 89%	<u>2007</u> 90%	<u>2008</u> 90%	<u>2006</u> 70%	<u>2007</u> 69%	<u>2008</u> 74%
b) effectively communicate their children’s needs; and	<u>2006</u> 83%	<u>2007</u> 84%	<u>2008</u> 85%	<u>2006</u> 69%	<u>2007</u> 67%	<u>2008</u> 70%
c) help their children develop and learn	<u>2006</u> 89%	<u>2007</u> 90%	<u>2008</u> 91%	<u>2006</u> 80%	<u>2007</u> 78%	<u>2008</u> 83%

Actual Target Data for FFY 2008:

For FFY 2008, 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 **4476** 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 (9290) minus children who had not been enrolled at least six months (4814).

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” and “Impact of Early Intervention Services on Your Family.”

Of the 4476 surveys mailed, 991 were returned, 943 with measurable data needed for reporting the SPP/APR indicators 4a, 4b, and 4c. The effective response rate was 21.1%. Individual survey items overall agreement percentages are then associated with a 6.1% margin of error, at a 95% confidence level, for an item with a 50-50 agree-disagree rate. The data have met or exceeded the NCSEAM 2005 National Item Validation Study’s standards for the internal consistency, completeness, and overall quality expected from this survey.

Survey Data by Race/Ethnicity

Data	Source	N	Am Ind.	Asian/ Pac. Is	Black	Hispanic	White	Other
EI Headcount	12/1/08 data	9290	1% (107)	2% (143)	26% (2390)	16% (1614)	55% (4503)	<1% (64)
Target Group	Total surveys distributed	4476	1% (46)	2% (89)	27% (1209)	16% (716)	53% (2372)	1% (44)
Respondent Pool	Total surveys returned	991	1% (12)	1% (13)	20% (196)	12% (121)	65% (645)	<1% (4)

The following table provides a summary of North Carolina’s target goals and actual survey results for FFY 2008.

Indicator	FFY 2008 NCSEAM Survey	Target Goals FFY 2008	Actual Results FFY 2008
4: Percent of families participating in Part C who report that early intervention services have helped the family to:	NCSEAM Family Survey – Early Intervention		
a) know their rights;	a) 74%= 698 of 943 families <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>	a) 90%	a) 74%
b) effectively communicate their children’s needs; and	b) 70%= 660 of 943 families <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>	b) 85%	b) 70%
c) help their children develop and learn	c) 83%= 783 of 943 families <i>Over the past year, Early Intervention services have helped me and/or my family understand my child’s special needs.</i>	c) 91%	c) 83%

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

Completed Improvement Activities

As outlined in the FFY 2007 APR, NC proposed several major improvement activities for FFY 2008. First, the survey was distributed to families currently enrolled versus families who were exiting the program. This change was made based upon the belief that family participation would increase because families would be actively receiving services.

Secondly, service coordinators informed families about the nature and importance of the surveys as well as ensured that families received surveys in their primary language. If the family needed the survey presented verbally, interpreted, or presented via another mode of communication, the service coordinator was responsible for securing this assistance.

Training and technical assistance by EI Branch Central Office staff to support the collection, reporting and use of family outcome data occurred in early spring 2009. Multiple modalities (face-to-face sessions and conference calls) were used for program administrators and service coordinators. This training and technical assistance described the purpose of the data collection and the importance of supporting families in completing the survey. Sample scripts for use in contacting families were provided.

Survey distribution (via mail), data entry and analysis continued in FFY 2008 through a contract with Avatar International LLC. A detailed report was received from Avatar to validate the numbers of families returning surveys, the demographics of the families completing the surveys, and the rating for each of the three family outcome indicators. The number and demographics of families responding was compared to the total number and demographics of children who were enrolled in services for at least six months as of December 1, 2008 and the total number and demographics of all families receiving the survey. This comparison ensured appropriate implementation and application of the data collection requirement (see Survey Results section above).

CDSAs received a program-specific report on the survey results for FFY 2006 and 2007. Technical assistance was provided to each local program on how to use the results in 1) staff training on family-centered service delivery, 2) updating local procedures related to working with families, and 3) involving families in local evaluation efforts.

Lastly, focused efforts were made to follow up with families of minority populations in order to increase the return rate. A pilot project involving phone calls made from two CDSAs (one rural and one urban) provided valuable feedback from families about the survey process. Families in the pilot programs reported that receiving a follow up reminder phone call helped them remember to return the survey.

Explanation of Progress or Slippage

Implementation of these improvement activities resulted in essentially no change in the return rate of surveys (21.1%) but a slight increase in the ratings given by families (see results table above).

This information was presented to the Child and Family Outcomes Subcommittee of the North Carolina ICC which serves as the primary stakeholder group for this indicator of the SPP. Based upon previous recommendations of that stakeholder group and our experience across three years of survey distribution, we plan to continue the following improvement activities based upon the belief that these strategies will eventually result in a larger return rate and improved ratings from families.

Revisions, with Justification, Improvement Activities / Timelines / Resources for FFY 2009

- 1) For FFY 2009, NC will continue its survey distribution timeframe to include all enrolled families (as of December 1, 2009) who are receiving services for at least six months. We believe this will increase family participation in completing surveys because families will be actively receiving services.
- 2) In FFY 2009, NC will continue to contract with Avatar International LLC to mail surveys to enrolled families and receive completed surveys by return mail. In addition, NC will utilize service coordinators to hand-deliver written announcements to families to alert them to the survey's arrival date. Contract providers of services will also be asked to hand-deliver announcements to families during regular service delivery contacts. This method will not require additional contacts as all families will be actively receiving services. Other community agencies will be made aware of the survey distribution date and requested to encourage and support families in completing the survey.
- 3) In FFY 2009, NC will continue to focus on increasing the return rate of surveys (see strategies 1 & 2 above). Follow-up contacts will be made with minority families (primarily Black and Hispanic) to offer support in completing/returning the survey.
- 4) All CDSAs will receive a program-specific report on the survey results for FFY 2009. Technical assistance will be provided to each local program on how to use the results in 1) staff training on family-centered service delivery, 2) updating local procedures related to working with families, and 3) involving families in local evaluation efforts.

Part C State Annual Performance Report (APR) for 2008-2009

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
2008-2009	1.10%

Actual Target Data for 2008-2009: There were 1276 children aged birth (0) to 1 year enrolled in the North Carolina Infant and Toddler Program on December 1, 2008. On December 1, 2008, the state population for this group was 129, 951. The actual percentage is 0.95%.

CDSA	Children Aged Birth (0) to 1	Population Aged Birth (0) to 1	Percent of Population Aged Birth (0) to 1
Asheville	46	4,507	1.02%
Blue Ridge	38	2,120	1.79%
Charlotte	163	14,742	1.11%
Concord	94	9,928	0.95%
Durham	86	9,268	0.93%
Elizabeth City	21	2,321	0.90%
Fayetteville	62	9,185	0.68%
Greensboro	91	11,438	0.80%
Greenville	75	5,497	1.36%
Morganton	40	4,929	0.81%
New Bern	48	6,891	0.70%
Raleigh	142	13,352	1.06%
Rocky Mount	75	6,630	1.13%
Sandhills	56	6,305	0.89%
Shelby	73	5,769	1.27%
Smokies	35	1,990	1.76%
Wilmington	49	5,784	0.85%
Winston-Salem	82	9,295	0.88%
North Carolina (state demographer data)	1276	129,951	0.98%
North Carolina (US Census Bureau data)		134,248	0.95%
National			1.04%

This table provides the birth (0) to 1 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.

We have included the data as reported by the NC state demographer as well as the data from the US Census Bureau for comparative purposes. The state demographer data is also used because it is the population used in North Carolina public health publications. The difference in population numbers creates a difference in the percentages.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009:

North Carolina’s current data shows a significant increase in both the percentage and number of children ages birth to 1 year enrolled in and served by the EI program from 2007-2008 (0.89% or 1166 children) to FY 2008-2009 (.95% or 1276 children)². It is noteworthy that children receiving early intervention services on military bases are counted in NC’s total population of birth to 1 year old children; however these children are not actually served by the state’s program. There were 14 children ages birth to 1 on the December 1 Headcount data for the two military installations in North Carolina; these 14 children reside in the Fayetteville and New Bern CDSA service delivery areas. Their services are provided by Educational and Developmental Intervention Services (EDIS), which is the military program that provides Part C Early Intervention Services to children in families living on military bases.

Progress may be attributed to several improvement activities. North Carolina implemented a focused monitoring process implemented for FY 2007-2008. Quality improvement Central Office staff identified common trends in each CDSA and continue to provide technical assistance to increase the number of children birth to 1 year enrolled in early intervention services.

In addition, the North Carolina Interagency Coordinating Council (NC-ICC) implemented a statewide Local Interagency Coordinating Council (LICC) reporting tool that was developed in FY 2007-2008. This tool allows North Carolina LICCs to report child find activities and provides LICCs a method to consistently document their local efforts. Fiscal Year 2008-09 reflects the first full reporting year for the LICC Child Find and Transition Activities. While the submitted reports show improvements in reporting methods as compared to previous LICC reporting efforts, efforts are being made to further streamline and improve the process and overall accuracy. The 2008-09 annual LICC report reflects the percent of reporting LICCs that indicated they conducted at least one event/activity from July 2008 – June 2009. 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	FY07-08	FY08-09
Physicians & Medical Community	61%	78%
Parent/Family Caregiver	67%	74%
Child Care Programs	39%	58%
Public Health Department	53%	49%
Hospital(s)	46%	43%
Other: Libraries, WIC programs, More At Four, YMCA, area college ECE students	41%	43%
Department of Social Services	56%	39%
Child Care Resource & Referral Agency	37%	36%
Partnerships for Children/ Smart Start	36%	36%
Early Head Start & Head Start	30%	36%
Mental Health Agency/Provider	29%	32%
Domestic Violence Shelters & Agencies	21%	16%
Homeless Family Shelters	11%	8%
Even Start	6%	5%

² Percentages are based on US Census Bureau Data.

Several key improvements should be noted from the information provided in the table above:

- Reporting LICCs noted a marked increase in outreach activities targeting Physicians/Medical Community (78% verses 61%) and Parents/Caregivers (74% verses 67%)
- Child care programs were identified as the target referral population with the most significant increase of LICCs reporting outreach activities from 39% to 58%
- Outreach activities targeting Early Head Start/Head Start increased form 30% to 36% as did Mental Health Agency/provider from 29% to 32%

Other, state level, improvement activities include:

- **Monthly headcount data** continues to be shared with each CDSA. This data identifies 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.
- **Successful improvement strategies** from CDSAs with high percentages and/or improved percentages were compiled and shared with all CDSAs. CDSAs were encouraged to implement relevant strategies to improve their child find efforts.
- **“Contributing Factors”** studies regarding their birth to one percentage and child find activities were conducted by some CDSAs. These local, internal studies not only increased awareness, but also had an impact on improving the participating CDSAs percentages.
- A **Public awareness campaign** (“The earlier you know, the better they’ll grow”) has been employed at the state level. The first phase in this campaign was to develop and distribute a brochure regarding NC’s EI Program, specifically outlining developmental milestones for children, birth to 1-year-old.
- A **Child Find Toolkit** has been developed and reviewed with internal stakeholders. Central Office staff have used components of this toolkit to provide technical assistance to CDSAs as needed and/or requested.

Although the proposed target has not been achieved, progress has occurred and improvement activities continue to be updated and implemented.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009

The recommended and requested revision to North Carolina’s targets was approved through the 2007-2008 APR process. These adjusted targets are reflected in the 2008-2009 APR. SPP improvement activities were reviewed and no other changes were deemed necessary.

Part C State Annual Performance Report (APR) for 2008-2009

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 3 with IFSPs compared to national data.
(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

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

FFY	Measurable and Rigorous Target
2008-2009	1.96%

Actual Target Data for 2008-2009: There were 9290 children aged birth (0) to 3 years enrolled in the NC’s EI Program on December 1, 2008. On December 1, 2008, the state population for this group was 398,879. The actual percentage is 2.33%.

The NC EI Program exceeded its target of 1.96%. Whereas Indicator 5 (birth to 1) targets have been revised due to various factors noted above, no revision is planned for Indicator 6 (birth to 3). The enrollment of children in the program has continued to increase.

CDSA	Children Aged Birth (0) to 3	Population Aged Birth (0) to 3	Percent of Population Aged Birth (0) to 3
Asheville	342	13,395	2.55%
Blue Ridge	230	6,323	3.64%
Charlotte	899	43,021	2.09%
Concord	691	29,071	2.38%
Durham	584	27,227	2.14%
Elizabeth City	200	7,017	2.85%
Fayetteville	575	27,314	2.11%
Greensboro	807	33,550	2.41%
Greenville	529	16,241	3.26%
Morganton	318	14,789	2.15%
New Bern	370	20,300	1.82%
Raleigh	1029	38,857	2.65%
Rocky Mount	506	19,276	2.63%
Sandhills	461	18,639	2.47%
Shelby	474	17,104	2.77%
Smokies	244	5,995	4.07%
Wilmington	334	16,995	1.97%
Winston-Salem	697	27,558	2.53%
North Carolina (state demographer data)	9290	382,672	2.43%
North Carolina (US Census Bureau data)		398,879	2.33%
National			2.66%

This table provides the birth (0 years) to 3 year of age data for the eighteen CDSAs. The table also shows statewide totals and the 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 2008-2009:

North Carolina’s current data indicate continued increases in both the percentage and number of children ages birth to 3 years enrolled in and served by the EI program from FY 2007-2008 (2.12% or 8237 children) to FY 2008-2009 (2.33% or 9290)³. 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 birth to 3 year old children, although they are not actually served by the state’s program. There were 90 children ages birth to 3 on the December 1 Headcount for the two military installations in North Carolina. 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 past three years have included, revisiting intake processes at CDSAs to more quickly respond to families whose children were referred to the program, and local outreach and public awareness activities about early intervention. 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 strategies from focused-monitoring visits to increase child find activities. Most CDSAs continued to show improvements above the state target in this indicator. CDSAs that needed further technical assistance were provided additional support.

³ Percentages are based on US Census Bureau data.

In an effort to enhance the understanding and use of the Child Find Reporting Tool (discussed in Indicator 5), the NCICC-LICC Support Subcommittee conducted six (6) statewide web conferences. The training entitled “Conquering the Enigma of the Child Find and Transitions Reports,” incorporated numerous actual LICC activities. Facilitators discussed relevant child find and transition activities and how to complete the reporting tools using these real-life examples. A total of 191 participants representing 47 LICCs participated in the web-based trainings. The child find tool provided LICCs a way to document their local efforts and share their activities with other LICCs. It also provided a means to portray the state’s overall efforts targeting identified referral sources.

Other, state level, improvement activities include:

- Continual statewide efforts to examine referral rates versus enrollment rates and intake processes.
- CDSA child find strengths have been identified and shared with all CDSAs.
- A referral analysis tool has been created and shared with all CDSAs. The tool breaks down referrals by source and county.
- The statewide public awareness campaign has been developed and is in the initial stages of implementation.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009:

None necessary.

Part C State Annual Performance Report (APR) for 2008-2009

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 infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.
Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

FFY	Measurable and Rigorous Target
2008 - 2009	100%

Actual Target Data for 2008-2009: Three hundred fifty three (353) children received an IFSP within 45 days of referral. One hundred six (106) children did not receive an IFSP in a timely manner due to documented exceptional family circumstances. Therefore, four hundred fifty nine (459) out of four hundred seventy two (472) children (97.25%) met the 45 day timeline indicator.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009.

The methodology for data collection utilized the state data system accompanied by a data inquiry process. During the FY 2008-2009, the EI Branch Central Office provided each CDSA with a list of children (extracted from the state’s database) who did not receive an IFSP within 45 days of referral. The data included all new children who were initially enrolled during the month of January 2009. Through this process, data on four hundred seventy-two (472) children was examined to verify the 45-day timeline for compliance. Overall, the North Carolina Early Intervention Program reported 97% compliance for the FY 2008-2009. This figure represents progress of 1.25% from the FY 2007-2008 figure of 96%.

In 2008-2009, of the four hundred seventy-two (472) children whose records were reviewed, about seventy-five percent (n = 353) of children received an IFSP within 45 days of referral. Approximately twenty-two percent (n = 106) showed delays due to documented exceptional family circumstances. Almost three percent (n = 13) 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 delays included: delays in evaluation and assessment and failure to follow policies and procedures. The next table displays the results of the data inquiry with the analysis as follows:

January 2009 CDSA	Compliance
Asheville [†]	81.25%
Blue Ridge	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Greenville [^]	93.75%
Morganton	100%
New Bern ^{^*}	94.12%
Raleigh	100%
Rocky Mount	100%
Sandhills [†]	82.35%
Shelby	100%
Smokies [^]	75.00%
Wilmington	100%
Winston-Salem	100%
Total	97.25%

Identification of Noncompliance in FFY 2008-2009

Record review data indicate eleven (11) CDSAs achieved 100% compliance (including documented exceptional family circumstances). Following documentation review and interviews with staff, two (2) CDSAs (denoted in chart with [†]) were not issued findings since the EI Branch verified the correction of child-specific noncompliance and reviewed current data verifying that the 45 day timeline requirement was being implemented in accordance with IDEA prior to issuance of written notification of finding.

Three (3) CDSAs (denoted in chart with [^]) have been issued a finding and received a Corrective Action Plan (CAP) due to noncompliance to 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 noncompliance). From the time of monitoring, one (1) CDSA (denoted in chart with ^{*}) has since corrected the finding of noncompliance. The EI Branch Central Office staff verified the correction of child-specific noncompliance and reviewed current data verifying that the 45 day timeline requirement was being implemented in accordance with IDEA. The remaining two (2) CDSAs are being monitored following the process outlined under the “Verification of Correction” section.

The progress from 96% (FY 2007-2008) to 97.25% (FY 2008-2009) can be attributed to the following improvement activities: development of technical assistance briefs to consistently apply reasons for delays due to documented exceptional circumstances; timely scheduling of evaluation and assessment. Quality Improvement Central Office staff provided focused technical assistance to targeted CDSAs to support examination of causes for delay and the implementation of efficient strategies.

Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2007 for this indicator: 96%

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	3
2. Number of FFY 2007 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 2007 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2007 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2007 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

For FFY 2007 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

None necessary.

Verification of Correction (either timely or subsequent):

For those findings for which the State has reported correction, describe the process the State used to verify that the EIS program: (1) is correctly implementing the specific regulatory requirements; and (2) has conducted the initial evaluation, assessment and IFSP meeting, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02.

There were three (3) CDSAs in corrective action plans issued in FY 2007-2008. These CDSAs received intensive monitoring and corrected their noncompliance within one year of the finding being issued. The EI Branch Central Office staff verified that the CDSA: (1) is correctly implementing the specific regulatory requirements; and (2) has 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.

The North Carolina Early Intervention Program has put a system in place 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 investigates 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 no later 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 ensuring the child had an evaluation and an IFSP developed and review of current data verifying that the 45 day timeline requirement is being implemented in accordance with IDEA.

Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable):

For FFY 2006 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

1. Number of remaining FFY 2006 findings of noncompliance noted in OSEP’s June 1, 2009, FFY 2007 APR response table for this indicator	0
2. Number of remaining FFY 2006 findings the State has verified as corrected	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	0

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable):

Provide information for FFY 2006 regarding correction of any remaining findings of noncompliance from FFY 2005 or earlier using the same format provided above.

None.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008 – 2009:

None necessary. Compliance with this indicator is currently at the 97.25% level, and ongoing monitoring and technical assistance are occurring per the State Performance Plan. These ongoing monitoring and technical assistance efforts focus on quickly identifying and remedying any noncompliance.

Part C State Annual Performance Report (APR) for 2008 - 2009

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 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;
 B. Notification to LEA, if child potentially eligible for Part B; and

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

Measurement:
 A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
 B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
 Account for untimely transition conferences, including reasons for delays.

FFY	Measurable and Rigorous Target
2008 – 2009	100%

Actual Target Data for 2008 - 2009:

- A. Service Plan Includes Transition Steps and Services: 99.50% (402 out of 404)(n=404)**
- B. Notification to the Local Education Agency (LEA): 99.54% (435 out of 437)(n=437)**

Data for IFSPs with transition steps and services, LEA notification and transition conferences is collected via self-assessment. CDSAs are provided with a list of randomly selected child records to review as part of the self-assessment process. Reasons for noncompliance are collected when noncompliance is identified.

A. Service Plan Includes Transition Steps and Services:

CDSA	2008-2009
Asheville	100%
Blue Ridge	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Fayetteville	100%
Greensboro	100%
Morganton	100%
New Bern	100%
Raleigh	100%
Rocky Mount^	95.65%
Sandhills	100%
Shelby	100%
Smokies^	91.67%
Wilmington	100%
Winston-Salem	100%
Total	99.50%

Table A: This table denotes 99.50% (n=404) compliance in FY 2008-2009 for children who are transitioning and have IFSPs with transition steps and services. There was improvement of 3.50% from FY 2007-2008 data of 96%.

Identification of noncompliance in FFY 2008 – 2009

In 2009, there were 404 records reviewed to examine whether IFSPs had transition plans with steps and services for children who were transitioning in the month of January 2009. There were fifteen (15) of the seventeen CDSAs reported that achieved 100% compliance. Two (2) of the seventeen CDSAs (denoted with ^) were cited with one (1) finding each. Of these two CDSAs, one CDSA’s finding was due to failure of CDSA personnel to conduct IFSP reviews to determine the family’s continued interest in the program and transition planning. Corrective actions were implemented and the CDSA corrected the noncompliance as of August 1, 2009. Data verification ensured that specific regulatory requirements under IDEA were being met and that there were no individual child specific instances. The second CDSA which was cited with a finding was issued a corrective action plan to be completed as soon as possible but no later than one year from written notification.

Correction of FFY 2007 – 2008 noncompliance

In FY 2007-2008, one CDSA was cited with a finding and was issued a corrective action plan that was completed within one year from written notification. At the time of self assessment, this CDSA was submitting data on a monthly basis as part of the corrective action plan process and was being monitored through that process. This CDSA was not issued any new findings in FFY 2008 – 2009.

As part of correction for FY 2007–2008 this CDSA received intensive monitoring. EI 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 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 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 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 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..

B. Notification to the Local Education Agency (LEA):

CDSA	2008-2009
Asheville	100%
Blue Ridge	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Fayetteville^	91.67%
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%
Statewide	99.54%

Table B: This table denotes an improvement in notification of the LEA of a child potentially eligible for Part B from 98% in FY 2007-2008 to 99.54 % (n=437) in FY 2008-2009.

Identification of noncompliance in FFY 2008 – 2009

In FY 2008-2009, there were 437 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 a 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.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (2008-2009):
See above descriptions with each chart.

Due to past noncompliance in meeting the timely transition planning conference indicator, the NC EI Program continues to focus its improvement activities on revising the general supervision monitoring

system. The purpose is to become more effective in identifying and correcting noncompliance and ensuring system wide improvement. Strategies involve a variety of activities including partnering 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.

This Annual Performance Plan of 2008-2009 shows improvement in compliance for the indicators 8a, b, and c. Although there was not 100% compliance, strategies to address the findings were identified in the corrective action process and progress has already occurred in correcting noncompliance.

A statewide LICC reporting tool was developed last fiscal year which allows North Carolina 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 North Carolina.

Fiscal Year 2008-09 reflects the first full reporting year for the LICC Child Find and Transition Activities. In an effort to enhance the understanding and application of the Child Find and Transitions Reporting tool, the NCICC-LICC Support Subcommittee conducted six (6) statewide web conferences. The training entitled “Conquering the Enigma of the Child Find and Transitions Reports,” incorporated numerous actual local LICC activities. Facilitators discussed what were relevant child find and transition activities and how to complete the reporting tools using these tangible examples. A total of 191 participants representing 47 LICCs participated in these web-based trainings.

The submitted reports for fiscal year 2008 - 2009 better reflect the number of LICC transition activities as compared to last fiscal year. (Please see *Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (2008-2009)* for Indicator 8c for a more detailed discussion.) There were still several submitted reports that appear to have reported participants versus events, thus skewing a consistent ability for cross comparison among LICCs. Further targeted technical assistance is recommended to assist those LICCs in differentiating reported events.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (2008 – 2009)

State Performance Plan improvement activities were reviewed and no changes were deemed appropriate at this time. Compliance with this indicator’s elements is currently at the 96% level or higher and ongoing monitoring and technical assistance are occurring per the State Performance Plan. These ongoing monitoring and technical assistance efforts focus on quickly identifying and remedying any non compliance.

Part C State Annual Performance Report (APR) for 2008 - 2009

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:

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

Account for untimely transition conferences, including reasons for delays.

FFY	Measurable and Rigorous Target
2008 - 2009	100%

Actual Target Data for 2008 - 2009:

C. Transition Planning Conference: 98.09% (410 out of 418) (n=418)

C. Timely Transition Planning Conference

(Data are from the time period of January 2009):

CDSA	2008-2009
Asheville	100%
Blue Ridge	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Fayetteville^	95.83%
Greensboro	100%
Greenville^	96.97%
Morganton	100%
Raleigh	100%
Rocky Mount	100%
Sandhills	100%
Shelby	100%
Smokies*	58.33%
Wilmington	100%
Winston-Salem^	96.67%
Total	98.09%

In 2008-2009, 418 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. 84.69% of records denoted that a conference was held in a timely manner. 13.40% 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.

Table C: The data represents 98.09% compliance for FY 2008-2009 which represents an improvement of 2.09% in compliance as compared to FY 2007-2008 data of 96%.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008 – 2009:

Identification of noncompliance in FFY 2008 – 2009

The data in Table C represents 98.09% compliance for FY 2008-2009 which represents an improvement of 2.09% in compliance as compared to FY 2007-2008 data of 96%. Thirteen (13) CDSAs reported 100% compliance. Three (3) CDSAs (denoted with ^) were cited with a finding; corrective actions were developed and implemented. One (1) CDSA (denoted with *) was cited with 3 findings and a corrective action plan was issued. Therefore, there were a total of six (6) findings in NC. Compliance is to be corrected as soon as possible for all findings but no later than one year from the written notification.

Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2007 for this indicator: 96%

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	3
2. Number of FFY 2007 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 2007 findings <u>not</u> verified as corrected within one year [(1) minus	0
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Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2007 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2007 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

For FFY 2007 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

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

Verification of Correction (either timely or subsequent):

For those findings for which the State has reported correction, describe the process the State used to verify that the EIS program: (1) is correctly implementing the specific regulatory requirements; and (2) has conducted the transition conference, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02.

There were three CDSAs in corrective action issued in FY 2007-2008. These three CDSAs received intensive monitoring. EI 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 each CDSA. A corrective action process was developed for each CDSA matching strategies with the root causes of noncompliance. During the corrective action process, EI 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 three 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 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 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 Central Office staff verified that these three 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.

Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable):

For FFY 2006 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued

lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

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

1. Number of remaining FFY 2006 findings of noncompliance noted in OSEP’s June 1, 2009, FFY 2007 APR response table for this indicator	0
2. Number of remaining FFY 2006 findings the State has verified as corrected	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	0

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable):

Provide information for FFY 2006 regarding correction of any remaining findings of noncompliance from FFY 2005 or earlier using the same format provided above.

Not applicable.

Improvement Activities

Due to past noncompliance in meeting the timely transition planning conference indicator, the North Carolina Early Intervention program continues to focus its improvement activities on revising the general supervision monitoring system. The purpose is to become more effective in identifying and correcting noncompliance and ensuring system wide improvement. Strategies include a variety of activities including partnering 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 and implemented.

Overall, this Annual Performance Plan of 2008-2009 shows improvement in compliance for the indicators 8a, b, and c. Although there was not 100% compliance, strategies to address the findings were identified in the corrective action process and progress has already occurred in correcting noncompliance.

A statewide LICC reporting tool was developed last fiscal year which allows North Carolina 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 North Carolina. The transition reporting tool captured the frequency of six listed transition activities:

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

These activities target the following five programs or entities where children with or at risk for developmental disabilities may transition:

1. Infant Toddler Program
2. Preschool/Exceptional Children's Program
3. Other Community Agencies/Programs
4. Kindergarten
5. Hospitals

The reporting tool also documented the number of events/activities conducted by LICC partners. Fiscal Year 2008-09 reflects the first full reporting year for the LICC Child Find and Transition Activities. In an effort to enhance the understanding and application of the Child Find and Transitions Reporting tool, the NCICC-LICC Support Subcommittee conducted six (6) statewide web conferences. The training entitled "Conquering the Enigma of the Child Find and Transitions Reports," incorporated numerous actual local LICC activities. Facilitators discussed what were relevant child find and transition activities and how to complete the reporting tools using these tangible examples. A total of 191 participants representing 47 LICCs participated in these web-based trainings.

The submitted reports for fiscal year 2008 - 2009 better reflect the number of outreach activities as compared to last fiscal year. In summary, the following are noted from the reporting LICC's Transition Summary (activity numbers below correspond with the six listed transition activities above):

- Over 50% of reporting LICCs indicated transition efforts among *three* separate [Activities # 1,2, & 3] transition activities versus only one transition activity [Activity #1] last fiscal year.
- Reported Transition efforts targeting Kindergarten increased in five out of the six listed transition activities as compared to last fiscal year.
- Providing information on local community forums addressing community transition issues/procedures [Transition Activity #5] was the only activity where there was a reported increase in local efforts targeting all five community programs
- There was a decline in transition activities targeting the hospital in every one of the listed six transition activities.
- Transition efforts addressing the Infant Toddler and Preschool/Exceptional Children's program increased in every transition activity except orientation to new professionals [Activity #4].
- Local efforts targeting the Infant Toddler 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) is the third most reported community entity targeted for transition efforts by LICCs.

There were still several submitted reports that appear to have reported participants versus events, thus skewing a consistent ability for cross comparison among LICCs. Further targeted technical assistance is recommended to assist those LICCs in differentiating reported events.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008 – 2009:

State Performance Plan improvement activities were reviewed and no changes were deemed appropriate at this time. Compliance with this indicator's elements is currently at the 96% level or higher and ongoing monitoring and technical assistance are occurring per the State Performance Plan. These ongoing monitoring and technical assistance efforts focus on quickly identifying and remedying any non compliance.

Part C State Annual Performance Report (APR) for FFY 2008

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 2008	100%

Actual Target Data for FFY 2008: 92.31%

INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(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	6	6	5
	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
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
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	3	3	3
	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 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(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: 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
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	0	0	0
	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	3	3	3
	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
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

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
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			13	12

No other findings were issued as related to any other IDEA requirements.

Percent of noncompliance corrected within one year of identification: $12 \div 13 = 92.31\%$

Describe the process for selecting EIS programs for Monitoring:

All Children’s Developmental Services Agencies (local lead agencies) received monitoring activities this year. These monitoring activities included: on site visits, self assessment data analysis, data verification and desk review/data review. Children’s Developmental Services Agencies that are in corrective action planning receive more intensive monitoring and technical assistance and have more data verification and data collection requirements.

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

A short description of progress or slippage by indicator is as follows:

- **Indicator 1-** North Carolina has historically had challenges providing services to children in a timely manner. For FY 2008-2009: six (6) CDSAs are reported as having one finding each; two (2) CDSAs have two findings each; and one (1) CDSA has 3 findings. These data indicate that North Carolina’s findings of noncompliance for this indicator for the period equal thirteen (13). Note that the State implemented a new definition of finding(s) this year based upon the OSEP guidance issued in August 2008. Through implementation of this guidance, significant progress has been made in meeting the target.

The North Carolina Early Intervention Program has put a system in place to verify the correction of child-specific noncompliance and verify that services are being implemented in a timely manner in accordance with IDEA prior to issuance of a notification of correction. In developing this monitoring system, the State has received technical assistance from NECTAC and Mid-South Regional Resource Center on a variety of approaches (including talking to other States’ researchers, reviewing the literature, etc.) to develop additional service delivery models, specifically examining the primary provider model.

- **Indicator 2-** Target met.
- **Indicator 3-** Targets established this year and baseline data provided.
- **Indicator 4-** Did not meet target.

- **Indicator 5-** Did not meet target. Progress made based upon implementation of improvement strategies. See Indicator for details.
- **Indicator 6-** Target met.
- **Indicator 7-** Three CDSAs each with one finding of noncompliance for 2008-2009. Corrective action taken. Progress noted in meeting target.
- **Indicator 8a-** Two CDSAs each with one finding of noncompliance. Corrective action taken. Progress noted in meeting target.
- **Indicator 8b-** One CDSA with one finding of noncompliance. Corrective action taken. Progress noted in meeting target.
- **Indicator 8c-** Three CDSAs each with one finding; and one CDSA with three findings. Corrective action taken. Progress noted in meeting target
- **Indicator 9-** This indicator is the overall general supervision indicator. A more effective general supervision system has enhanced the ability of our program to identify and correct noncompliance in a timely manner. Improved compliance is noted in Indicator 1 as statewide strategies were effective. Additional drilldown of data has helped the program to account for all instances of noncompliance, address the root cause of noncompliance, and ensure that local programs are effectively meeting all compliance and performance standards.
- **Indicator 10-** Target met.
- **Indicator 11-** No findings; no due process hearings requested.
- **Indicator 12-** Not applicable to North Carolina as Part C due process procedures are used.
- **Indicator 13-** Target met.
- **Indicator 14-** Target met.

Note: For this indicator, report data on the correction of findings of noncompliance the State made during FFY 2007 (July 1, 2007 through June 30, 2008).

Correction of FFY 2007 Findings of Noncompliance Timely Corrected (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007 through June 30, 2008) (Sum of Column a on the Indicator C 9 Worksheet)	13
2. 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 C 9 Worksheet)	12
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	1
5. Number of findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
6. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected

For FFY 2007 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance

None necessary.

Verification of Correction (either timely or subsequent)

For those findings for which the State has reported correction, describe the process the State used to verify that the EIS program: 1) is correctly implementing the specific regulatory requirements; and (2) has corrected all instances of noncompliance (including noncompliance identified through the State's monitoring system, through the data system and by the Department), consistent with OSEP Memorandum 09-02.

There was one CDSA that had one finding of noncompliance that was not corrected within the one year timeframe. This CDSA received intensive monitoring, monthly data progress reports as well as on-site monitoring by the State's Part C Coordinator. Subsequently, this CDSA corrected noncompliance within sixteen months of receiving a documented finding, as verified by Central Office staff. Systems issues (as stated in Indicator 1) were addressed and ongoing monitoring/follow-up with continue. For all areas of noncompliance, the North Carolina Early Intervention Program: (1) corrected all individual child specific instances of noncompliance, although late unless the child was not enrolled in the NC EI Program (including noncompliance identified through the State's monitoring system and through the State's data system); and (2) verified that each CDSA with identified noncompliance is correctly implementing the specific regulatory requirements of IDEA.

The North Carolina Early Intervention Program's general supervision system continues to function as previously submitted to and approved by OSEP. The program continues to work towards implementation of a new data system, with the plan to alleviate the need for the intensive on-site record review process. OSEP has recently (August 2008) clarified the definition of "finding." The program has implemented this new clarification in the general supervision system and has applied it to all monitoring activities as of that date.

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 this data is not collected in the program's data system. This data is 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. Data is 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 program's Regional Consultant.

If a finding is issued, the CDSA will receive a 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 Early Intervention Branch Central Office 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 requirement 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.

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.

Data Verification

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.

Dispute Resolution System

Written complaints are investigated to determine whether there are any findings of non-compliance with IDEA. The EI Branch Central Office hired a Family Partnership Coordinator to coordinate efforts regarding any complaints filed with the CDSAs or the Early Intervention Branch Central Office. The EI Branch Central Office as state lead agency sends a written response to the family and the CDSA within 60 days of receipt of a written complaint. If an area of non-compliance is identified a corrective action plan is issued and the CDSA has to correct the noncompliance as soon as possible, but no later than one year of the written notification of the finding. As there may be instances of identified concerns that may be indicative of systemic issues, but are not raised to the level of a written complaint, the Family Partnership Coordinator will assist CDSAs to develop procedures to track informal complaints and implement activities to address these instances or systemic issues.

Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable): N/A

For FFY 2006 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.

If the State reported <100% for this indicator in its FFY 2006 APR and did not report that the remaining FFY 2006 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2006 findings noted in OSEP's June 1, 2009 FFY 2007 APR response table for this indicator	
2. Number of remaining FFY 2006 findings the State has verified as corrected	
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	0

Correction of Any Remaining Findings of Noncompliance from FFY 2005 or Earlier (if applicable): N/A

Provide information regarding correction using the same format provided above.

Additional Information Required by the OSEP APR Response Table (if applicable) N/A

Statement from the Response Table	State's Response
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Revisions, with Justification, to Improvement Activities / Timelines / Resources for FFY 2008 (if applicable):

SPP improvement activities were reviewed and no changes were deemed necessary.

Part C State Annual Performance Report (APR) for 2008-2009

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)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2008-2009	100%

Actual Target Data for 2008-2009

The State lead agency received three (3) written complaints in 2008-2009 that were all withdrawn by the families. The specific written complaints are not described, as they may be personally identifiable. The Central Office continues to work in positive collaboration with the families and local programs (CDSAs) to reach an early and successful resolution.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009

None.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009

None necessary

Part C State Annual Performance Report (APR) for 2008-2009

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
2008-2009	100%

Actual Target Data for 2008-2009:

There were no due process hearing requests in 2008-2009.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009:

Not Applicable.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009:

None.

Part C State Annual Performance Report (APR) for 2008-2009

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
2008-2009	<i>Not Applicable</i>

Actual Target Data for 2008-2009:

Not Applicable

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009

Not Applicable.

Part C State Annual Performance Report (APR) for 2008-2009

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
2008-2009	<i>Not Applicable (NA)</i>

Actual Target Data for 2008-2009:

There was one (1) request for mediation that was pending for 2007-2008 due to receipt of the request at the end of the fiscal year. This request resulted in a timely mediation agreement. The specific mediation is not described, as it may be personally identifiable.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008-2009:

Not Applicable.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2008-2009:

None necessary

Part C State Annual Performance Report (APR) for 2008 – 2009

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring accuracy).

FFY	Measurable and Rigorous Target
2008 – 2009	100%

Actual Target Data for 2008-2009: 100%

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, 2010)		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: 2/1/09	1	1	1	1	4
Table 2 – Settings Due Date: 2/1/09	1	1	1	1	4
Table 3 – Exiting Due Date: 11/1/09	1	1	1	NA	3
Table 4 – Dispute Resolution Due Date: 11/1/09	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 around 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 CECAS, the database used for 618 reporting, is 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 2008-2009:

Development has continued on a new data system, the Health Information System (HIS), for the North Carolina Department of Health and Human Services. The core product is being implemented for the Division of Public Health, of which the North Carolina Part C program is a part. HIS will collect client specific data needed for reporting 618 data as well as data for the compliance indicators in the APR.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2009-2010:

None necessary