

Part C State Annual Performance Report (APR) for FFY 2005

Overview of the Annual Performance Report Development:

The Virginia Interagency Coordinating Council (VICC) served as the primary stakeholder group providing advice and assistance to the State Lead Agency in the development of the Annual Performance Report (APR). During a full-day meeting on November 28, 2006, VICC members:

- o Received information regarding focused monitoring;
- o Reviewed FFY 2005 data on the status of local systems and the State as a whole related to the targets set in the State Performance Plan (SPP);
- o Discussed improvement activities to address indicators that are below target; and
- o Began the process of identifying state focus topics.

Drafts of the APR and revised SPP were widely disseminated on December 15, 2006 to stakeholders who had the opportunity to submit written input.

Finally, a VICC conference call was held on January 9, 2006 (and open to any interested stakeholders) in order to share and discuss baseline family outcome data for SPP Indicator 4 and to finalize identification of the two state focus topics for FFY 2006.

Following submission to the Office of Special Education Programs (OSEP), the APR and revised SPP will be posted to the Infant & Toddler Connection of Virginia website and disseminated to and through participating State agencies no later than February 28, 2007. Public reporting on the performance of each local system will occur no later than March 31, 2007.

Virginia’s Status At-A-Glance

The following table provides an overview with Virginia’s baseline data, FFY 2005 target, and actual FFY 2005 data related to each of the State Performance Plan Indicators addressed in the Annual Performance Report. Detailed information about each indicator follows the table.

	Indicator	Baseline Data	FFY 2005 Target	FFY 2005 Actual
1	Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	72%	100%	72%
2	Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community setting.	99%	98.425%	99%
3	Percent of infants and toddlers with IFSPs who demonstrate improved: <ul style="list-style-type: none"> 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 	New indicator Baseline due 2008	N/A	N/A
4	Percent of families participating in Part C who report that early intervention services have helped their family: <ul style="list-style-type: none"> a. Know their rights; 	Baseline due 2007	N/A	N/A

APR Template – Part C (4)

Virginia
State

	Indicator	Baseline Data	FFY 2005 Target	FFY 2005 Actual
	<ul style="list-style-type: none"> b. Effectively communicate their children’s needs; and c. Help their children develop and learn. 			
5	Percent of infants and toddlers birth to 1 with IFSPs	.58%	.62%	.62%
6	Percent of infants and toddlers birth to 3 with IFSPs	1.79%	1.9%	1.72%
7	Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and initial IFSP meeting were conducted within Part C’s 45-day timeline.	93%	100%	98%
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: <ul style="list-style-type: none"> a. IFSPs with transition steps and services; b. Notification to the LEA, if child potentially eligible for Part B; and c. Transition conference, if child potentially eligible for Part B. 	<ul style="list-style-type: none"> a. 84% b. 81% c. 51% 	<ul style="list-style-type: none"> a. 100% b. 100% c. 100% 	<ul style="list-style-type: none"> a. 86% b. 89% c. 87%
9	General supervision and monitoring system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than 1 year from identification	100%	100%	75%
10	Percent of signed written complaints resolved within 60-day timeline, including a timeline extended for exceptional circumstances with respect to a particular complaint.	100%	100%	0% (0/1)
11	Percent of due process hearing requests fully adjudicated within the applicable timeline	No hearings	100%	No hearings
12	Percent of hearing requests resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted)	N/A	N/A	N/A
13	Percent of mediations resulting in mediation agreements	100%	N/A	No mediation
14	State reported data (618 and SPP and APR) are timely and accurate	83%	100%	83%

Part C State Annual Performance Report (APR) for FFY 2005

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.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

72% of infants and toddlers with IFSPs began receiving all early intervention supports and services on their IFSPs in a timely manner.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Target Data

Virginia defines “timely start of services” as within 21 calendar days of the date the parent signs the IFSP. Early intervention supports and services may begin more than 21 calendar days following the parent signing the IFSP if the IFSP team decides on and documents the reasons for a later start date in order to meet the individual needs of the child and family.

Target data for FFY 2005 is based on monitoring data from all 40 local Part C systems in Virginia. The records of children with initial or subsequent IFSPs developed between November 1, 2005 and June 30, 2006 were reviewed to determine whether all early intervention supports and services on the IFSP began in a timely manner. Each local Part C system followed the same method for selecting records for the review, as follows:

- The number of records to be reviewed was based on the number of children who had IFSPs developed in the local Part C system in the given time period:
 - 0 - 10 kids = 100%
 - 11 - 20 kids = 50%
 - 21 - 100 kids = 25%
 - 101 - 200 kids = 20%
 - 201 - 300 kids = 15%
 - 301 - 600 kids = 10%
 - Over 600 kids = select 60 records
- Once the number of records was determined, the exact records to be reviewed were selected based on a random number chart.

APR Template – Part C (4)

Virginia
State

Using this process, the statewide data showed that 599 of 835 children with IFSPs began receiving all of their IFSP supports and services in a timely manner ($599 / 835 = 72\%$). Both the numerator and denominator include 253 children for whom supports and services began more than 21 days after the parent signed the IFSP because of family scheduling preference, an IFSP team decision to delay the start of supports and services to meet individual child and/or family needs, or exceptional circumstances outside of the local Part C system's control (such as child or family illness).

Timely Initiation of Supports and Services: By Child

# of records reviewed	# of children who began all services in a timely manner	# of children for whom start was delayed due to family reasons or exceptional circumstances	% of children who began all services in timely manner
835	599	253	72%

Six (6) local systems were at 100% compliance with this indicator. The remaining 34 local systems had compliance percentages that ranged from 40% - 96%.

On-site data verification of local data for this indicator was conducted by State Part C staff. Information submitted by local systems on the annual local record review forms were verified by comparing the data submitted with documentation (i.e., the IFSP and contact notes) in the child's record. This process included confirmation of documentation related to exceptional circumstances and other reasons for the delay in start of supports and services. Please see Indicator 14 for further discussion of data verification.

Explanation For Lack of Progress

While the actual target data for FFY 2005 was the same as the baseline data collected in FFY 2004 and reported in the SPP (72%), a number of factors impact the comparability of the figures:

- In calculating the baseline data for the SPP, Virginia used an alternate formula allowed by OSEP that gave "partial credit" when some, but not all, of a child's supports and services began in a timely manner. The calculation used for reporting the actual target data in the APR is per child and requires that a child begin receiving *all* supports and services on his/her IFSP to be "counted" as meeting the requirements of this indicator (i.e., it allows for no partial credit).
- The baseline data was the best information available at the time the SPP was developed, but had a number of limitations. Specially, the baseline data was collected prior to Virginia identifying a definition of "timely" and did not include the reasons behind any delays in the start of supports and services.

In order to better understand Virginia's status with regard to beginning supports and services in a timely manner, data was also analyzed by service rather than by child. There were a total of 2024 supports and services listed on the IFSPs reviewed as part of the monitoring data for the 40 local Part C systems. Of those supports and services, 86% began in a timely manner.

Timely Initiation of Supports and Services: By Service

# of Supports and Services	# Services meeting Timely Requirement	# Delayed due to Family Reasons	# Delayed due to System Reasons	% of Services Meeting Timely Requirement
2024	1739	256	285	86%

Further analysis of the system reasons for delays in the start of supports and services indicated the following reasons for delay:

System Reasons for Delay in Initiation of Supports and Services

Foster Parent/Surrogate Parent Issues	Provider Unavailability	No reason documented
4	74	207

The large number of records with no documentation for the reasons behind a delay in the start of supports and services complicates the picture of Virginia’s status. However, the data indicating that 86% of supports and services begin in a timely manner suggests that there has been some progress toward full compliance with this requirement.

The following improvement activities related to timely initiation of supports and services were completed in FFY 2005:

- Virginia established its working definition of “timely” (21 calendar days from the date the parent signs the IFSP) in October 2005. This will remain a working definition until revisions to Virginia’s Part C Policies and Procedures, including the public comment period, are complete and approved by OSEP.
- Technical assistance was provided to local system managers during regional meetings and on an individual basis to address issues related to timely initiation of supports and services, particularly to develop strategies to prevent and/or address provider shortages. A process is in place for local system managers to notify their technical assistance consultant if they are unable to identify a service provider within 10 – 15 calendar days of the IFSP meeting.
- Training for service coordinators, *Kaleidoscope: New Perspectives in Service Coordination*, was revised to include the working definition of “timely” and to address issues related to compliance with this definition. Ninety-eight (98) service coordinators received training through Kaleidoscope in FFY 2005 and early FFY 2006.
- The record review protocol used to collect data on the timely start of supports and services was revised to allow for reporting of mitigating circumstances when supports and services begin more than 21 calendar days after the parent signs the IFSP.
- In the analysis of the Part C data system (ITOTS) that was completed in FFY 2005, data elements related to timely start of supports and services were identified as required elements of the system. However, the addition of these data elements will be considered for a later phase of the system enhancement after management of the data system is moved into the State Lead Agency from the current contractor location.
- Work began on revisions to the statewide IFSP form and instructions. A stakeholder group is working with the State Lead Agency to ensure the IFSP includes space and instructions for documenting justification for a later start date.

In addition, the following activities have already been completed in FFY 2006:

- The State Lead Agency, Department of Medical Assistance Services (DMAS), Virginia Interagency Coordinating Council, and local stakeholders collaborated to identify Medicaid-related issues affecting the timely initiation of supports and services.
- Through a contract with a national consultant, a stakeholder group was convened and collaboration began with DMAS to explore alternative funding structures, through Medicaid, that will better align with Virginia’s approach to supports and services in everyday routines, activities and places. Such changes would be expected to reduce duplicative or extra paperwork and improve reimbursement rates, thereby helping local Part C systems to attract new providers and retain those currently in the system. This would help to address those situations in which the delay in the start of services is due to provider unavailability.
- A process was established in collaboration with DMAS to provide a contact at DMAS for local systems to use in the event there is no qualified provider available in the managed care network. In addition, the current exception process was further explained to local system managers, and local system managers were directed to use that process when there are

delays associated with accessing early intervention services through Medicaid Managed Care Organizations.

- Written technical assistance on documentation for Part C service delivery, including service coordination, was developed and disseminated to all 40 local systems on December 4, 2006. This written document specifically addresses requirements for documentation when a planned service is not delivered or for discussions that occur at an IFSP meeting but may not be reflected on the IFSP itself (such as the reasons for planning a later start date). Improved documentation in these areas is expected to eliminate the instances of “no reason documented” when supports and services begin more than 21 calendar days after the parents signs the IFSP. Follow-up technical assistance related to documentation was provided to local system managers during regional meetings in December 2006 and January 2007.
- Corrective Action Plans (CAPs) related to timely initiation of supports and services were issued to 33 local Part C systems.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Minor revisions were made to the existing timelines for 2 improvement activities in the SPP submitted by Virginia in December 2005:

- Development and submission of revised Part C Policies and Procedures, which will include Virginia’s definition of “timely,” were delayed from June 2006 to April 2007 to await additional regulatory information on the 2004 Individuals with Disabilities Education Improvement Act provisions related to Parts B and C.
- Following completion of the analysis of Virginia’s Part C data system, ITOTS, timelines for the addition of data elements related to timely start of supports and services were identified. These enhancements to ITOTS are expected to occur in 2008, following the move of the data system into the State Lead Agency.
- The following improvement activities were added in order to address the issues identified during the analysis of FFY 2005 data related to the timely start of supports and services:
 - Provide technical assistance and follow-up to local systems in implementing corrective action plans. Many of the barriers to timely initiation of supports and services are specific to local systems and must be corrected by providing support to the local systems in identifying and implementing effective corrective action steps.
 - Collaborate with the Department of Medical Assistance Services and other stakeholders to explore alternative funding structure(s) for Part C supports and services that will facilitate the system’s ability to recruit and retain providers. Expanding local service provider networks will ensure the start of supports and services is not delayed due to provider unavailability.
 - Develop a series of topic papers related to documentation that follow-up the written technical assistance provided in FFY 2006. The topic papers will address the specific documentation requirements and considerations at various points in the early intervention process (e.g., entry, evaluation, service delivery, transition, etc.).

APR Template – Part C (4)

With these revisions, planned improvement activities related to Indicator 1 are as follows:

Activity	Timelines	Resources
1. Continue to implement the process begun in 2005 for local system managers to notify their technical assistance consultant if unable to identify a service provider within 10 – 15 calendar days of the IFSP meeting	Ongoing	<u>Personnel</u> : State Part C staff <u>Funding</u> : Already in the Part C budget
2. Provide technical assistance and follow-up to local systems in implementing corrective action plans	Beginning January, 2007	<u>Personnel</u> – State Part C Staff
3. Implement Virginia’s definition of “timely” as it relates to beginning services following IFSP development statewide and include it in revised Part C policies and procedures	Add definition to Virginia’s policies and procedures – April, 2007	<u>Personnel</u> : State Part C staff
4. In developing an enhanced State Part C data system (please see Indicator 14, Activity 1), explore ongoing electronic collection of the data needed to monitor the timely start of services.	Add data elements to ITOTS - 2008	<u>Personnel</u> : State Part C and IT Staff <u>Funding</u> : Already in Part C budget <u>Other</u> : Stakeholder input
5. Develop a series of topic papers related to documentation and disseminate to local systems	2008	<u>Personnel</u> – State Part C Staff <u>Other</u> – Stakeholder input
6. Collaborate with the Department of Medical Assistance Services and other stakeholders to explore alternative funding structure(s) for Part C supports and services that will facilitate the system’s ability to recruit and retain providers.	Beginning March 2006 Changes targeted for 2008-2009	<u>Personnel</u> – State Part C Staff, DMAS staff, EIIMT, National Consultants <u>Funding</u> – Funding for consultants already in Part C budget; additional funding needs to be determined <u>Other</u> – Stakeholder input, including Finance Stakeholder Group and VICC

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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 programs for typically developing children.

(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 programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2005	98.425%

Actual Target Data for FFY 2005:

Based on the Section 618 data submitted by Virginia on December 1, 2005, **99%** of infants and toddlers with IFSPs received early intervention supports and services in the home or programs for typically developing children.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Target Data

The FFY 2005 data reflects the primary service setting on the IFSP in effect for each child on December 1, 2005. Each local system was required to submit a signed data verification form confirming that the primary service setting was from the IFSP in effect on December 1, 2005 and that the data submitted was accurate.

For December 1, 2005, the total percent of infants and toddlers reported under Section 618 (this includes children under age 3 served under Part B with an IEP) who received supports and services primarily in the home or community settings is 84.7% (4519 out of 5338). Virginia’s baseline data, targets and target data are based on the Section 618 settings data for children enrolled in Virginia’s Part C program with IFSPs (4379 / 4422 = 99%).

Explanation for Progress

Virginia exceeded the performance target set for this indicator. Virginia’s very high percentage of infants and toddlers with IFSPs who receive their IFSP supports and services primarily in the home and programs for typically developing children is attributable to a number of improvement activities that have been implemented in recent years. Activities implemented in FFY 2005 include the following:

- Training related to planning for and provision of individualized supports and services in everyday routines, activities and places was provided by Part C staff to 10 local systems. In addition, Part C staff collaborated with 4 local systems on planning local training on this topic, including assisting with identification of possible trainers. All trainings were based on and used evidence-based materials and strategies.

- Training for service coordinators, *Kaleidoscope: New Perspectives in Service Coordination*, includes information on planning for and delivering supports and services in everyday activities, routines and places. Ninety-eight (98) service coordinators were trained through Kaleidoscope in FFY 2005 and early FFY 2006.
- Ongoing technical assistance was provided to local systems on an as needed basis to address specific local issues related to provision of supports and services in natural environments, including issues related to reimbursement, provider shortages, and meeting the needs of individual children and families.
- A survey was disseminated by the State Lead Agency to all Part C providers and administrators in order to determine current practices and the need for additional support and information related to provision of individualized supports and services in everyday routines, activities and places. Responses were received from 138 individuals. While the response rate was too low to draw conclusions about local and regional needs, it is possible to identify statewide trends in the areas on which respondents rated their own knowledge and skills at entry level. Those areas include use of a primary service provider model (both explaining it to the family and serving as that primary provider), evaluating across disciplines in all areas of development, demonstrating strategies within the family's routines, and supporting the family's active participation in all service sessions.
- In order to ensure the accuracy of settings data reported in the annual Section 618 report, Virginia's Part C data system, ITOTS, now provides the capability for local systems to update annually the primary service setting data to reflect the IFSP in effect on December 1 for each eligible child.
- Both keynote presentations and several break-out sessions at the 2006 Virginia Early Intervention Conference addressed provision of individualized early intervention supports and services in everyday activities, routines and places.

Additional improvement activities that are already underway in FFY 2006 include the following:

- The State Lead Agency, Department of Medical Assistance Services (DMAS), Virginia Interagency Coordinating Council, and local stakeholders collaborated to identify Medicaid-related issues affecting the provision of supports and services in natural environments.
- Through a contract with a national consultant, a stakeholder group was convened and collaboration began with the Department of Medical Assistance Services (DMAS) to explore alternative funding structures, through Medicaid, that will better align with Virginia's approach to supports and services in everyday routines, activities and places.
- Based on the FFY 2005 data, 2 local systems have received corrective action plans in order to improve performance on this indicator

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Minor revisions were made to the improvement activities, timelines and resources for Indicator 2 in the State Performance Plan for the following reasons:

- Timelines were extended in the activity related to developing and implementing a range of supports and information related to individualized supports and services because of the need to prioritize improvement activities related to Indicators 1 (timely start of services), 7 (percentage of children served), and 8 (transition) based on statewide performance related to the targets on those indicators.
- Timelines were extended in the activity related to the orientation module because the requirement for all providers to complete the orientation module needed to be included in the revised Virginia Part C Policies and Procedures, which are scheduled for submission to OSEP by April 2007, prior to adding that requirement to the local contract with local lead agencies.

APR Template – Part C (4)

- Improvement activities were added to address the following:
 - Explore changes in the funding of Part C supports and services so that the approach to funding the system more closely aligns with Virginia’s approach to the provision of supports and services within everyday routines, activities and places.
 - Continue providing links to evidence-based materials and strategies related to natural environments through the Infant & Toddler Connection of Virginia Update.

With these revisions, planned improvement activities related to Indicator 2 are as follows:

Activity	Timelines	Resources
1. Continue provision of targeted technical assistance related to natural environments based on needs identified by local Part C systems and through monitoring and supervision.	Provision of targeted technical assistance – Ongoing	<u>Personnel</u> : State Part C staff <u>Funding</u> : Already in Part C budget
2. Continue to provide links to evidence-based materials and strategies related to natural environments through the <u>Infant & Toddler Connection of Virginia Update</u>	Ongoing	<u>Personnel</u> – State Part C Staff
3. Develop and implement a system of ongoing and individualized information and supports that will assist individual Part C providers (those currently in the system and those entering the system), teams of providers, families and local Part C systems in understanding and implementing the principles and practices of individualizing Part C supports and services in everyday activities, routines and places.	Develop a work plan that identifies a range of mechanisms for delivering information and support to local providers, administrators, and teams, along with timelines for phased in implementation – December 2007	<u>Personnel</u> : State Part C staff, Integrated Training Collaborative <u>Funding</u> : To be determined
4. Continue implementation of <i>Kaleidoscope: New Perspectives in Service Coordination (Level I and II)</i> training for service coordinators	Ongoing	<u>Personnel</u> : State Part C Staff, Integrated Training Collaborative <u>Funding</u> : Already in Part C budget
5. Implement requirement for all Part C service providers to complete the Orientation to Part C training module, passing competency test with 80% accuracy	Include this requirement in revised Virginia policies and procedures – April 2007 Implement statewide – July 2007	<u>Personnel</u> : State Part C staff, Integrated Training Collaborative <u>Funding</u> : To be determined
6. Collaborate with the Department of Medical Assistance Services and other stakeholders to explore alternative funding	Beginning March 2006 Changes targeted for 2008-2009	<u>Personnel</u> – State Part C Staff, DMAS staff, EIIMT, National Consultants

APR Template – Part C (4)

Virginia
State

Activity	Timelines	Resources
structure(s) for Part C supports and services that better align with Virginia’s approach to the provision of supports and services.		<p><u>Funding</u> – Funding for consultants already in Part C budget; additional funding needs to be determined</p> <p><u>Other</u> – Stakeholder input, including Finance Stakeholder Group and VICC</p>

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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:

A. Positive social-emotional skills (including social relationships):

- 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.

If a + b + c + d + e does not sum to 100%, explain the difference.

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy)

- 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.

If a + b + c + d + e does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

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 the (# 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 the (# 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 the (# 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 the (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

FFY	Measurable and Rigorous Target
2005	Targets will be set once baseline data is available

Actual Target Data for FFY 2005:

N/A

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

In FFY 2005, Virginia piloted its Child Outcome Measurement System. Data on children’s status at entry on each of the three areas described in the indicator is reported in Virginia’s revised State Performance Plan, which is available at www.infantva.org. Baseline progress data for this indicator will be reported in the Annual Performance Report due on February 1, 2008.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

N/A

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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
2005	Targets will be set once baseline data is available

Actual Target Data for FFY 2005:

N/A

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Virginia piloted a new family survey in FFY 2005. Baseline data on the three areas of this indicator, based on responses to the family survey, are reported in Virginia's revised State Performance Plan, which is available at www.infantva.org.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

N/A

Part C State Annual Performance Report (APR) for FFY 2005

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

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

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers 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
2005	.62%

Actual Target Data for FFY 2005:

Based on the December 1, 2005 child count, **.62%** of infants and toddlers birth to 1 were served in Virginia’s Part C early intervention system in FFY 2005.

[Please note that this percentage may change when OSEP issues the figures using 2005 population statistics]

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Virginia met its performance target on this indicator. The following improvement activities specifically related to the birth – 1 population were completed in FFY 2005 (additional activities related to the birth – 3 population, as a whole, are discussed in the next indicator):

- The State Lead Agency collaborated with the Virginia Department of Health and a medical intern working with the Part C Office to develop and disseminate information related to the expanded newborn screening program that began in March 2006. The written document clarified that all 28 disorders and diseases included in the newborn screening program fit Virginia’s definition of eligibility for Part C early intervention supports and services and provided a fact sheet and links with information about all of the disorders and diseases.
- At regional meetings of local system managers, Part C technical assistance consultants discussed strategies for increasing referrals of potentially eligible infants, birth – 1. Emphasis was placed on establishing relationships with hospital contacts and maintaining that connection through ongoing communication.

- Written clarification regarding parental consent was provided to all local systems to facilitate better communication with the Department of Health's Early Hearing Detection and Intervention Follow-Up Coordinator in determining whether families of children newly diagnosed with hearing loss, who have been referred to the local Part C system, have made contact and/or begun receiving supports and services.
- An interagency work group established at the State level to increase the referral rate of children who are diagnosed with hearing loss as a result of the newborn hearing screening obtained grant funding through the Department of Health to implement the Guide By Your Side program. The program matches the trained parent of a child with hearing loss with families of children who are newly diagnosed with hearing loss. The trained guide provides unbiased information on communication options and community resources, supports and services. A flow chart used by the parent guide prompts him/her to check that the family has been referred to the local Part C system and to provide information about the supports and services available through Part C. As of October, 2006, 15 parents have been trained and program implementation is expected in early 2007.
- The website created to provide physicians and nurses with general information about Virginia's Part C system, as well as referral procedure information, continues to be available and updated as needed.
- Approximately 110,000 copies of Virginia's Part C developmental checklist brochure (100,000 in English and 10,000 in Spanish) were included in New Parent Kits, which were distributed through local departments of social services and other local public agencies as part of a Governor's Initiative project.
- Part C staff provided training to Department of Medical Assistance Services (DMAS) state personnel on the supports and services offered through Virginia's Part C early intervention system and the process for referral.
- The 2006 Virginia Early Intervention Conference included break-out sessions related to identifying and evaluating very young infants with disabilities and development delays as well as local collaboration for child find and referral of children identified through the expanded newborn screening program.

In addition, in early FFY 2006 the State Lead Agency has completed the following improvement activity

- The analysis of data for development of the APR included identification of the percentage of infants, birth – 1, served in each local Part C system based on the local population of children birth – 1. Based on that data, 16 local systems have received corrective action plans in order to improve performance on this indicator.
- Part C staff presented information on the supports and services offered through Virginia's Part C early intervention system and the process for referral at regional DMAS trainings attended by managed care case managers and others who work with young children with Medicaid.
- The Virginia Interagency Coordinating Council and the State Lead Agency began consideration of adding cleft lip and cleft palate to the list diagnosed conditions that provide automatic eligibility under Part C in Virginia.
- The State Part C Coordinator initiated dialogue with one of the Commonwealth's regional hospitals in order to better understand the hospital's process for referring families to the Part C early intervention system.
- The State Part C Coordinator met with Care Connection of Virginia staff to ensure understanding of the process for referring children identified through the expanded newborn screening program to the Part C early intervention system.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Improvement activities and timelines in the State Performance Plan have been revised as follows:

- Activities involving drill-down analysis of the birth-one data (e.g., looking at proportionality of race/ethnicity served and infants referred but not in services) were deleted as State-level activities, but will be used, as appropriate, in local Corrective Action Plans to determine how to most effectively increase the percentage of infants served in local Part C systems who did not meet the target.
- The activity related to evaluating the effectiveness of other improvement activities by looking at child count and live birth data was deleted since the Annual Performance Report process ensures such evaluation occurs.
- The activity related to providing written guidance on atypical development was expanded to address considerations in evaluation and assessment, especially related to difficult to measure aspects of development, infant mental health issues, premature infants, and atypical development. The improvement activity has been moved under Indicator 6 (birth – 3) since it is not specific to or limited to the birth – 1 population.
- Timelines associated with activities involving the State interagency agreement were delayed to ensure the agreement supports implementation of the revised Part C Policies and Procedures, which are targeted for completion by April 2007.
- Timelines were modified for other activities to allow for completion of priority projects in 2005 – 2006 associated with transition and enhancements to Virginia’s systems of monitoring and supervision and data collection.
- Two improvement activities were added to address referral and follow-up of premature infants and improved collaboration with regional children’s hospitals.
- An improvement activity was added to explore the possibility of establishing local system-specific targets for this indicator. The statewide percentage will be used as the target for local systems for at least the next year.

With these revisions, planned improvement activities related to increasing the percentage of the birth – 1 population served in Part C are as follows:

Activity	Timelines	Resources
1. Participate in the activities of the Legislative Subcommittee studying follow-up with children who are born prematurely	Ongoing	<u>Personnel</u> : State Part C Staff
2. Continue existing and begin new dialogues, as appropriate, in order to understand the referral process from regional children’s hospitals	Began October 2006	<u>Personnel</u> : State Part C staff
3. Explore the possibility of developing interagency agreements between the	December 2007	<u>Personnel</u> : State Part C Staff

APR Template – Part C (4)

Activity	Timelines	Resources
DMHMRSAS and regional children's hospitals to ensure timely referral of children to Part C early intervention		
4. Continue to collaborate with Care Connection and the Virginia Department of Health in ensuring referrals to Part C for potentially eligible infants identified through Virginia's expanded newborn screening (blood test) program for chronic conditions	Ongoing	<u>Personnel:</u> State Part C staff <u>Other:</u> Care Connection staff
5. Continue to collaborate with Department of Health and Department of Education on development and statewide implementation of the VISITS data base that automatically refers to Part C all children who are reported with hearing loss or congenital anomalies.	Development underway Implementation date uncertain	<u>Personnel:</u> State Part C staff, Department of Health staff, Department of Education staff <u>Funding:</u> Through Department of Health
6. Collaborate with Early Head Start and Migrant Head Start to identify procedures and strategies to ensure that children served through Head Start programs who are potentially eligible for Part C are referred to the local Part C system and include in the State Interagency Agreement (see below).	April 2007	<u>Personnel:</u> State Part C Staff, Head Start staff
7. Revise the State Interagency Agreement for Part C to clarify responsibilities associated with child find and referral to the Part C system.	April 2007	<u>Personnel:</u> State Part C staff; Other Participating State Agencies' staff
8. Explore the possibility of establishing local system-specific targets for the percent of birth – 1 population served in the local Part C system	2008	<u>Personnel:</u> State Part C staff, consultant <u>Other:</u> Input from local stakeholders

Part C State Annual Performance Report (APR) for FFY 2005

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

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

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers 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
2005	1.9%

Actual Target Data for FFY 2005:

Based on the December 1, 2005 child count, **1.72%** of infants and toddlers birth to 3 were served in Virginia’s Part C early intervention system in FFY 2005 (data from www.IDEAdata.org).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Target Data

In analyzing Virginia’s status on this indicator, the following additional data was considered:

- The annual child count for 2005 was 10,212, which is a 6.2% increase over 2004.
- Approximately 30% of infants and toddlers referred to the Part C system did not enter services (almost 4,400 in FFY 2005). This has increased from approximately 25% in each of the preceding three years. Of those who were referred in FFY 2005 but did not receive services:
 - 49% were either evaluated and found ineligible or screened and determined not to need an evaluation;
 - 26% refused either the screening or evaluation;
 - The local system was never able to contact 20% of the families;
 - 5% were evaluated eligible but the family either refused Part C services or was lost to contact.

- Eighteen (18) local systems were at or above the State target for FFY 2005, serving between 1.9% and 3.65% of the local birth – 3 population. The remaining 22 local systems were serving between .92% and 1.88% of the local birth – 3 population.

Explanation for Slippage

Despite implementing a number of improvement activities, the percentage of the birth – 3 population served in Virginia's Part C early intervention system decreased from FFY 2004 to FFY 2005. The following factors may have impacted that decrease:

- There appears to be an increasing percentage of children and families referred to the Part C system who do not end up receiving Part C services. In particular there appear to be a large number of referrals for children who are not eligible under Part C.
- There is anecdotal evidence that private providers are doing more advertising about services for infants and toddlers and that more families are choosing services outside the Part C system.
- During DMAS trainings it became clear that staff in most of the new Medicaid managed care organizations have no knowledge about the supports and services available through the Part C system or how to make a referral to the local central points of entry to access these supports and services. Instead, many of the managed care case managers are making direct referrals to individual therapists outside of the Part C system.
- There have been recent shifts in the cultural groups represented in some areas of the Commonwealth. However, in most cases, there has been no corresponding shift in public awareness/child find strategies. There is also a need to better address public awareness for parents who are unable to read.
- Local Part C systems have reported that hospitals are delaying referrals to the Part C system until insurance runs out for therapy through hospital clinics/providers.
- Children without a medical home lose a primary mechanism for referral.

In addition to the activities described in Indicator 5, the following improvement activities related to increasing the percentage of the birth – 3 population served in Virginia's early intervention system were implemented in FFY 2005:

- Virginia continued to implement a statewide public awareness campaign that includes radio spots, media kits, posters and collateral materials, media lists, and packets of materials with tactics for reaching traditionally underserved populations. Some of the public awareness campaign activities are implemented at the State level, but most are done at the local level using State-provided materials (which are available in English, Spanish and Farsi).
- State Part C staff presented information on Part C early intervention to the coordinators of the 8 Project LINK sites in Virginia and strategies for improving referrals between the two programs.
- The Infant & Toddler Connection of Virginia Update, which is widely disseminated to stakeholders in Virginia's early intervention system, provided linkages with evidence-based materials and information related to identification, evaluation and services for children affected by substance abuse or child abuse and neglect, those with infant mental health concerns, and children with hearing loss.
- Both the Infant & Toddler Connection of Virginia Update and the Virginia Department of Health website provided links to Bright Futures resources for physicians, including information on screening and identification.
- State Part C staff presented information about early intervention and the process for making referrals required under CAPTA and Part C at meetings of Department of Social Services regional supervisors statewide.
- Virginia's revised Part C Policies and Procedures, targeted for submission to OSEP in April 2007, include more specific language related to identifying children from under-represented populations such as children who are homeless or wards of the State as well as specific procedures for identifying and referring children affected by substance abuse or involved in founded cases of child abuse or neglect.

- Part C technical assistance consultants discussed public awareness and child find with local system managers at regional meetings, with an emphasis on establishing and maintaining communication with primary referral sources.

Based on Virginia’s status with regard to this indicator, the State Lead Agency already has begun implementation of the following improvement activities in FFY 2006:

- Child find was identified as one of the two areas of focus for monitoring and improvement in FFY 2006 [This is not yet a final decision; final recommendation from VICC is pending]. On-site focused monitoring will be completed with the lowest performing local systems and state-level improvement activities associated with this indicator will be a priority for the coming year.
- Corrective Action Plans have been issued to 19 local systems in order to improve performance on this indicator.
- Through a contract with a national consultant, a stakeholder group has begun work on reviewing and revising Virginia’s ability to pay policies and procedures and establishing Family Cost Participation practices that better ensure that a family’s inability to pay is not a barrier to seeking or accepting supports and services through Virginia’s Part C system.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Improvement activities and timelines in the State Performance Plan have been revised as follows:

- The activity to update the eligibility projection model was modified. Rather than updating the existing projection model, Virginia will explore the possibility of establishing local system-specific targets for this indicator. This might result in using the eligibility projection model employed in the 2004 Virginia Cost Study or may involve an alternate tool or process. The statewide percentage will be used as the target for local systems for at least the next year.
- Activities involving drill-down analysis of the birth-3 data (e.g., looking at proportionality of race/ethnicity served and infants referred but not in services) were deleted as State-level activities, but will be used as appropriate in local Corrective Action Plans to determine how to most effectively increase the percentage of infants served in local Part C systems who did not meet the target.
- Plans to determine the need for follow-up training after Part C staff presentations to regional DSS managers were changed since regional managers were provided with a mechanism to notify the Part C Office if additional training needs were identified.
- The activity related to evaluating the effectiveness of other improvement activities by looking at child count and live birth data was deleted since the Annual Performance Report process ensures such evaluation occurs.
- Timelines associated with activities involving the State interagency agreement were delayed to ensure the agreement supports implementation of the revised Part C Policies and Procedures, which are targeted for submission to OSEP by April 2007.
- Timelines associated with development of a statewide referral form with release of information for children referred through CAPTA were delayed pending approval of the form through the Office of the Attorney General.
- Improvement activities were added to address the following:

APR Template – Part C (4)

- Ensure that inability to pay is not a barrier to families seeking or accepting supports and services through the Part C early intervention system
- Conducting on-site focused monitoring with the lowest performing local systems
- Provide technical assistance and follow-up to local systems in implementing corrective action plans
- Analyze the findings from on-site focused monitoring and implementation of CAPs to identify statewide trends and improvement activities necessary to address systemic issues
- Develop written guidance on considerations in evaluation and assessment, especially related to difficult to measure aspects of development, infant mental health issues, premature infants and atypical development
- Develop or linking to existing evidence-based materials for use with primary referral sources in improving the appropriateness of referrals
- Provide training to managed care organizations regarding the supports and services available through the Part C system, the process for making referrals and the key role the managed care case managers play in facilitating access to these supports and services for eligible children and families
- Provide technical assistance (through written policy clarification, information in the Update and follow-up at regional meetings) on the appropriate use of developmental screening before and after referral to the local Part C system.
- Review and revising, as needed, statewide public awareness materials and practices to ensure appropriateness with traditionally under-served populations (e.g., minorities; low income, rural, homeless, wards of the State).
- Develop a quarterly newsletter for physicians with information about what's happening in Part C
- Provide technical assistance at regional meetings of local system managers on strategies to use with families who are difficult to contact
- Add a report function in ITOTS that will list by referral source, whether the child was found eligible or not.

With these revisions, planned improvement activities related to increasing the percentage of the birth – 3 population served in Part C are as follows:

Activity	Timelines	Resources
1. Provide technical assistance and follow-up to local systems in implementing corrective action plans	Beginning January 2007	<u>Personnel</u> : State Part C Staff
2. Provide technical assistance at regional meetings of local system managers on strategies to use with families who are	March 2007	<u>Personnel</u> – State Part C Staff

APR Template – Part C (4)

Activity	Timelines	Resources
difficult to contact		
3. Collaborate with Early Head Start and Migrant Head Start to identify procedures and strategies to ensure that children served through Head Start programs who are potentially eligible for Part C are referred to the local Part C system and include in the State interagency agreement (see below)	April 2007	<u>Personnel</u> : State Part C staff; Head Start staff
4. Revise the State Interagency Agreement for Part C to clarify responsibilities associated with child find and referral to the Part C system.	April 2007	<u>Personnel</u> : State Part C staff; Other Participating State Agencies' staff
5. Revise Virginia's ability to pay procedures to establish Family Cost Participation practices that better ensure that a family's inability to pay is not a barrier to seeking or accepting supports and services	Practices document complete – April 2007 Statewide training on practices – June 2007	<u>Personnel</u> : State Part C Staff; national consultants <u>Funding</u> : Already in Part C budget <u>Other</u> : Stakeholder workgroup
6. Provide training to managed care organizations regarding the supports and services available through the Part C system, the process for making referrals and the key role the managed care case managers play in facilitating access to these supports and services for eligible children and families	May 2007	<u>Personnel</u> – State Part C Staff, DMAS staff
7. Conduct on-site focused monitoring with lowest performing local systems on this indicator	June 2007	<u>Personnel</u> : State Part C Staff
8. Develop new or link to existing evidence-based materials for use with primary referral sources in improving the appropriateness of referrals	July 2007	<u>Personnel</u> – State Part C Staff
9. Add a report function in ITOTS that will list, by referral source, how many referrals were found eligible or not	July 2007	<u>Personnel</u> – State Part C and IT Staff <u>Funding</u> – Already in Part C Budget
10. Analyze the findings from on-site focused monitoring and	August 2007	<u>Personnel</u> : State Part C Staff; national consultants

APR Template – Part C (4)

Activity	Timelines	Resources
development of CAPs to identify statewide trends and improvement activities necessary to address systemic issues		
11. Provide guidance to local system managers and providers on considerations in evaluation and assessment, especially related to difficult measure aspects of development, infant mental health issues, premature infants, and atypical development	Written guidance developed – August 2007 Follow-up technical assistance in regional meetings – September 2007	<u>Personnel</u> : State Part C staff <u>Other</u> : Stakeholder workgroup
12. Provide technical assistance (through written policy clarification, information in the <u>Update</u> and follow-up at regional meetings) on the appropriate use of developmental screening before and after referral to the local Part C system	October 2007	<u>Personnel</u> – State Part C Staff <u>Other</u> – Stakeholder input
13. Review and revise, as needed, statewide public awareness materials and practices to ensure appropriateness with traditionally under-served populations (e.g., minorities; low income, rural, homeless, wards of the State)	December 2007	<u>Personnel</u> – State Part C Staff, possibly consultant <u>Funding</u> – To be determined <u>Other</u> – Stakeholder input
14. Develop a quarterly newsletter to physicians with information about what’s happening in Part C	December 2007	<u>Personnel</u> – State Part C Staff <u>Funding</u> – Pending
15. Revise the existing Virginia Part C Developmental Checklist Brochure.	December 2007	<u>Personnel</u> : State Part C staff <u>Funding</u> : Pending <u>Other</u> : Input from local stakeholders
16. Explore the possibility of establishing local system-specific targets for the percent of birth – 3 population served in the local Part C system	December 2008	<u>Personnel</u> : State Part C staff <u>Other</u> : Input from local stakeholders

Part C State Annual Performance Report (APR) for FFY 2005

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

98% of eligible infants and toddlers with IFSPs had an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Target Data

Virginia is pleased to report this high level of compliance and additional progress from the baseline of 93% in FFY 2005. The data for FFY 2005 was reported through ITOTS, Virginia's Part C data system, and includes all eligible infants and toddlers referred to Part C statewide between April 1, 2006 and June 30, 2006. The 45-day timeline was met for 1180 of the 1207 eligible children referred (1180 /1207 = 98%). Both the numerator and denominator include 85 children for whom the timeline was exceeded due to family reasons or other exceptional circumstances beyond the local system's control.

45-Day Timeline: April 1, 2006 – June 30, 2006

# of eligible children referred	# of children for whom 45-day timeline was met	# of children for whom timeline was exceeded due to family reasons or exceptional circumstances	% of children with evaluation, assessment and initial IFSP meeting within 45 days
1207	1180	85	98%

Thirty-one (31) local systems were at 100% compliance with this indicator. The remaining 9 local systems had compliance percentages that ranged from 44% - 99%. Data on the correction of

previously identified local noncompliance with the 45-day timeline requirements is addressed in Indicator 9 of the APR.

In order to confirm documentation of family reasons and exceptional circumstances for exceeding the 45-day timeline, local systems were required to submit that documentation to the Part C Office for review and verification.

Data on Evaluation and Assessment

The following data related to evaluation and assessment is reported in accordance with OSEP’s March 2006 letter to Virginia requiring data in this APR demonstrating full compliance with requirements (a) to complete a comprehensive evaluation in each area of development and (b) to have the IFSP reflect the child’s level of functioning in each of these areas.

Data on Evaluation and Assessment Requirements

Requirement	Baseline Data FFY 2004	Target	Actual Data FFY 2005
Comprehensive evaluation in all developmental areas	90%	100%	95%
IFSP includes present level of functioning in all required areas	71%	100%	95%

Actual data for FFY 2005 is based on monitoring data from all 40 local Part C systems in Virginia. The records of children with IFSPs developed between November 1, 2005 and June 30, 2006 were reviewed to determine whether each child received a comprehensive evaluation prior to the initial IFSP and whether the present level of functioning in all required areas was included on the IFSP. Each local Part C system followed the same method for selecting records for the review, as follows:

- The number of records to be reviewed was based on the number of children who had IFSPs developed in the local Part C system in the given time period:
 - 0 - 10 kids = 100%
 - 11 - 20 kids = 50%
 - 21 - 100 kids = 25%
 - 101 – 200 kids = 20%
 - 201 – 300 kids = 15%
 - 301 - 600 kids = 10%
 - Over 600 kids = select 60 records
- Once the number of records was determined, the exact records to be reviewed were selected based on a random number chart.

Based on the FFY 2005 data, 26 local systems were at 100% compliance with the requirement for a comprehensive evaluation in all areas of development. The remaining 14 local systems had compliance percentages that ranged from 62% - 97%. There were also 26 local systems at 100% compliance with the requirement to include present levels of functioning in all required areas on the IFSP. The remaining 14 local systems had compliance percentages that ranged from 60% - 97%. Data on the correction of previously identified local noncompliance with these requirements is addressed in Indicator 9 of the APR.

Explanation of Progress

The following improvement activities contributed to the significant progress demonstrated on the 45-day timeline and evaluation requirements during FFY 2005:

- State Part C staff generated reports from ITOTS for all local systems following the first, second, and fourth quarters of the fiscal year. Reports were generated after the third quarter only for those local systems who had not yet corrected noncompliance. These reports were used in collaboration with the local system manager to monitor progress toward compliance and to target technical assistance to local systems based on local issues and barriers to achieving and maintaining compliance.
- Five local systems received intensive technical assistance in the Fall of 2005 based on their low performance on this indicator. This level of technical assistance involved administrators at higher levels of the State and local lead agencies in identifying barriers to compliance and

determining how the State Lead Agency could support local efforts to overcome those barriers and achieve compliance. This strategy proved very effective. Of the 5 local systems targeted, 4 reached 100% compliance within one year of the noncompliance being identified, and the fifth local system was at 98% compliance at the end of that one-year period.

- State Part C technical assistance consultants addressed issues related to evaluation and assessment and the 45-day timeline at regional meetings of local system managers throughout the year.
- Training through Kaleidoscope: New Perspectives in Service Coordination (Levels I and II) was revised to put more emphasis on beginning the evaluation and assessment process at the first visit with the family in order to ensure a comprehensive evaluation and time for completion of the evaluation and assessment and initial IFSP meeting within the 45-day timeline.
- Break-out sessions at the 2006 Virginia Early Intervention Conference addressed various aspects of evaluation and assessment, including hearing and vision, teaming and use of videotaping.

In order to address local noncompliance with requirements associated with 45-day timeline, corrective action plans have been issued in FFY 2006, as follows:

- 4 local systems received corrective action plans to address the 45-day timeline;
- 6 local systems received corrective action plans to address the requirement for a comprehensive evaluation in all areas of development; and
- 10 local systems received corrective action plans to ensure IFSPs include the present level of functioning in all required areas.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

The following revisions to the SPP improvement activities have been made to ensure continued progress toward reaching the target of 100% compliance:

- Clarification was added that ongoing technical assistance will address both the 45-day timeline and related evaluation and assessment requirements.
- The timeline for the activity related to intensive technical assistance to local systems with continuing noncompliance was revised to indicate the activity occurred in October 2005 rather than began in October 2005. Revisions to Virginia's system of supervision and monitoring have established a system of focused monitoring for ongoing implementation.
- The activity regarding sanctions was deleted since the revised Part C policies and procedures and local contract will address this issue (see Indicator 9).
- The following improvement activities have been added:
 - Continue service coordination training through Kaleidoscope.
 - Review and revise, as needed, the *Policy Clarification and Technical Assistance on the Implementation of Requirements for Vision and Hearing Components of the Part C Evaluation and Assessment* to clarify circumstances under which the use of the Virginia screening tools is not required.

Planned improvement activities related to the 45-day timeline are as follows:

APR Template – Part C (4)

Virginia
State

Activity	Timelines	Resources
1. Continue to provide technical assistance to local systems based on local corrective action plans developed to address noncompliance with the 45-day timeline, including evaluation and assessment requirements.	Ongoing	<u>Personnel</u> : State Part C staff <u>Funding</u> : Already in Part C budget
2. Continue service coordination training through Kaleidoscope	Ongoing	<u>Personnel</u> – Part C staff; Integrated Training Collaborative <u>Funding</u> – Already in Part C Budget
3. Review and revise, as needed, the <i>Policy Clarification and Technical Assistance on the Implementation of Requirements for Vision and Hearing Components of the Part C Evaluation and Assessment</i> to clarify circumstances under which the use of the Virginia screening tools is not required	October 2007	<u>Personnel</u> : State Part C Staff

Part C State Annual Performance Report (APR) for FFY 2005

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
- C. Transition conference, if child potentially eligible for Part B.

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

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

- A. **86%** of IFSPs include transition steps and services
- B. Notification was sent to the local school division for **89%** of children potentially eligible for Part B
- C. A transition conference was held for **87%** of children potentially eligible for Part B

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Target Data

Target data for FFY 2005 is based on monitoring data from all 40 local Part C systems in Virginia. The records of children who exited or would be exiting the Part C system between January 1, 2006 and September 30, 2006 were reviewed to determine compliance with the three transition requirements included in Indicator 8. Each local Part C system followed the same method for selecting records for the review, as follows:

- The number of records to be reviewed was based on the number of children who transitioned from the local Part C system in the given time period:
 - 0 - 10 kids = 100%
 - 11 - 20 kids = 50%

APR Template – Part C (4)

Virginia
State

▪ 21	-	100 kids	=	25%
▪ 101	-	200 kids	=	20%
▪ 201	-	300 kids	=	15%
▪ 301	-	600 kids	=	10%
▪ Over		600 kids	=	select 60 records

- Once the number of records was determined, the exact records to be reviewed were selected based on a random number chart.

A. *Transition Steps and Services* – Of the 550 records reviewed, the most recent IFSP included transition steps and services for 475 of the children.

(475 / 550 = 86%)

Eighteen (18) local systems achieved 100% compliance with this requirement. The percentage of compliance for the remaining 22 local systems ranged from 0% - 98%.

B. *Notification to the LEA* – Records were reviewed for a total of 533 children considered potentially eligible for Part B. Of the 533 records, there were 32 in which the family did not allow the notification to the school division. Of the 501 families who allowed notification, the information was sent to the school division for 448 of the children.

(448/501 = 89%)

Twenty-eight (28) local systems reached 100% compliance with this requirement. The remaining 12 local systems had compliance percentages that ranged from 0% - 96%.

C. *Transition Conference* – Records were reviewed for a total of 533 children considered potentially eligible for Part B. For 176 of these children, the parent did not give consent for a transition conference to be held. The transition conference was held for 287 of the 330 families who gave consent for a conference.

(287 / 330 = 87%)

The numerator and denominator include 49 children for whom the conference did not occur within the required time frames due to family preference or exceptional circumstances.

For the 18 records where there was a delay in the transition conference due to system reasons, 4 were due to Part C scheduling difficulties, 4 were due to school system scheduling difficulties and 10 were listed as “other.”

This year’s on-site data verification did not include State confirmation of documentation of exceptional circumstances associated with the transition conference. However, the instructions with the record review form gave examples of exceptional circumstances and training on the record review form was provided to local system managers via a statewide technical assistance call, follow-up written answers to questions received during and immediately after the call, and follow-up technical assistance through regional meetings of local system managers. Local system managers were required to submit signed verification confirming the accuracy of the local record review data

Seventeen (17) local systems achieved 100% compliance with this requirement. Two (2) local systems had no children whose families consented to a transition conference. The remaining 21 local systems had compliance percentages that ranged from 0% to 95%.

Explanation of Progress

Although Virginia has not yet reached 100% compliance, there has been progress in all 3 of the requirements for this indicator, including especially strong progress related to the transition conference. A number of improvement activities that were completed in FFY 2005 contributed to this progress:

- Meetings were conducted regionally with local system managers and then with service coordinators to determine how transition is done locally and what barriers exist to meeting

Part C transition requirements. These discussions were held using a guided interview. Responses were used by technical assistance consultants to assist local systems with individual issues and to identify topics for discussion at monthly regional meetings of local system managers. Statewide trends and issues identified from the information gathered were used to identify additional improvement activities at the State level and topics for discussion between the State Lead Agency for Part C and the Virginia Department of Education.

- Technical assistance was provided routinely at regional meetings of local system managers on a variety of issues related to transition.
- State Part C staff provided on-site transition training to one local system.
- The record review protocol used to collect data on the transition requirements was revised, with input from local systems, to better align with the final wording of the SPP transition indicator and to provide more detailed instructions.
- Significant revisions to the transition page of the statewide IFSP form and corresponding instructions are underway. The revised transition page will include more detail, prompting service coordinators and families to discuss, complete (as appropriate), and document the transition steps and services, including notification to the school division and the transition planning conference. Local stakeholders and a representative from the Virginia Department of Education have been involved in this process, and the final changes are expected to result in substantial improvement in compliance with the transition requirements.
- Revisions to Virginia's Part C Policies and Procedures, including simplifications of language related to transition requirements, have been drafted and are expected to be submitted to OSEP in April 2007.
- Training for service coordinators, *Kaleidoscope: New Perspectives on Service Coordination* (Level I), was revised to more thoroughly address issues of compliance with transition requirements. These revisions occurred in collaboration with personnel from the Department of Education, local system stakeholders, and a national consultant.
- Transition was covered in one break-out session and a keynote address at the 2006 Virginia Early Intervention Conference.
- Data elements associated with reporting on the 3 requirements within the SPP transition indicator were identified as required elements during the analysis of the Part C data system, ITOTS, which was completed this year. The addition of those elements, however, will occur in a later phase of data system enhancements after ITOTS is moved into the State Lead Agency from its current location at an outside contractor.

Based on Virginia's status with regard to this indicator, the State Lead Agency has begun implementation of the following improvement activities in FFY 2006:

- Transition was identified as one of the two areas of focus for monitoring and improvement in FFY 2006 [This is not yet a final decision; final recommendation from VICC is pending]. On-site focused monitoring will be completed with the lowest performing local systems and state-level improvement activities associated with this indicator are a priority for the coming year.
- Corrective Action Plans have been issued to
 - 18 local systems related to transition steps and services on the IFSP;
 - 10 local systems related to notification to the LEA; and
 - 20 local systems related to the transition conference.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

The following revisions to the SPP improvement activities have been made to ensure continued progress toward reaching the target of 100% compliance:

- The activity to revise the existing transition technical assistance document was revised to one involving development and dissemination, in collaboration with the Department of Education,

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of a series of transition topic papers that, put together, would serve as a handbook for transition.

- Timelines associated with revising State Part C Policies and Procedures and the State interagency agreement were delayed to allow for review of any additional regulatory language related to Parts C or B of the 2004 Individuals with Disabilities Education Improvement Act.
- Improvement activities were added in order to address the issues identified during the analysis of FFY 2005 data related to transition:
 - Conduct on-site focused monitoring with the lowest performing local systems on this indicator
 - Identify State-level contacts for both the Part C and Part B systems for problem-solving when transition issues arise
 - Identify parent advocates that are available in communities to support families when the transition process becomes stalled or difficult
 - Collaborate with Training and Technical Assistance Centers (T-TACs), through the Department of Education, to provide local technical assistance and training around transition issues
 - Include a transition column in the Infant & Toddler Connection of Virginia Update to highlight/share effective local transition practices

Planned improvement activities related to transition are as follows:

Activity	Timelines	Resources
1. Identify a state-level Part C contact person for problem-solving when transition issues arise between Part C and Part B and request that Part B do the same	March 2007	<u>Personnel</u> – State Part C and Part B Staff
2. Identify parent advocates that are available in communities to support families when the transition process becomes stalled or difficult	March 2007	<u>Personnel</u> – State Part C Staff, Family Involvement Project Staff
3. Conduct a careful review of Virginia’s Policies and Procedures for transition and revise as needed to address new language in IDEA 2004 and to facilitate compliance with Part C transition requirements	April 2007	<u>Personnel</u> – State Part C Staff
4. Revise the State Interagency Agreement for Part C to establish specific procedures to be used at the local level to meet Part C transition requirements	April 2007	<u>Personnel</u> : State Part C staff; Other Participating State Agencies’ staff
5. Collaborate with T-TACs to	May 2007	<u>Personnel</u> – State Part C Staff, T-

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Activity	Timelines	Resources
provide local technical assistance and training around transition issues		TAC Staff
6. Revise the statewide IFSP form transition page and other sections of the IFSP form, as needed, to prompt consistent inclusion of desired information and to support the service coordinator in meeting timelines. Revise IFSP instructions and sample IFSPs accordingly	June 2007	<u>Personnel</u> : State Part C staff <u>Other</u> : Input from local stakeholders
7. Conduct on-site focused monitoring with lowest performing local systems on this indicator	June 2007	<u>Personnel</u> – State Part C Staff
8. Include a transition column in the Part C Update to highlight/share effective local transition practices	June 2007	<u>Personnel</u> – State Part C Staff
9. Develop and disseminate to local Part C systems and local school divisions a series of monthly topic papers related to transition in collaboration with DOE	September 2007	<u>Personnel</u> –State Part C and Part B Staff <u>Other</u> - Stakeholder input
10. Explore development of web-based training on transition that would be accessible to all Part C service providers	2008	<u>Personnel</u> : State Part C staff, Integrated Training Collaborative <u>Funding</u> : To be determined

Part C State Annual Performance Report (APR) for FFY 2005

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.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

In FFY 2005, 75% of local noncompliance was corrected within one year of identification

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Target Data

In Virginia’s baseline data for FFY 2004 (as reported in the State Performance Plan) there were only 2 findings of noncompliance within all three categories for which the one-year period for correction had expired. In both cases, the non compliance was corrected within one year, so, when compiled, Virginia’s baseline data was 100%.

FFY 2005 Data on Correction on Noncompliance

Requirement	Monitoring Method(s)	Year Identified	# Local Systems Reviewed	# Findings	# Corrected within 1 year	% Corrected within 1 year
45-day timeline	Data review Off-site audit of documentation	FFY 2004	40	20	16 2 more systems have since corrected; Other 2 are at 95%, 99%	80%

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Virginia
State

Requirement	Monitoring Method(s)	Year Identified	# Local Systems Reviewed	# Findings	# Corrected within 1 year	% Corrected within 1 year
Comprehensive evaluation in all areas	On-site record review	FFY 2003	4	4	3 Other system at 97%	75%
IFSP reflects child's level of functioning in all areas	On-site record review	FFY 2003	4	4	2 Other systems at 90%, 95%	50%
IFSP includes planned frequency of each service	Local record review	FFY 2005	40	18	N/A 15 systems had already reached compliance at 6 months	N/A
IFSP includes planned intensity of each service	Local record review	FFY 2005	40	28	N/A 19 local systems had already reached compliance at 6 months	N/A
Comprehensive evaluation in all areas	Local record review	FFY 2005	40	26	N/A 17 systems had already reached compliance as of 6/30/06	N/A
IFSP reflects child's level of functioning in all areas	Local record review	FFY 2005	40	34	N/A 21 systems had already reached compliance as of 6/30/06	N/A
TOTALS				28	21	75%

N/A = The one-year deadline for correction has not yet been reached

Explanation of Slippage

While Virginia appears to have slipped in compliance with this indicator, the decrease from 100% to 75% is more likely a reflection of the larger number of findings addressed in FFY 2005 (28 findings compared with 2 in FFY 2004). Since May 2005, when Virginia began specifically identifying (naming) noncompliance within its monitoring reports, **the local systems that have failed to corrected noncompliance within one year of identification have been at or above 90% compliance at the end of the one-year correction period.** Because of that level of improvement and their status near the target, follow-up with those local systems has involved individualized technical assistance to address any remaining local barriers to full compliance.

The following improvement activities were completed in FFY 2005 in order to ensure correction of noncompliance within one year of identification:

- Timelines and a consistent format for monitoring reports were developed and used consistently to ensure noncompliance is identified clearly and promptly regardless of the monitoring method used. These reports include citation of relevant federal regulations and formal evidence-based findings.
- Procedures were developed and implemented to require written State Lead Agency approval of local corrective action plans (formerly called plans of improvement).
- A filing/tracking system was implemented within the State Lead Agency to ensure timely follow-up on local corrective action plans.
- A Monitoring and Supervision Advisory Committee was established. The Committee, which was comprised of local stakeholders in the Part C system, provided input to the State Lead

Agency on the development of the focused monitoring approach and on the development and use of sanctions and incentives.

- A variety of mechanisms were identified and used to determine whether a local system had corrected noncompliance within one year of identification. Those mechanisms include, but are not limited to, off-site review of documentation, review of ITOTS data, interviews, and on-site record review.
- Topics related to areas of noncompliance (e.g., 45-day timelines, evaluation and assessment, transition) were discussed routinely by Part C technical assistance consultants at regional meetings of local system managers.
- The Monitoring and Improvement Measurement System (MIMS), which examined local systems' compliance with all Part C requirements on a 4-year cycle, was phased out and a focused monitoring approach, which uses multiple methods to detect and correct noncompliance, was developed.

The following additional activities have already been implemented in FFY 2006:

- Virginia's revised Part C Policies and Procedures (targeted for submission to OSEP in April 2007) include procedures related to Virginia's focused monitoring approach, public reporting and the use of local determinations and related sanctions in accordance with federal requirements.
- The FFY 2006 Local Contract for Continuing Participation in Part C includes more specific language related to monitoring procedures.
- A new format has been established for corrective action plans requiring evidence of change and benchmarks.
- The State Lead Agency established a series of monthly conference calls that cover topics related to monitoring and supervision. To date these calls have addressed the revised local record review form and instructions, data verification, FFY 2005 data for this report, and public reporting. Approximately 50% - 75% of the local system managers participate on any one call.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Since the improvement activities identified in the State Performance Plan have been accomplished, the following activities have been added:

- Finalize the format and process for annual public reporting on each local system
- Conduct training and follow-up technical assistance to local systems on the collection and use of data for ongoing local oversight and monitoring as well as improvement planning
- Provide technical assistance and follow-up to local systems on the implementation of corrective action plans
- Conduct on-site focused monitoring visits with the lowest performing local systems in each of the annual focus areas identified
- Implement the process for making an annual determination about the status of each local system
- Conduct statewide training for local system managers on oversight and management of the local Part C system to both prevent and correct noncompliance

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Virginia
State

- Hire additional Part C monitoring staff at the State Lead Agency in order to implement the increased level of supervision and monitoring established in Virginia’s revised Part C Policies and Procedures.

The following table provides a list of those activities, along with timeline and resources:

Activity	Timelines	Resources
1. Conduct training and follow-up technical assistance on the collection and use of data for ongoing local oversight and monitoring as well as improvement planning	Training: January – February 2007 TA: Ongoing	<u>Personnel</u> : State Part C Staff <u>Funding</u> : Already in Part C Budget
2. Provide technical assistance and follow-up to local systems on the implementation of corrective action plans	Beginning January 2007	<u>Personnel</u> : State Part C Staff
3. Finalize the format and process for annual public reporting on each local system	February 2007	<u>Personnel</u> : State Part C Staff
4. Implement the process for making an annual determination about the status of each local system	Within 60 days of state determinations being issued by OSEP Estimated Spring 2007	<u>Personnel</u> : State Part C Staff
5. Conduct on-site focused monitoring visits with the lowest performing local systems in each of the annual focus areas identified	June 2007	<u>Personnel</u> : State Part C Staff
6. Conduct statewide training for local system managers on oversight and management of the local Part C system to both prevent and correct noncompliance	June 2007	<u>Personnel</u> – State Part C Staff; Integrated Training Collaborative <u>Funding</u> – Already in Part C Budget
7. Hire additional Part C monitoring staff at the State Lead Agency in order to implement the increased level of supervision and monitoring established in Virginia’s revised Part C Policies and Procedures	July 2007	<u>Funding</u> : Already in Part C Budget

Part C State Annual Performance Report (APR) for FFY 2005

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
2005	100%

Actual Target Data for FFY 2005:

The State Lead Agency received 1 signed written complaint in FFY 2005, and the report was not issued within the 60-day timeline (there were no exceptional circumstances).

$$0 / 1 = 0\%$$

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

While the investigation of the complaint and the initial report were completed within the 60-day timeline, there were delays in receiving the approval of the report from the Office of the Attorney General (OAG). The report must be approved by the OAG prior to it being issued. During the delay, the State Part C dispute resolution consultant remained in ongoing contact with the parent who filed the complaint. In addition, Part C staff worked with the local Part C system to begin addressing the issues identified in the complaint. The local system addressed the need for trained providers by hiring a part-time employee who had the needed training and by having existing staff attend training. An appropriate assessment and treatment tool was purchased and the local system developed a manual with information for parents about the specific diagnosis of the child involved in the complaint.

In order to ensure that timelines are met in the future, procedures and timelines have already been adjusted within the State Lead Agency to ensure additional time for OAG review and approval within the 60-day timeline.

The following activities related to dispute resolution were completed in FFY 2005:

- Virginia continued to implement a number of procedures that support informal resolution of disputes. When disputes arise, local systems are encouraged to resolve those disputes locally using informal mechanisms. Virginia’s Part C Family Involvement Program (FIP) is also available and used by families to assist in resolving disputes informally. When disputes cannot be successfully resolved at the local level and a signed written complaint is submitted to the State Lead Agency, state staff members work closely with local systems and families within the first 10 days after receipt of a complaint to determine whether an informal resolution can be reached.

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Virginia
State

- A presentation on dispute resolution was included at the 2006 Virginia Early Intervention Conference.
- Training for service coordinators, *Kaleidoscope: New Perspectives in Service Coordination*, addresses both formal and informal options for dispute resolution. Ninety-eight (98) service coordinators were trained through Kaleidoscope in FFY 2005 and early FFY 2006.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

Timelines for both activities in the SPP were modified to allow for completion of priority projects in FFY 2005 associated with transition and enhancements to Virginia's systems of monitoring and supervision and data collection. New timelines take into consideration the need to prioritize in FFY 2006 improvement activities related to Indicators 1 (timely start of services), 7 (percentage of children served), and 8 (transition) based on statewide performance related to the targets on those indicators.

With these revisions, planned improvement activities related to dispute resolution are as follows:

Activity	Timelines	Resources
In collaboration with the Family Involvement Project, develop a dispute resolution handbook with information about the three formal ways of resolving disputes in Virginia (administrative complaint, mediation, due process hearing), for use by service providers and families	2008	<u>Personnel</u> : State Part C staff, Family Involvement Project
Develop and implement a mechanism to collect data on the number of potential complaints that are resolved informally through the efforts of the Part C Office or the Family Involvement Project.	2008	<u>Personnel</u> : State Part C staff, Family Involvement Project

Part C State Annual Performance Report (APR) for FFY 2005

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
2005	100%

Actual Target Data for FFY 2005:

There were no due process hearing requests in FFY 2005.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Please see discussion of revisions in Indicator 10.

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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
2005	N/A

Actual Target Data for FFY 2005:

N/A

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Virginia has not adopted Part B due process procedures.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

N/A

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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
2005	N/A

Actual Target Data for FFY 2005:

There were no requests for mediation in FFY 2005

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Based on guidance from the Office of Special Education Programs (OSEP), the targets in Virginia's SPP were revised to indicate that targets are not required until mediation requests total 10 or more in a reporting period. For the same reason, the improvement activities for this indicator were deleted (these same activities were listed under Indicators 10 and 11 in the original SPP and remain there).

Part C State Annual Performance Report (APR) for FFY 2005

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

- Measurement:** State reported data, including 618 data, State performance plan, and annual performance reports, are:
- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
 - b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2005	100%

Actual Target Data for FFY 2005:

For FYY 2005, **83%** of required data was submitted in a timely manner.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

Timely

For data due between July 1, 2005 and June 30, 2006 Virginia submitted all OSEP-required data on or before their due dates, except for child count data:

- Child count data was submitted late on March 30, 2006 (due February 1, 2006)
- Services, settings, exiting, and personnel data were submitted on October 26, 2005 (due November 1, 2005)
- The State Performance Plan, including dispute resolution data, was submitted on November 22, 2005 (due December 1, 2006)

(5 / 6 = 83%)

The child count report was submitted after the due date for the following reasons:

- There was a delay in receiving necessary data from the Department of Education; and
- Until Virginia’s Part C data system, ITOTS, can be enhanced, local systems are required to manually update the primary service setting for each eligible child to reflect the IFSP in effect on December 1. The process requires that the local system verifies the December 1 child count data no later than January 10 and submits updated primary service setting data by February 1. Since this was the first year that primary service setting was updated, there were delays in receiving data from some local systems and the State Lead Agency held the child count report in order to verify the count against the numbers submitted with the primary service setting data.
- The State Lead Agency has taken steps to ensure timely submission of this data in 2007.

Accurate

All data submitted to OSEP in FFY 2005 was verified for accuracy using one or more of the following mechanisms:

- ITOTS quarterly verification reports; and/or
- Signed verification statements submitted by the local system and confirming the accuracy of data submitted through ITOTS and local record reviews; and/or
- On-site data verification by State Part C staff; and/or
- Submission of documentation by the local system to the State Lead Agency for verification.

In FFY 2005 and early FFY 2006, Virginia implemented the following improvement activities to ensure the accuracy of data submitted to OSEP:

- A process was developed and implemented through ITOTS to allow local systems to annually update the primary service setting data to reflect the IFSP in effect on December 1 for each eligible child. A detailed and illustrated instruction manual was sent to each local system and technical assistance was available on an ongoing basis through the State Lead Agency.
- Verification statements were developed and implemented requiring the signature of the local system manager to confirm the accuracy of data submitted by the local lead agency to the State Lead Agency.
- Three quarterly verification reports in ITOTS, with detailed user instructions, were developed and implemented. Local system managers are required to run each of the three reports on at least a quarterly basis. Once he/she has reviewed the report, the local system manager is required to confirm the accuracy of the report by signing the quarterly verification form. This quarterly confirmation of accuracy is kept on file by the local lead agency and is made available to the State Lead Agency upon request. Annually, the local lead agency provides written verification (signed by the local system manager) to the State Lead Agency of the data accuracy based on the quarterly review of ITOTS reports.
- A statewide monitoring conference call was conducted with local system managers to ensure consistent explanation of instructions for the local record review form and the opportunity to ask questions and receive clarification. A follow-up FAQ document was produced and disseminated responding to the questions heard during the call and those submitted in writing immediately following the call.
- The State Lead Agency developed, piloted and then fully implemented a process for annual on-site data verification to confirm, through a sample of records, the accuracy of selected data submitted by the local system through ITOTS and the annual local record review. In this first year, all local systems received an on-site data verification visit to confirm the accuracy of the following data: timely start of services, evaluation in all areas of development, IFSPs with present level of functioning in all areas, race, and primary service setting. Information submitted by local systems on the annual local record review forms were verified by comparing the data submitted with documentation (i.e., the IFSP and contact notes) in the child's record. The on-site data verification process found the level of data accuracy as follows:
 - Race = 98.5%
 - Primary service setting = 99.2%
 - Timely = 90%
 - Evaluation in all areas and levels on the IFSP = 99.5%

When there were large error rates within a local system, State Part C staff interviewed the local system manager and/or data entry personnel to determine the specific procedures used locally for data collection, entry, and reporting. All data errors were corrected. Beginning in FFY 2007 there will be cyclical on-site data verification with a select group of local systems and a rotating set of data elements targeted for confirmation.

- Virginia's Part C Policies and Procedures and the Local Contract for Continuing Participation in the Part C System were revised to reflect the data verification requirements described above.

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- A detailed data requirements analysis was completed and a “master plan” was developed detailing the technology solutions needed by the State Lead Agency to meet federal and State reporting requirements related to Part C in an accurate and timely manner.
- A Data Stakeholders Group was established to assist the State Lead Agency in designing enhancements to ITOTS.
- Development began on a data dictionary with written definitions of key terms. This will become part of an overall User’s Manual for ITOTS.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005:

[If applicable]

Improvement activities and timelines in the State Performance Plan have been revised as follows:

- The activity related to MIMS was eliminated since Virginia has phased out the MIMS process for monitoring.
- Timelines to develop and implement procedures to determine local compliance with submission of data in accordance with local contract timelines and assist local systems in implementing steps to ensure immediate correction of noncompliance were revised because these procedures will be finalized within the context of the full set of changes to Virginia’s overall system of supervision and monitoring.
- The following activities have been added to support ongoing improvement:
 - Move ITOTS into the State Lead Agency to facilitate better control of data integrity and a streamlined process for making future enhancements to the system
 - Develop and disseminate an ITOTS User’s Manual, including a data dictionary
 - Implement training for State Part C staff and all local users on ITOTS, including improvements made to screens and reports
 - Develop and implement reports that flag large changes or unusual findings in local data that are then discussed with local systems to determine if errors occurred
 - Determine additional enhancements to be made to ITOTS and timelines for those improvements
 - Determine the process for selecting sites and data elements for annual on-site data verification

With these revisions, planned improvement activities related to timely and accurate data are as follows:

Activity	Timelines	Resources
1. Confirm data on 2-year-olds served through the public schools by annual receipt of a confirmation statement from the Department of Education	Begin receiving annual confirmation statement - January 2006	<u>Personnel:</u> Staff Part C staff, State Part B staff

APR Template – Part C (4)

Activity	Timelines	Resources
2. Develop and implement procedures to determine local compliance with submission of data in accordance with local contract timelines and assist local systems in implementing steps to ensure immediate correction of noncompliance.	Procedures developed – February 2007 Implementation begins - March 2007	<u>Personnel</u> : State Part C staff
3. Implement training for State Part C staff and all local users on ITOTS, including improvements made to screens and reports	For State staff – December 2006 Regional trainings for local users – January – February 2007	<u>Personnel</u> – State Part C and IT Staff <u>Funding</u> – Already in Part C budget
4. Develop and disseminate an ITOTS User’s Manual, including a data dictionary	February 2007	<u>Personnel</u> – State Part C and IT Staff
5. Move ITOTS into the State Lead Agency to facilitate better control of data integrity and a streamlined process for making future enhancements to the system	March 1, 2007	<u>Personnel</u> – State Part C and IT Staff
6. Determine the process for selecting sites and data elements for annual on-site data verification	May 2007	<u>Personnel</u> – State Part C Staff
7. Determine additional enhancements to be made to ITOTS and timelines for those improvements	June 2007	<u>Personnel</u> – State Part C and IT staff <u>Funding</u> – To be determined
8. Develop and implement reports that flag large changes or unusual findings in local data that are then discussed with local systems to determine if errors occurred	2009	<u>Personnel</u> – State Part C and IT Staff