

FLORIDA
ANNUAL PERFORMANCE REPORT (APR)
PART C

Federal Fiscal Year (FFY) 2009 – 2010



**Florida Annual Performance Report
Part C
FFY 2009 – 2010**

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Part C State Annual

Performance Report (APR) for 2009 – 2010

Overview of the Annual Performance Report Development: The Florida Department of Health, Children's Medical Services, Early Steps State Office, as the lead agency for implementation of the Individuals with Disabilities Education Act (IDEA), Part C, developed the Annual Performance Report (APR) in consultation with the Early Steps Continuous Improvement Workgroup which is a group of stakeholders representing families, providers, local Early Steps Directors, members of the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT), the Florida Department of Education (DOE), and the Early Steps Data Center. Representatives from the Office of Special Education Programs (OSEP), National Early Childhood Technical Assistance Center (NECTAC), the Southeast Regional Resource Center (SERRC), and the Data Accountability Center (DAC) also provided consultation in the development of the APR.

In this document, the Florida Department of Health, Children's Medical Services (CMS), Early Steps State Office, as the lead agency for implementation of IDEA, will be referred to as the "lead agency". In order to ensure services are provided to eligible infants and toddlers and their families in accordance with IDEA, the lead agency enters into contract with local entities. In this document, these local entities will be referenced as "local ES" or "LESs" or if singular, an "LES".

Data reported to OSEP through its contracted entity, the Data Accountability Center/WESTAT, in accordance with Public Law 108-446, Section 618, will be referenced in this document as "618 data".

In this APR, Service Coordinators will be differentiated from other providers of services to eligible children. Therefore, reference will be made to "Service Coordinators", while those individuals who provide other early intervention services will be referred to as "providers". Providers include those individuals directly employed by the LES as well as community agency personnel.

Through contract, each LES assumes responsibility for ensuring that services are provided in accordance with IDEA in a designated geographic area. Each LES employs Service Coordinators, Family Resource Specialists, and other staff to ensure eligible infants and toddlers and their families have access to Part C services. Most Service Coordinators work under the direct employment of the LES. The remainder of the workforce necessary to provide early intervention services to eligible infants and toddlers is derived from early interventionists employed by the LES, or more frequently, through a network of individuals or agencies that have a written agreement with the LES to deliver services. A national shortage of pediatric therapists and relatively low reimbursement fees for service provision has inhibited LESs from recruiting sufficient practitioners into the provider pool.

A centralized provider enrollment system was implemented in Florida to ensure that all providers of Part C services meet a specified set of training and experience qualifications. Enhancements to the CMS Provider Management System were implemented in August 2009 in order to automate the approval process and therefore, expedite enrollment.

The Florida Medicaid system has continued to transition to managed care. This has significantly reduced benefit coverage for Individualized Family Support Plan (IFSP) services, most notably therapy services. Medicaid HMO provider panels are closed in many areas of the state and panel members are primarily outpatient rehabilitation and hospital-affiliated clinic-based providers. In order to comply with IDEA's natural environment mandate, LESs

have become the payer of last resort for an increasing number of therapy services for Medicaid recipients, which has created a burden to Early Steps resources.

Delays in publication of the final regulations of Part C, IDEA 2004 delayed the lead agency's actions to finalize state policies. This has impeded the lead agency's ability to provide clear policy and guidance for LESs. Although the provisions of IDEA 2004 were effective July 2005, final regulations for implementation have not yet been released. Revisions to state policies were drafted in 2007, following release of the proposed IDEA, Part C regulations. States have not received information related to projected plans or timelines for release of final regulations. With the expectation that release of final regulations was imminent, Florida issued "interim" policy documents, incorporating the requirements of IDEA 2004, although not the provisions of the proposed regulations. The goal was to provide the LESs clear policy and guidance to assist them in meeting requirements. In the spring of 2009, Florida initiated the public participation process, per 34 CFR §§303.110 through 303.113, for those interim policies and submitted to OSEP for approval with the 2009 Part C application. These policies were subsequently approved by OSEP and on July 1, 2010, the revised policies became effective.

New requirements pursuant to the 2004 reauthorization of IDEA (development of the State Performance Plan, APR, public reporting, and determinations) have challenged the lead agency to analyze its organizational structure and make necessary changes to ensure sufficient resources are directed toward the state's system of general supervision. A realignment of staff functions in the Early Steps State Office has placed additional resources toward data management, identification and correction of noncompliance, and performance improvement activities. This realignment of lead agency staff functions was initiated in March 2008, and fully implemented in 2009-2010. This realignment has positively impacted Florida's performance.

The implementation of public reporting and determinations as required by federal law has increased statewide awareness of the importance of local and statewide performance. This has heightened attention to specific indicators and has, over time, resulted in improved statewide performance.

On an ongoing basis during the past year, lead agency staff engaged in analysis of performance, both statewide and disaggregated by LES. This analysis included such information as: progress toward the State Performance Plan (SPP) targets, status of implementation of the team-based primary service provider approach to service delivery, identification of training needs, dispute resolution issues, feedback from families, and results of Quality Assurance (QA) monitoring. This analysis provided a basis for decision-making regarding factors influencing progress or slippage and the efficacy of improvement activities. Through this analysis, the lead agency evaluated and modified improvement activities.

To assess performance and to identify noncompliance, annual QA reviews of each of the 15 LESs are conducted through self-assessment of child records randomly selected by the lead agency. The QA self-assessment information completed by each LES is submitted to the lead agency for review. The lead agency conducts a desk review of the self-assessment information and includes in its analysis a review of other pertinent data to determine consistency among various sources of information, such as prior performance, progress on the Continuous Improvement Plan (CIP), and improvement strategies implemented by the LES. When there is unexplained inconsistency across sources of information, the lead agency requests copies of documentation from child records to verify the self-assessment. If further verification is indicated, an onsite review is conducted to validate the QA monitoring results. Each year, targeted LESs are selected to receive technical assistance in the form of a facilitated self-assessment. The facilitated self-assessment is conducted onsite at the LES and provides an opportunity for lead agency staff to mentor LES staff on the correct interpretation of compliance and typically includes rich technical assistance discussions.

The finalized APR and revised SPP are posted to the Early Steps website located at http://www.cms-kids.com/providers/early_steps/reports/program_performance.html. LES Directors, Family Resource Specialists, FICCIT members, Medicaid staff, DOE staff, and other stakeholders are made aware of the website availability of the APR and revised SPP. LES Directors and Family Resource Specialists are asked to include information about how to access the APR in newsletters and other materials being sent to their provider network and families.

In February 2010, the lead agency reported to the public on LES performance toward the targets in the SPP. Public reporting of state and LES performance is posted to the Early Steps website located at http://www.cms-kids.com/providers/early_steps/reports/program_performance.html. The format for public reporting was developed in consultation with the Continuous Improvement Workgroup.

Florida has not been unscathed by the weak economic climate facing the country in recent years. Budget constraints have been exacerbated by an increase in referrals, eligible children, and children diagnosed with Autism Spectrum Disorders. Florida has had to rely on funding from the American Recovery and Reinvestment Act (ARRA) in order to sustain operations of the Early Steps system. In anticipation of the elimination of these funds in 2011, Florida has undertaken a collaborative process to analyze and plan for sustainability of the Early Steps system. Included in this plan is the narrowing of eligibility criteria, implemented July 2010. Further changes to eligibility criteria are being explored as a possibility for implementation in 2011-2012.

INDICATOR 1: TIMELY SERVICE DELIVERY

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

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

REPORT OF PROGRESS - INDICATOR 1			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	100%	72%	98%

RAW DATA CALCULATION - INDICATOR 1				
A	B	C	D	E
Total child records reviewed (represents children from all 15 LESSs)	Children with IFSPs receiving early intervention services in a timely manner	Children with IFSPs not receiving early intervention services in a timely manner due to documented exceptional family circumstances	% children with IFSPs who received early intervention services on their IFSPs in a timely manner or there was a documented exceptional family circumstance that prevented timely service delivery ((B + C) / A X 100 = D)	Total children not receiving timely service delivery for reasons other than documented exceptional family circumstances (A - B - C = E)
270	254	10	98%	6

The actual target data were derived from QA monitoring results. The actual target data represent review of randomly selected child records in all 15 LESSs. Data collected represent the initiation of new early intervention services from initial IFSPs and subsequent IFSPs. Documented exceptional family circumstances that prevented the timely delivery of early intervention services are included in the numerator and denominator for calculating actual target data.

To measure timely service delivery, each LES was required to provide detailed information regarding the specific services that were recommended for each identified child, including the type of services recommended on the IFSP, the date each service was agreed to by the IFSP

team and included on the IFSP, and the date the service was initiated. The criterion for measurement of timely services is 30 calendar days from the date the family consented to the service. QA monitoring included a review of child record documentation to verify there was appropriate documentation in the child's record to justify any delay in timely service delivery due to exceptional family circumstances. QA Monitoring is described in more detail in the overview to the APR.

In its letter of June 3, 2010, OSEP advised the lead agency of technical assistance sources related to Indicator 1 and required the lead agency to report how the technical assistance selected by the lead agency is addressing factors contributing to ongoing noncompliance. The sources of technical assistance which have been utilized by the lead agency since submission of the FFY 2008 Annual Performance Report on February 1, 2010 to improve performance on Indicator 1 are:

- Participation in the session "Efforts to Assist Local Programs to Use Their Data for Improvement" at the 2010 IDEA Part B and Part C Data Meeting
- Participation in the session "Using Data and Improvement Activities for Better Performance Across all APR Indicators" at the 2010 OSEP Mega Conference
- Participation in the Infants and Toddlers Coordinators Association (ITCA) teleconference related to using data for measurement of Indicator 1
- Participation in periodic conference calls with the OSEP State Contact for Florida Part C

In addition to the technical assistance accessed as described above, the following sources of technical assistance were used previously by the lead agency and also contributed to improvement on Indicator 1. These were:

- Review of APRs from selected states recommended by NECTAC staff due to high performance on Indicator 1
- Use of the *Investigative Questions for Part C, Indicator 1*
- Use of the *State Activities to Increase Staff Capacity and Innovative Programs to Address Personnel Vacancies in Healthcare and Education*
- Review and utilization of concepts provided in the Puckett Institute's *Primary Coach Approach*
- Participation in the September 2009 Monitoring and State Improvement Planning Conference Call, "Part B and Part C Use of Funds"

Lessons learned from these technical assistance activities have been incorporated into lead agency practices to improve performance on Indicator 1. As a result of these technical assistance activities, the lead agency provided a resource tool kit for use by LESs to educate their provider network about the requirements for timely service delivery and to document and track timely service delivery.

Further results of these technical assistance activities are described in activities below.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida significantly improved its performance on Indicator 1. A key factor influencing improvement on Indicator 1 was the lead agency's priority focus on the requirement for timely service delivery in technical assistance and training provided to LESs and performance improvement activities conducted by lead agency staff. As a result, LESs have implemented more effective internal tracking systems to monitor and ensure timely service delivery.

Activities completed to improve performance on Indicator 1:

1. The lead agency maintained a channel of communication with LESs and provided frequent opportunities to address local issues or questions regarding the requirements for timely service delivery through monthly conference calls, statewide meetings, dissemination of an electronic weekly memo, and individualized technical assistance activities. This resulted in a clear understanding by LESs, providers, and families of the requirement for services to be delivered in a timely manner and, consequently, LESs have developed effective local mechanisms to ensure timely service delivery.
2. A resource tool kit was developed and made available to LESs. This resource tool kit included a compilation of suggested formats for internal tracking, provider agreements, local policies and procedures, and a root cause analysis format related to timely service delivery. In addition, the resource tool kit included a presentation template related to timely service delivery, specifying federal and state requirements for timely service delivery. The presentation template was designed to be customized by each LES for presentation to service providers to promote a common understanding of the requirements for timely service delivery. The resource tool kit was reviewed and discussed at the August 2009 Early Steps Statewide meeting.
3. LESs with noncompliance in timely service delivery were required to develop a CIP that addressed the strategies planned to correct the noncompliance as soon as possible, and in no case later than within one year of identification. Lead agency staff provided consultation and technical assistance to the LES related to the development of the CIP, assisting the LES to identify local practices and procedures that contributed to the noncompliance and recommending strategies for correction. Focused monitoring and frequent reporting were required of LESs identified as being out of compliance with timely service delivery. Outcomes of these activities were the improvement of internal LES tracking systems and procedures to ensure the timely service delivery requirement was met and to promote sustained improvement over time.

The lead agency developed and implemented a more comprehensive focused monitoring process for the lowest performing LESs in timely service delivery. The purpose of this monitoring was to provide a framework for low performing LESs to assess performance, to identify practices that impede or facilitate high performance, and to assist LESs with recent demonstration of correction to sustain gains made. Targeted LESs for this monitoring activity were those with performance less than 75% in timely service delivery. In March 2010, five LESs were identified as meeting this criteria and were required to complete the additional monitoring activity. The five LESs that participated in this additional focused monitoring activity improved significantly in their performance with timely services.

4. LESs have implemented revised processes and practices to improve timely service provision. An example is utilizing the internet and email for more efficient communication with providers so that providers are more quickly connected to children needing services. In addition, LESs are increasing the use of internal monitoring and tracking systems to ensure timely service delivery. LESs have shared effective materials and processes with their peers at annual meetings and during monthly LES Director and Service Coordination Workgroup calls.
5. Technical assistance was provided to all LESs, with a special emphasis on those LESs demonstrating noncompliance with timely service delivery. Lead agency staff customized the technical assistance provided based on the causal factors and identified needs for each LES to improve performance. Technical assistance was provided in the form of onsite visits, desk reviews (review and feedback on documentation submitted by the LES), conference calls with LESs, facilitation of training and policy clarification.

6. The lead agency implemented measures to improve efficiencies within its service coordinator and provider enrollment processes. Revised procedures for service coordinator enrollment implemented in January 2009 resulted in more timely caseload assignment for newly hired Service Coordinators. This positively impacted individual service coordination caseload sizes in 2009-2010. With reduced service coordinator caseloads, service coordinators could more effectively facilitate each child's access to early intervention services in a timely manner. The lead agency also maintained frequent contact with the state Medicaid agency and its fiscal agent to improve Medicaid provider enrollment efficiencies, since Medicaid enrollment is a requirement of Early Steps provider enrollment. Enhancements to the CMS Provider Management System were implemented in August 2009 in order to automate the approval process, also expediting enrollment.

7. An analysis was conducted of the barriers to timely services to obtain a more thorough understanding of the issues faced by LESs and to inform the lead agency regarding statewide and individual LES technical assistance needs. The results of this analysis are represented in the chart below.

An Analysis of Barriers to Timely Service Delivery for the 270 children in the Actual Target Data		
	Number of Children	% of Total Children
A. Children with IFSPs who received the early intervention services on their IFSP in a timely manner.	254	94.074%
B. Children with IFSPs who did not receive the early intervention services on their IFSP in a timely manner due to a documented exceptional family circumstance.	10	3.704%
C. TOTAL: Children with IFSPs who received the early intervention services on their IFSPs in a timely manner or there was a documented exceptional family circumstance. (A + B = C)	264	97.778%
D. Children with IFSPs who did not receive the early intervention services on their IFSPs in a timely manner due to community provider availability issues.	3	1.111%
E. Children with IFSPs who did not receive the early intervention services on their IFSPs in a timely manner due to an LES capacity issue (includes Service Coordinator or other staff vacancy, inadequate follow-up to ensure initiation of services, failure to document follow-up and service initiation date).	3	1.111%
F. Children with IFSPs who did not receive the early intervention services on their IFSPs in a timely manner due to a delay in obtaining insurance authorization.	0	0.000%
G. TOTAL: Children with IFSPs who did not receive the early intervention services on their IFSPs in a timely manner and there was no documented exceptional family circumstance. (D + E + F = G)	6	2.222%
H. TOTAL (C + G = H)	270	100.000%

Based on this analysis, community provider availability and LES capacity issues continue to be barriers to timely service delivery. This analysis prompted technical assistance to LESs from lead agency staff related to capacity issues and community provider availability.

8. The lead agency measured family perception of timeliness of service delivery through its annual family survey. Results of the family survey conducted in 2010 demonstrated that 90.2% of families perceive that their children received services in a timely manner.

9. Improving state performance on Indicator 1 has been a top state priority in Florida's use of ARRA funds. To enhance the capacity of early intervention personnel to more effectively utilize a team-based primary service provider approach, the concepts provided in the Puckett Institute publication, *Primary Coach Approach*, and information presented on the September 2009, Monitoring and State Improvement Planning Conference Call, "Part B and Part C Use

of Funds” about effective practices for personnel development, are being incorporated into statewide personnel development initiatives. Training and mentorship projects will include hands-on coaching of IFSP teams by a cadre of professionals skilled in the team-based primary service provider approach. ARRA funds were awarded to LESs for projects that included incentives for retention of existing early intervention providers and recruitment of new early intervention providers. In addition, Provider Recruiter positions for each LES have been hired for the period of the ARRA funding. In response to needs assessments of local provider capacity, these positions are supporting the LES in recruitment of additional providers to ensure timely service delivery. These projects are expected to have a positive impact on Indicator 1 beginning in 2010-2011.

10. Revisions to the Early Steps Data System, also supported by ARRA funds, are planned for implementation in 2010-2011. When implemented, these data system enhancements will provide each LES the capacity to produce ad-hoc reports to self-assess for progress and slippage on Indicator 1. These enhancements are anticipated to assist LESs to sustain gains made in improved performance on Indicator 1, beginning in 2011-2012.

11. Public reporting of statewide and local performance related to Indicator 1 was accomplished in February 2010.

12. Due to vigilance by the lead agency, all 2008-2009 findings of noncompliance related to Indicator 1 have now been corrected. Indicator 9 of this APR provides additional information about the lead agency’s activities to improve performance in correction of noncompliance as soon as possible, but no later than within one year of identification.

Indicator 1: Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **72%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	12
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	7
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	5

Indicator 1: Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	5
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	5
6. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Verification of Correction (either timely or subsequent):

The lead agency has verified that each LES with noncompliance identified in FFY 2008: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, and (2) has corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LES, consistent with OSEP Memorandum 09-02.

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducted a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance was relative to the extent and root cause of the findings of noncompliance. Additionally, for each LES with findings of noncompliance, the lead agency verified that the LES initiated services for each child, although late, unless the child was no longer within the jurisdiction of the LES. This verification was based on follow-up reporting by the LES on individual children whose services had not been initiated.

The five FFY 2008 findings of noncompliance with Indicator 1 that were not corrected within one year of identification were from four LESs. These four LESs were subject to increased reporting requirements until the noncompliance was corrected.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 1:

FFY	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Continue to measure timely service delivery through QA monitoring (including child record review). Local ES Programs that are not in compliance with services being provided in a timely manner will be required to develop strategies to ensure compliance is reached as soon as possible,	Ongoing through 2013	Lead Agency, local ES Programs

but no later than within one year of identification. The Lead Agency will verify compliance and utilize sanctions and enforcement actions if compliance is not reached within one year of identification.		
3. Review data from QA monitoring child record review and the ES Data System to determine the efficacy of improvement strategies and identify additional improvement activities that need to be implemented to ensure compliance with timely service delivery.	July 2006 and continuing through 2013	ES Continuous Improvement Workgroup, Lead Agency
5. Develop and implement initiatives to promote the recruitment, preparation, and retention of qualified early intervention providers through pre-service and in-service training and technical assistance activities.	July 2006 through 2013	Lead Agency
6. Facilitate an analysis of low performing LESs to identify and correct practices which contribute to not providing timely service delivery. Based on the results of this analysis, implement provider recruitment, training, technical assistance, and policy changes as indicated.	January 2008 and ongoing through 2013	Lead Agency, LESs
7. Report to the public on ES performance with timely service delivery, reporting on statewide performance as well as performance by local ES Programs.	June 2007 and annually through 2013	Lead Agency

The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
14. Use ARRA funds for improvements to the Early Steps Data System to include, but not limited to, reporting to self-assess on performance related to timely service delivery.	July 2010	Lead Agency

INDICATOR 2: SERVICES IN NATURAL ENVIRONMENT

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

REPORT OF PROGRESS - INDICATOR 2			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	65%*	61%**	67%**

A	B	C	D	E
Infants and toddlers with IFSPs receiving services in the home	Infants and toddlers with IFSPs receiving services in community-based settings	Infants and toddlers with IFSPs receiving services in other settings	Total infants and toddlers with IFSPs reported (A + B + C = D)	% Infants and toddlers with IFSPs receiving services in the home or community-based settings (A + B) / D x 100 = E)
8,412	1,329	4,736	14,477	67%**
<p>* Measurable and Rigorous Target for 2009-2010 is being reverted to the target established in the original SPP 2005-2010. See further explanation below under Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009 – 2010.</p> <p>** Actual Target Data for 2008-2009 and 2009-2010 have been revised based on information provided by OSEP in the Part C FFY 2009 SPP/APR Response Table. This information clarifies guidance provided by OSEP in the Part C FFY 2005 SPP/APR Response Table.</p>				

The actual target data for Indicator 2 are from Table 2 of the state’s 618 Data and are derived from the services identified on the IFSP and entered into the Early Steps Data System for infants and toddlers with IFSPs who were eligible on October 16, 2009, as reported to WESTAT and OSEP on February 1, 2010. To determine each child’s primary setting, the IFSP services for each child are analyzed to determine the location in which that child will receive the most hours of service.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicator 2 and exceeded the target. This improvement is the result of increased adoption across the state of the team-based primary service provider approach to service delivery and the ongoing impact of a revised rate structure for payment of services implemented in 2007.

Activities completed to improve performance on Indicator 2:

1. The lead agency provided training and technical assistance to LESs to ensure individualized decision-making by IFSP teams and that services are provided in natural environments whenever possible, based on identified child-centered functional outcomes. In addition, the lead agency maintained a channel of communication with LESs and provided opportunities to address local issues or questions regarding the requirements for service delivery in natural environments through monthly conference calls, statewide meetings, dissemination of an electronic weekly memo, and other technical assistance activities.

The lead agency held a statewide meeting for Service Coordinators in May 2009 that included presentations pertaining to provision of services in the natural environment. Presentations and discussions included finding and keeping providers to provide services in the natural environment, overcoming barriers to providing services in the natural environment, and family-centered intervention.

A Training Tool CD, containing all of the presentations and handouts from the Service Coordinator statewide meeting, was distributed to each LES Training Coordinator following the meeting. The purpose of the CD distribution to Training Coordinators was to provide training materials from the meeting for local use.

2. While Florida continues to improve on delivery of services in the natural environment, availability of community providers to provide services in the natural environment continues to be an ongoing challenge. To address this, the lead agency implemented measures to improve efficiencies within its provider enrollment processes. The lead agency also maintained frequent contact with the state Medicaid agency and its fiscal agent to improve Medicaid provider enrollment efficiencies, since Medicaid enrollment is a requirement of Early Steps provider enrollment. Enhancements to the CMS Provider Management System were implemented in August 2009 in order to automate the approval process, also expediting enrollment.

3. The lead agency used ARRA funds to improve performance on Indicator 2. ARRA funds were awarded to LESs for projects that included incentives for retention of existing early intervention providers and recruitment of new early intervention providers. In addition, Provider Recruiter positions for LESs have been hired for the period of the ARRA funding. In response to needs assessments of local provider capacity, these positions are supporting the LESs in recruitment of additional providers to provide services in the natural environment. The lead agency is also using ARRA funds to enhance the capacity of early intervention personnel to more effectively utilize a team-based primary service provider approach. The concepts provided in the Puckett Institute publication, *Primary Coach Approach*, and information presented on the September 2009 Monitoring and State Improvement Planning Conference Call, "Part B and Part C Use of Funds," about effective practices for personnel development, are being incorporated into statewide personnel development initiatives. Training and mentorship projects will include hands-on coaching of IFSP teams by a cadre of professionals skilled in the team-based primary service provider approach.

4. Public reporting of statewide and local performance related to Indicator 2 was accomplished in February 2010.

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

In consideration of OSEP guidance provided in the Part C FFY 2009 SPP/APR Response Table and with stakeholder input at the quarterly FICCIT meeting held April 13, 2011, the measurable and rigorous targets for Indicator 2 are being reverted to the targets established in the original SPP 2005-2010, as follows:

FFY	Measurable and Rigorous Target in Original SPP 2005-2010	Revised Measurable and Rigorous Target Per FFY 2007 APR	Reverted Measurable and Rigorous Target Per FFY 2009 APR
2005 (2005-2006)	38%	n/a	n/a
2006 (2006-2007)	50%	n/a	n/a
2007 (2007-2008)	55%	n/a	n/a
2008 (2008-2009)	60%	76%	n/a
2009 (2009-2010)	65%	78%	65%
2010 (2010-2011)	70%	80%	70%

Targets are being revised to reflect the additional two years of reporting (2011-2012 and 2012-2013) and were finalized at the quarterly FICCIT meeting held April 13, 2011..

Measurable and Rigorous Targets for Indicator 2:

FFY	
2011 (2011-2012)	75%
2012 (2012-2013)	80%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are

listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
3. Provide TA to local ES Programs to ensure individualized decision-making by IFSP teams and that services are provided in natural environments whenever possible, based on identified child-centered functional outcomes.	January 2006 and ongoing through 2013	Lead Agency, local ES Programs
6. Report to the public on ES performance with service provision in the natural environment, reporting on statewide performance as well as performance by local ES Programs.	June 2007 and annually through 2013	Lead Agency
9. Analyze disaggregated data related to provision of services in the context of natural environments to identify those local ES Programs with most positive performance in delivery of services in the natural environment. Identify factors contributing to success in each of these local ES Programs and implement a plan to share these practices statewide as indicated. Through this analysis, the lowest performing local ES Programs will be identified and technical assistance provided as needed to improve performance.	July 2008 and ongoing through 2013	Lead Agency, FICCIT, ES Continuous Improvement Workgroup, local ES Programs

The following Improvement Activities are added to the Florida SPP:

Activities	Timelines	Resources
12. Modify contract language to increase accountability for implementation of the team-based primary service provider approach to service delivery.	July 2011	Lead Agency
13. Develop web-based Service Coordinator apprenticeship training modules to ensure that services are provided within the context of everyday routines, activities, and places.	March 2011	Lead Agency
14. Use ARRA funds to support training initiatives and local pilot projects to improve performance and evaluate their effectiveness for potential replication.	July 2010 through June 2012	Lead Agency

INDICATOR 3: CHILD OUTCOMES

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

Outcomes:

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

Progress categories for A, B and C:

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

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

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

Measurement for Summary Statement 1:

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

times 100.

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

Measurement for Summary Statement 2: The percent of infants and toddlers reported in progress category (d) plus [# of infants and toddlers reported in progress category (e) divided by the total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100.

REPORT OF PROGRESS - INDICATOR 3, OUTCOME A Positive social-emotional skills (including social relationships)			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009 (Baseline)	Actual Target Data 2009 - 2010
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	36.0%	36.0%	33.7%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	75.6%	75.6%	76.1%

REPORT OF PROGRESS - INDICATOR 3, OUTCOME B Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009 (Baseline)	Actual Target Data 2009 - 2010
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	52.6%	52.6%	53.0%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	49.6%	49.6%	49.9%

REPORT OF PROGRESS - INDICATOR 3, OUTCOME C Use of appropriate behaviors to meet their needs			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009 (Baseline)	Actual Target Data 2009 - 2010
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	52.4%	52.4%	54.8%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	75.8%	75.8%	75.9%

RAW DATA CALCULATION - INDICATOR 3						
	Indicator 3 Outcome A Positive social-emotional skills BDI-2 Personal-social Domain		Indicator 3 Outcome B Acquisition and use of knowledge and skills BDI-2 Communication Domain		Indicator 3 Outcome C Use of appropriate behaviors to meet their needs BDI-2 Adaptive Domain	
	Number of Children	%	Number of Children	%	Number of Children	%
a. Percent of infants and toddlers who did not improve functioning	95	3.7%	88	3.4%	113	4.3%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	459	17.6%	789	30.3%	358	13.8%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	68	2.6%	425	16.3%	155	6.0%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	214	8.2%	564	21.7%	417	16.0%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1765	67.9%	735	28.3%	1558	59.9%
Total	2601	100%	2601	100%	2601	100%

The actual target data are derived from assessments administered upon entry into and exit from Early Steps for eligible children in all 15 LESs. LESs and school districts entered assessment results for assessments conducted in 2009-2010 in the BDI 2 Data Manager online scoring and reporting program. Data were exported from the Data Manager and matched with data maintained by the University of Miami subcontractor for assessments completed prior to 2009-2010. A final de-identified data file, consisting of all records with sufficient data to be included in the state report, was sent to the University of Miami discretionary project whose staff did the analyses that produced the category assignments.

The lead agency and DOE have collaborated to develop an outcome measurement system for children birth to five years of age and have agreed to collect data on children across Part C and Part B on a common instrument - the Battelle Developmental Inventory 2nd Edition (BDI-2). The BDI-2 is a “standardized, individually administered assessment battery of key developmental skills in children from birth through 7 years of age” [Source: *Battelle Development Inventory – Examiner’s Manual*]. In addition to its use as a measure of child outcomes, this instrument may also be used for determination of eligibility for Early Steps.

Florida’s child outcomes measurement system uses scores from the Personal-Social domain of the BDI-2 to determine category placement for Indicator 3A, scores from the Communication domain of the BDI-2 to determine category placement for Indicator 3B, and scores from the Adaptive domain of the BDI-2 to determine category placement for Indicator 3C. A standard score of 78 or above (>-1.5 SD) is considered to represent a level of functioning that is “comparable to same-aged peers.”

The percent of children in each of the progress reporting categories is calculated based on application of the following decision rules:

- a. Percent of children who did not improve functioning**
This category may include (i) children who were functioning below a level comparable to same-aged peers at both entry and exit, and (ii) children who were functioning at a level comparable to same-aged peers at entry but below their same-aged peers at exit. Children in this category did not show any within-domain raw score gain (which rules out any standard score gain).
- b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers**
This category may include (i) children who were functioning below a level comparable to same-aged peers at both entry and exit, and (ii) children who were functioning at a level comparable to same-aged peers at entry but below their same-aged peers at exit. Children in this category showed a gain in their within-domain raw score but not in their domain standard score.
- c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach it**
This category includes only children who were functioning below a level comparable to same-aged peers at both entry and exit. Children in this category showed a gain in both their within-domain raw score and their domain standard score.
- d. Percent of children who improved functioning to reach a level comparable to same-aged peers**
This category includes only children who were functioning below a level comparable to same-aged peers on entry but were functioning comparable to same-age peers on exit. Children in this category showed a gain in both their within-domain raw score and their domain standard score.
- e. Percent of children who maintained functioning at a level comparable to same-aged peers**
This category includes only children who were functioning at a level comparable to same-aged peers at both entry and exit.

Florida improved its performance and exceeded the targets on Indicator 3, with the exception of Indicator 3A, Summary Statement 1. Florida slipped in its performance of Indicator 3A Summary Statement 1 and did not meet the target. In establishing the child outcomes measurement

system, Florida used a phase-in approach. As a result, those LESs that were phased in during 2008-2009 had significantly fewer children for whom entry and exit data were available. This may have implications for whether the data are representative of statewide performance. At the same time, Florida increased the numbers of children for whom progress data were available from 910 in baseline data to 2,601 in 2009-2010.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Activities completed to improve performance related to quality of data on Indicator 3:

1. The lead agency continued to collaborate with DOE to share roles in the planning and implementation of Florida's birth to five outcome measurement system. As a part of this collaboration, the Child Outcomes Leadership team held routine management and planning meetings to discuss system implementation, training needs, data analysis, and quality assurance considerations. The Child Outcomes Leadership team is comprised of representatives of the lead agency, DOE, and technical consultants with DOE discretionary projects. In 2009-2010, the leadership team was expanded to include four local representatives representing two school districts and two LESs.
2. DOE discretionary projects awarded to the University of Miami and the University of Central Florida Technical Assistance and Training System (TATS) continued to provide essential support for implementation of the child outcomes measurement system.
3. The Child Outcomes Advisory Committee met in December 2009. The committee was composed of LES and school district representatives as well as those on the Child Outcomes Leadership team. At this meeting, three primary issues were identified for consideration and proposal of recommendations. Those issues included: (1) target-setting for the SPP that was to be submitted in February 2010; (2) the entry of raw scores only versus item-level data in the BDI-2 Data Manager; and (3) additional supports and assistance needed to ensure quality implementation. Those recommendations were used to guide subsequent decision-making on the part of the lead agency and DOE.
4. LESs and school district contacts for the prekindergarten program for children with disabilities were asked to provide feedback on implementation issues and quality assurance measures. Based on the feedback received and input from the Child Outcomes Advisory Committee, training needs of the highest priority were identified. Those training needs related to:
 - How to export from the BDI-2 Data Manager and run analyses on the exported data
 - Identifying, correcting, and providing feedback on common errors made when entering data
 - Additional support/information on assessment items that are more difficult to administer and/or score
 - "Refresher course" on administration of the assessment
5. Train-the-trainer sessions were conducted for LES and school district staff in districts/regions that were in the final phase of the child outcomes measurement system. In November 2009, two 2-day train-the-trainer workshops were conducted. Training was provided by staff from the publisher of the BDI-2.

A survey was conducted with trainers from phases 1, 2, and 3. Data from that survey revealed that following their participation in a train-the-trainer session, these individuals conducted a total of 105 workshops and trained approximately 2,500 individuals in the administration of the assessment instrument.

6. Prior to 2009-2010, LESs provided assessment data to the University of Miami subcontractor for electronic data entry and processing. In 2009-2010, this process changed, whereby LESs were required to enter data in the BDI-2 Data Manager, the web-based scoring and reporting program available from the publisher. To support data entry, a Florida-specific BDI-2 Data Manager manual was developed. This manual was updated as needed throughout the year and made accessible to all LESs users. Three training webinars on use of the BDI-2 Data Manager were provided to LESs. The lead agency, DOE and their discretionary project partners, and representatives of the publisher planned, organized, and facilitated the webinars. More training is planned during the 2010-2011 year following the addition of new enhancements to the online program.
7. Clarification of written guidance on producing reports from the BDI-2 Data Manager was provided to LESs. Training regarding exporting and analysis of data was also provided.
8. Planning was initiated and action taken to create online modules that can be used as a refresher for individuals already trained in the administration of the BDI-2. Filming of training sessions was conducted and modules are now in production.
9. Assessment data were periodically downloaded from the BDI-2 Data Manager for analysis. Technical consultants from the University of Miami discretionary project reviewed data quality and provided feedback for consideration by the Child Outcomes Leadership team.
10. A key document was revised that includes guidance related to the BDI-2 Screening Test when the results indicate that a child's performance in a domain is comparable to same age peers. The revisions made during 2009-2010 allowed greater flexibility for the use of the Screening Test in certain circumstances.

Activities completed to improve performance related program services on Indicator 3:

1. The lead agency provided training and technical assistance to LESs to ensure individualized decision-making by IFSP teams and that services are provided in natural environments whenever possible, based on identified child-centered functional outcomes.

The lead agency held a statewide meeting for Service Coordinators in May 2009 that included presentations pertaining to provision of services in the natural environment. Presentations and discussions included finding and keeping providers to provide services in the natural environment, overcoming barriers to providing services in the natural environment, and family-centered intervention.

A Training Tool CD, containing all of the presentations and handouts from the Service Coordinator statewide meeting, was distributed to each LES Training Coordinator following the meeting. The purpose of the CD distribution to Training Coordinators was to provide training materials from the meeting for local use.

2. ARRA funds have been utilized to fund projects that are designed to enhance the capacity of early intervention personnel to more effectively utilize a team-based primary service provider approach to service delivery by early intervention providers. Training and mentorship projects will include hands-on coaching of IFSP teams by a cadre of professionals skilled in the team-based primary service provider approach. Results of these projects will be considered for possible future replication.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 3:

FFY	
2011 (2011-2012)	<p>A. Summary Statement 1: 36.2% A. Summary Statement 2: 75.8%</p> <p>B. Summary Statement 1: 52.8% B. Summary Statement 2: 49.8%</p> <p>C. Summary Statement 1: 52.6% C. Summary Statement 2: 76.0%</p>
2012 (2012-2013)	<p>A. Summary Statement 1: 36.3% A. Summary Statement 2: 75.9%</p> <p>B. Summary Statement 1: 52.9% B. Summary Statement 2: 49.9%</p> <p>C. Summary Statement 1: 52.7% C. Summary Statement 2: 76.1%</p>

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
6. Review data quality/provide feedback to participating LESs.	July 2007 and ongoing through June 2013	Lead Agency, DOE, University of Miami Discretionary Project, TATS
7. Review and revise technical assistance documents and other support materials; maintain communication with LESs.	July 2007 and ongoing through June 2013	Lead Agency, DOE, University of Miami Discretionary Project, TATS
13. Assess ongoing training needs of LESs on the selected instrument and data collection process.	July 2009 and ongoing through June 2013	Lead Agency, DOE, University of Miami Discretionary Project, TATS
16. Develop and implement Quality Assurance process for child outcome measurement system.	December 2009 and ongoing through June 2013	Lead Agency, DOE, University of Miami Discretionary Project, TATS, Stakeholders
17. Analyze LES performance against baseline data for APR.	July 2010 through June 2013	Lead Agency, DOE, University of Miami Discretionary Project, TATS

The following Improvement Activities are added to the Florida SPP:

Activities	Timelines	Resources
18. Use ARRA funds to support training initiatives and local pilot projects to improve performance and evaluate their effectiveness for potential replication.	July 2010 through June 2012	Lead Agency
19. Provide training and technical assistance to LESs to ensure individualized decision-making by IFSP teams and that services are provided in natural environments whenever possible, based on identified child-centered outcomes.	July 2010 through June 2012	Lead Agency, LES Programs
20. Modify contract language to increase accountability for implementation of the team-based primary service provider approach to service delivery.	July 2011	Lead Agency
21. Report to the public on ES performance with child outcomes, reporting on statewide performance as well as performance by local ES Programs.	February 2011 through February 2013	Lead Agency
22. Provide technical assistance to LESs to support accurate and efficient use of the BDI-2 Data Manager.	July 2010 through June 2013	Lead Agency

INDICATOR 4: FAMILY OUTCOMES

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.

REPORT OF PROGRESS - INDICATOR 4			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 4A: Percent of families who report that early intervention services have helped the family know their rights	60%	67%	68%
Indicator 4B: Percent of families who report that early intervention services have helped the family effectively communicate their children's needs	56%	64%	65%
Indicator 4C: Percent of families who report that early intervention services have helped the family help their children develop and learn	61%	78%	80%

RAW DATA CALCULATION - INDICATOR 4A		
A	B	C
Total surveys received	Total families reporting that early intervention services have helped their family know their rights	% families reporting that early intervention services have helped their family know their rights (B / A x 100 = C)
1,229	836	68%

RAW DATA CALCULATION - INDICATOR 4B		
A	B	C
Total surveys received	Total families reporting that early intervention services have helped their family communicate their children's needs	% families reporting that early intervention services have helped their family communicate their children's needs (B / A x 100 = C)
1,229	799	65%

RAW DATA CALCULATION - INDICATOR 4C		
A	B	C
Total surveys received	Total families reporting that early intervention services have helped their family help their children develop and learn	% families reporting that early intervention services have helped their family help their children develop and learn (B / A x 100 = C)
1,229	983	80%

The National Center for Special Education Accountability Monitoring (NCSEAM) survey was utilized as the measurement tool for Indicator 4. A census model process for distribution of the family survey was utilized that included a personal contact with families by the Service Coordinator or the Family Resource Specialist to provide an invitation to participate in the survey during a specified timeframe. The survey and cover letter were available in English and Spanish. For families needing the survey translated into another language, translators familiar with the family assisted. The target recipients for the 2009-2010 survey included all families whose children were enrolled in Early Steps and had an initial IFSP for at least six months as of May 1, 2010. During an eleven-week timeframe, Service Coordinators and Family Resource Specialists made personal contact with families meeting the survey criteria and offered an opportunity to complete the survey. A total of 5,098 family surveys were distributed, with 1,229 valid surveys returned, resulting in a 24% response rate.

The lead agency performed an analysis of the survey respondents as compared to 618 and other demographic data to determine representativeness of the results. This analysis showed a slight overrepresentation of responses from families of white children and a slight underrepresentation of responses from families of Hispanic children. It is noteworthy that this data was based on the now obsolete five federal race categories and the lead agency's data collection procedures allowed for other and unknown race values. There is also very wide variability across LESs in the extent of disproportionate representation.

	618 DATA 2009 - 2010		FAMILY SURVEY RESPONDENTS 2009 - 2010	
Child's Gender	Total Statewide 618	Percent 618 Statewide	Total Surveys Received	Percent Surveys Received
Female	5,190	35.9%	477	38.8%
Male	9,287	64.1%	752	61.2%
Total	14,477	100%	1,229	100%

	618 DATA 2009 - 2010		FAMILY SURVEY RESPONDENTS 2009 - 2010	
Child's Race	Total Statewide 618	Percentage 618 Statewide	Total Surveys Received	Percent Surveys Received
Black	2,846	19.7%	257	20.9%
White	5,829	40.2%	593	48.3%
Hispanic	3,843	26.5 %	214	17.4%
Asian	231	1.6 %	23	1.9%
Native American	14	.1 %	0	.0%
Unknown	909	6.3 %	57	4.6%
Other	805	5.6 %	85	6.9%
Total	14,477	100%	1,229	100%

	618 DATA 2009 - 2010		FAMILY SURVEY RESPONDENTS 2009 - 2010	
Child's Medicaid Enrollment Status	Total Statewide	Percentage Statewide	Total Surveys Received	Percent Surveys Received
Medicaid Enrolled	8,906	61.5%	753	61.3%
Not Medicaid Enrolled	5,571	38.5%	476	38.7%
Total	14,477	100%	1,229	100%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicators 4A, 4B, and 4C and exceeded the targets. This progress was a result of ongoing efforts by the lead agency to promote families' knowledge of their rights, improve their ability to communicate their child's needs, and help their child develop and learn. These ongoing efforts included the statewide network of Family Resource Specialists, family training initiatives, and enhanced communication efforts with families and family organizations.

Activities completed to improve performance on Indicator 4:

1. Training and technical assistance were provided by the lead agency to Service Coordinators, Family Resource Specialists, and LES administrators on ensuring families know their rights and their role in the Early Steps system through statewide meetings. Training topics included evidence-based practices, dispute resolution, implementing family relationship-based practices, the IFSP process, transition, and teaming.

Service Coordinators, Family Resource Specialists, and service providers are required to complete an orientation that includes information on the mission, goals, and the philosophical basis of Florida's Early Steps system, as well as information about the federal and state laws governing Early Steps. This training also explores family-centered practices in the field of early intervention and clarifies how attitudes and beliefs influence the ability to work with families from diverse cultural backgrounds.

2. The lead agency awarded funding to each LES for family involvement activities. Technical assistance was provided to Family Resource Specialists that included the purpose and use of the funding and the requirement to develop a Family Involvement Plan with input from families and community partners to increase family involvement in their communities. Family Resource Specialists informed families of the availability of Family Involvement Funds that support their ongoing education and family involvement in the LES.

3. LES Family Resource Specialists continued to provide the family training curriculum, *A New Star: a Family's Guide to Navigating Early Steps*, to families. This training was created by parents of children with disabilities and special health care needs to help other parents understand and participate fully in Florida's Early Steps system. In 2009-2010, the *New Star* curriculum was presented at five workshops at the Family Café, a statewide event designed to meet the informational and networking needs of individuals with disabilities or special health care needs and their families. Early Steps Early Wishes is a new annual event held at the Family Café, to introduce new Early Steps families to the resources available throughout the state of Florida. Family Resource Specialists and lead agency personnel were available to answer questions and assist families.

4. Family Resource Specialists encouraged family participation in FICCIT. Family Resource Specialists also developed and maintained informal playgroups, utilizing these opportunities for training in advocacy, procedural safeguards, communication, and development.

5. Local newsletters were written and distributed, serving as a direct link between LESs and the families they serve. These local newsletters included a quarterly newsletter article from the lead agency's Parent Consultant. Topics of these publications included the role of families, advocacy, and the family survey process.

6. Florida's Central Directory provided information on available services and resources for children with disabilities and special health care needs and their families through a toll-free number and website. Calls received at the Directory are electronically routed to LESs, Florida Diagnostic and Learning Resources System (FDLRS)/Child Find programs and Early Learning Coalitions contact persons. Central Directory staff conducted multiple trainings with LES Family Resource Specialists to increase awareness of the functions of the Central Directory.

7. The lead agency maintained a channel of communication with LESs and provided opportunities to address local issues or questions regarding family outcomes through monthly conference calls, statewide meetings, policy clarification, dissemination of an electronic weekly memo, and other technical assistance activities. Monthly Family Resource Specialist Conference Calls included topics relating to Procedural Safeguards, Early Steps Policies, developmental resources for families, and sharing of local initiatives in support of families.

8. Public reporting of statewide and local performance related to Indicator 4 was accomplished in February 2010.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 4:

FFY	
2011 (2011-2012)	A. 67% B. 63% C. 78%
2012 (2012-2013)	A. 68% B. 64% C. 79%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
6. Report to the public on ES performance with family outcomes, reporting on statewide performance as well as performance by local ES Programs.	June 2007 and annually through 2013	Lead Agency

The following Improvement Activities are added to the Florida SPP:

Activities	Timelines	Resources
9. Develop a family survey data analysis team to make recommendations for strategies to ensure survey response representativeness as well as to improve performance.	December 2010 and ongoing through 2013	Lead Agency
10. Seek technical assistance from state and national TA partners on family survey analysis, interpretation, and potential improvement strategies.	January 2011 and ongoing through 2013	Lead Agency
11. Analyze disaggregated data to identify those local ES Programs with most positive performance. Identify factors contributing to success in each of these local ES Programs and implement a plan to share these practices statewide as indicated. Through this analysis, the lowest performing local ES Programs will be identified and technical assistance provided as needed to improve performance.	January 2011 and ongoing through 2013	Lead Agency
12. Use ARRA funds to support training initiatives and local pilot projects to improve performance and evaluate their effectiveness for potential replication.	July 2010 through June 2012	Lead Agency
13. Provide training and technical assistance to LESS to ensure individualized decision-making by IFSP teams and that services are provided in natural environments whenever possible, based on identified	July 2010 through June 2012	Lead Agency, LES Programs

child-centered outcomes.		
14. Modify contract language to increase accountability for implementation of the team-based primary service provider approach to service delivery.	July 2011	Lead Agency

INDICATOR 5: INFANTS AND TODDLERS BIRTH TO 1

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

REPORT OF PROGRESS - INDICATOR 5			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 5: Percent of infants and toddlers with IFSPs birth to 1	.71%	.59%	.64%

RAW DATA CALCULATION - INDICATOR 5 (includes comparison with national data)			
	2009 State Child Count		
	D	E	F
	Number of children with IFSPs birth to 1	State population birth to 1	Percent of children with IFSPs birth to 1 (D / E x 100 = F)
Florida	1,489	231,945	0.64%
National Average			1.03%

The actual target data for Indicator 5 are part of the state's 618 Data, reported to WESTAT and OSEP on February 1, 2010. The reported data are based on enrolled children who had an IFSP on October 16, 2009. Florida served 1,489 infants and toddlers birth to age 1 with IFSPs out of a population of 231,945 children of the same age or .64% of the state's population of children from birth to 1 year of age. State population data and national average information are derived from the Data Accountability Center website.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicator 5, but did not meet the target. This is likely due to inconsistency of child find activities across the state.

Activities completed to improve performance on Indicator 5:

1. The lead agency completed a state-level analysis of the referral sources for children birth to age 1 referred in 2008-2009 and 2009-2010. The results of this analysis indicated there was an increase in the number of children referred from child protective investigators, child protection teams, hospitals, and the Florida Diagnostic and Learning Resources System (FDLRS). FDLRS is a discretionary project of DOE that provides Child Find and promotes general public awareness of programs and services available for young children who have or are at risk of developing disabilities. Increases in referrals from child protective investigators and child protection teams were the result of the lead agency's participation in initiatives to implement the Child Abuse Prevention and Treatment Act (CAPTA). Through the CAPTA initiative, the lead agency provided guidance to LESs regarding the need for a local interagency agreement to facilitate implementation of CAPTA requirements. This initiative established greater linkages with Florida's child abuse prevention and treatment professionals, which resulted in increased referrals to Early Steps from these entities.
2. The lead agency continued implementation of its annual public awareness plan that included providing posters and other public awareness materials to LESs and local Children's Medical Services offices. The lead agency surveyed LESs to assess their public awareness needs and revised the public awareness plan as necessary. The lead agency participated in statewide outreach events including conferences targeted to individuals likely to come into contact with infants and toddlers. This included the annual Family Café conference and the annual Children's Week activities at the Florida Capitol.
3. The lead agency participated in the Act Early Summit sponsored by the Centers for Disease Control and Prevention's National Center on Birth Defects and Disabilities and the Health Resources and Services Administration's Maternal and Child Health Bureau in October 2009. The purpose of the summit was to promote the development of statewide action plans to improve the identification, assessment, and services for young children with autism spectrum disorders and related disabilities and their families. The lead agency was actively involved in Florida's Act Early state team to finalize and implement an action plan for Florida's Act Early campaign, which is expected to have a positive impact on performance in 2010-2011.
4. The lead agency was represented on the Governor's Task Force on Autism Spectrum Disorders. This participation allowed the lead agency to contribute to the development of the 2009 Governor's Task Force Report, which included recommendations for early identification and referral of young children with disabilities. The report released in 2009 emphasized screening for autism spectrum disorders and developmental delay and supports referral to Early Steps. It also recommended that the Learn the Signs Act Early campaign, a public awareness campaign for pediatric primary care providers and families that includes the signs and symptoms of autism spectrum disorders, be utilized to bring Early Steps to the attention of family members of young children.
5. Lead agency staff participated as a resource member of the Florida Developmental Disabilities Council Child Development/Education Task Force, which has been considering proposals for funding the implementation of a statewide universal screening initiative, as recommended by the Florida's Cabinet of Children and Youth.
6. FICCIT produced and distributed an Annual Report on Early Intervention Services, targeting the general public, including parents and policy makers. This annual report was a means of informing the public and policy makers about early intervention services and was distributed to public policy makers, attendees at FICCIT meetings, and to LESs for sharing with local stakeholders.

7. To improve performance on Indicator 5, the lead agency planned to utilize ARRA funds to supplement existing public awareness activities by implementing a marketing campaign to pediatricians and other health care providers. This was to include information about the importance of early identification of infants and young children with disabilities, eligibility criteria for Early Steps, and how to make a referral to Early Steps. Due to pending changes in the state’s eligibility criteria, it was decided not to use ARRA resources for this campaign. An Early Steps Sustainability Plan is being developed and it is anticipated that it will include steps to take for more effective communication with health care providers, including pediatricians.

The lead agency awarded ARRA funding to some LESs to increase appropriate referrals and enhance public awareness activities. For example, one LES was awarded ARRA funds to educate pediatricians in the Early Steps referral process and screening tools to reduce the number of children who are referred late or never referred to the Early Steps program. The anticipated outcome will be earlier identification of children. Another LES is using ARRA funding to hire an additional temporary community liaison to develop and implement a plan for increasing public awareness of the LES program, improving perception of the program, and expanding the number of children and families served by the LES. It is anticipated that these projects will positively impact Indicator 5 in 2010-2011. Results of these projects will be considered for possible future replication.

8. In consultation with stakeholders and following the required public participation period, the lead agency determined that expanding the list of established conditions with a high probability of resulting in a developmental delay to include children who weigh less than 1200 grams at birth would result in a broader outreach to children birth to age 1 who are likely to be eligible for services. This revised policy was implemented July 2010 and is expected to have a positive impact on Indicator 5 performance in 2010-2011.

9. Public reporting of statewide and local performance related to Indicator 5 was accomplished in February 2010.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 – 2011:

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Due to narrowing of the eligibility criteria, the lead agency anticipates reporting revised baseline data in the FFY 2010 APR and revised targets reflective of the new baseline.

Measurable and Rigorous Targets for Indicator 5:

FFY	
2011 (2011-2012)	.72 %
2012 (2012-2013)	.72%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Analyze disaggregated data on the population served and referral source to determine if there is a specific birth to 1 "target population" that may be under-represented. Implement TA and outreach efforts to targeted local ES Programs to improve their child find results.	Annually through 2013	Lead Agency, in consultation with ES Data Center
2. Consider the potential use of the Birth Defects Surveillance Program data, and enhance collaboration with Children's Medical Services (CMS) Newborn Screening Program. Florida expanded newborn screening at no cost and performs routine tests to screen for 34 disorders which provide opportunities for earlier detection and intervention for newborn children. Collaboration will continue with Department of Children and Families (DCF) on the role of the Lead Agency on the implementation of IDEA 2004, section 637(a)(6)(A) and (B).	Annually through 2013	Lead Agency, in consultation with ES Data Center, DCF, and FICCIT
4. Increase outreach to local referral sources (Healthy Start, school districts, etc.) which provide low number of referrals so they are informed about eligibility, identification of children who may be eligible, and about procedures for making appropriate referrals to ES Programs. Activities may include: continued community outreach, improved service coordination efforts, outreach to early childhood provider partnerships, participation at community fairs, outreach to child care programs, and participation in child development screening days.	July 2006 and ongoing through 2013	Local ES Programs, in coordination with Lead Agency and with input from partner agencies and the public
5. Continue public awareness efforts for medical professionals, especially pediatricians and other health care personnel, on the importance of early identification and referral.	Annually through 2013	Lead Agency, local ES Programs
9. The lead agency will participate on Florida's Act Early team to promote early identification, assessment, and intervention for children with autism spectrum disorder and related developmental disabilities.	October 2009 and ongoing through 2013	Lead Agency, Stakeholders
10. The lead agency will participate in statewide initiatives for the development of universal screening of all young children as prioritized by the Florida Cabinet of Children and Youth.	October 2009 and ongoing through 2013	Lead Agency, Stakeholders

The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
12. Report to the public on ES performance with percent of birth to one year old children served, reporting on statewide performance as well as performance by local ES Programs.	June 2007 and annually through 2013	Lead Agency

INDICATOR 6: INFANTS AND TODDLERS BIRTH TO 3

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

REPORT OF PROGRESS - INDICATOR 6			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 6: Percent of infants and toddlers with IFSPs birth to age 3	1.885%	1.91%	2.06%

RAW DATA CALCULATION - INDICATOR 6 (includes comparison with national data)			
	2009 State Child Count		
	D	E	F
		Number of children with IFSPs birth to 3	State population birth to 3
Florida	14,477	703,919	2.06%
National Average			2.67%

The actual target data for Indicator 6 are part of the state's 618 Data, reported to WESTAT and OSEP on February 1, 2010. The reported data are based on enrolled children who had an IFSP on October 16, 2009. Florida served 14,477 infants and toddlers birth to age 3 with IFSPs out of a population of 703,919 children of the same age or 2.06% of the state's population of children birth to 3 years of age. State population data and national average information are derived from the Data Accountability Center website.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicator 6 and exceeded the target. This improvement is due to increased awareness of Early Steps services.

Activities completed to improve performance on Indicator 6:

1. The lead agency completed a state-level analysis of referral sources for children birth to age 3 for referrals received in 2008-2009 and 2009-2010. The results of this analysis indicated there was an increase in the number of children referred from physicians, families, schools/Florida Diagnostic and Learning Resources System (FDLRS), subsidized child care, and child protection teams. FDLRS is a discretionary project of DOE that provides Child Find and promotes general public awareness of programs and services available for young children who have or are at risk of developing disabilities. Increases in referrals from child protection teams were the result of the lead agency's participation in initiatives to implement the Child Abuse Prevention and Treatment Act (CAPTA). Through the CAPTA initiative, the lead agency provided guidance to LESs regarding the need for a local interagency agreement to facilitate implementation of CAPTA requirements. This initiative established greater linkages with Florida's child abuse prevention and treatment professionals, which resulted in increased referrals to Early Steps from these entities.

2. The lead agency continued implementation of its annual public awareness plan that includes providing posters and other public awareness materials to LESs and local Children's Medical Services offices. Twice a year, the lead agency surveys LESs to assess their public awareness needs and revises the public awareness plan as indicated. The lead agency participated in statewide outreach events including conferences targeted to individuals likely to come into contact with infants and toddlers. This included the annual Family Café conference and the annual Children's Week activities at the Florida Capitol.

3. FICCIT produces and distributes an Annual Report on Early Intervention Services, targeting the general public, including parents and policy makers. This annual report is a means of informing the public and policy makers about early intervention services and is distributed to public policy makers, attendees at FICCIT meetings, and to LESs for sharing with local stakeholders.

4. To improve performance on Indicator 6, the lead agency planned to utilize ARRA funds to supplement existing public awareness activities by implementing a marketing campaign to pediatricians and other health care providers. This was to include information about the importance of early identification of infants and young children with disabilities, eligibility criteria for Early Steps, and how to make a referral to Early Steps. Due to pending changes in the state's eligibility criteria, it was decided not to use ARRA resources for this campaign. However, some LESs have used the ARRA funds to enhance their marketing campaigns as described below. An Early Steps Sustainability Plan is being developed and it is anticipated that it will include steps to take for more effective communication with health care providers, including pediatricians.

The lead agency has awarded ARRA funding to some LESs to increase appropriate referrals and enhance public awareness activities. One LES was awarded ARRA funds to educate pediatricians in the Early Steps referral process and screening tools to reduce the number of children who are referred late or never referred to the Early Steps program. The anticipated outcome will be earlier identification of children. Another LES is using ARRA funding to hire an additional temporary community liaison to develop and implement a plan for increasing public awareness of the LES program, improving perception of the program, and expanding the number of children and families served by the LES. It is anticipated that these projects will positively impact Indicator 6 in 2010-2011. Results of these projects will be considered for possible future replication.

5. The lead agency participated in the Act Early Summit sponsored by the Centers for Disease Control and Prevention's National Center on Birth Defects and Disabilities and the

Health Resources and Services Administration’s Maternal and Child Health Bureau in October 2009. The purpose of the summit was to promote the development of state action plans to improve the identification, assessment, and services for young children with autism spectrum disorders and related disabilities and their families. The lead agency is actively involved in the development of an action plan for Florida’s Act Early campaign, which is expected to have a positive impact on performance in 2010-2011.

6. The lead agency is represented on the Governor’s Task Force on Autism Spectrum Disorders. This participation allowed the lead agency to contribute to the development of the 2010 Governor’s Task Force Report, which includes recommendations for early identification and referral of young children with disabilities. The report released in 2009 emphasized screening for autism spectrum disorders and developmental delay and supports referral to Early Steps. It also recommends that the Learn the Signs Act Early campaign, a public awareness campaign for pediatric primary care providers and families that includes the signs and symptoms of autism spectrum disorders, be utilized to bring Early Steps to the attention of family members of young children.

7. Lead agency staff participated as a resource member of the Florida Developmental Disabilities Council Child Development/Education Task Force, which has been considering proposals for funding the implementation of a statewide universal screening initiative, as recommended by the Florida Cabinet of Children and Youth. Funding has yet to be secured to implement the initiative. Early Steps participation on the Task Force has raised awareness of early intervention at the state level during 2009-2010, and it is expected that implementation of the initiative will impact progress in 2010-2011.

8. Lead agency staff completed a five-year trend analysis of the disposition of children referred to Early Steps who were not found eligible. This analysis revealed a statewide increase of children who were closed without an IFSP due to unsuccessful attempts to contact parent, withdrawal by parent prior to IFSP, and determined not eligible. Data will be disaggregated for further analysis to determine technical assistance needs of LESs related to family engagement and adequate follow up on referrals.

9. Public reporting of statewide and local performance related to Indicator 6 was accomplished in February 2010.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010-11

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Due to narrowing of the eligibility criteria, the lead agency anticipates reporting revised baseline data in the FFY 2010 APR and revised targets reflective of the new baseline.

Measurable and Rigorous Targets for Indicator 6:

FFY	
2011 (2011-2012)	1.89 %
2012 (2012-2013)	1.89 %

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Determine if there is a specific birth to 3 "target population" that may be under-represented. First, compare the population served with groups that are under represented in certain programs. Then, increase TA and outreach efforts in those programs to improve Child Find.	Annually through 2013	Lead Agency, in consultation with ES Data Center, and FICCIT
2. Continue public awareness efforts for medical professionals, especially pediatricians and other health care personnel, on the importance of early identification and referral.	Ongoing through 2013	Lead Agency, local ES Programs
5. Increase outreach to local referral sources (Healthy Start, school districts, etc.) which provide low number of referrals so they are informed about eligibility, identification of children who may be eligible, and about procedures for making appropriate referrals to ES. Activities may include: continued community outreach, improved service coordination efforts, outreach to early childhood provider partnerships, participation at community fairs, outreach to child care programs, and participation in child development screening days.	July 2006 and ongoing through 2013	Local ES Programs in coordination with Lead Agency and with input from partner agencies and the public
6. Expand awareness about ES, the children served and how to refer them to relevant state agencies in order to enhance Child Find efforts. ES will contact programs in other agencies to educate them about our efforts and resources. Activities may include continued public communications campaigns, marketing to specific groups, and the development and distribution of printed materials.	July 2006 and ongoing through 2013	Lead Agency, with input from partner agencies and the public
7. Track the percentage of children determined to be ineligible by LES and statewide to determine implications and need for technical assistance, training, etc.	Beginning July 2007 and ongoing through 2013	Lead Agency
12. The lead agency will participate on Florida's Act Early team to promote early identification, assessment, and intervention for children with autism spectrum disorder and related developmental disabilities.	October 2009 and ongoing through 2013	Lead Agency, Stakeholders
13. The lead agency will participate in statewide initiatives for the development of universal screening of all young children as prioritized by the Florida Cabinet of Children and Youth.	October 2009 and ongoing through 2013	Lead Agency, Stakeholders

The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
15. Report to the public on ES performance with percent of birth to three year old children served, reporting on statewide performance as well as performance by local ES Programs.	June 2007 and annually through 2013	Lead Agency

INDICATOR 7: 45-DAY TIMELINE

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

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

REPORT OF PROGRESS – INDICATOR 7			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
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	100%	91%	92%

RAW DATA CALCULATION – INDICATOR 7				
A	B	C	D	E
Total child records reviewed	Children with timely evaluation and assessment and initial IFSP	Children with evaluation and assessment and initial IFSP completed more than 45 days from the child's referral, with documented exceptional family circumstances that caused the delay	% Children with timely evaluation and assessment and initial IFSP or there is a documented exceptional family circumstance that caused the delay in completion of the evaluation and assessment and initial IFSP ((B + C) / A x 100 = D)	Children whose evaluation and assessment and initial IFSP were held more than 45 days from date of referral for reasons other than documented exceptional family circumstances (A - B - C = E)
270	204	44	92%	22

The actual target data were derived from QA monitoring results. The actual target data represent review of child records of randomly selected, newly referred children in all 15 LESs. Documented exceptional family circumstances that prevented the timely completion of the evaluation and assessment and initial IFSP are included in the numerator and denominator for calculating actual target data.

To measure performance with the 45-day timeline, each LES was required to provide documentation of the specific date the evaluation and assessment and initial IFSP was completed. The criterion for measurement of the 45-day timeline is 45 days from the date of referral. QA monitoring included a review of child record documentation to verify that there was appropriate documentation in the child's record to justify any delay in meeting the 45-day timeline due to exceptional family circumstances. QA Monitoring is described in more detail in the overview to the APR.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicator 7. Key factors influencing improvement on Indicator 7 were required focused monitoring and increased reporting by LESs to demonstrate correction of noncompliant practices.

Activities completed to improve performance on Indicator 7:

1. LESs with noncompliance in timely completion of the evaluation and assessment and initial IFSP were required to develop a CIP that addressed the strategies planned to correct the noncompliance as soon as possible, and in no case later than within one year of identification. Lead agency staff provided consultation and technical assistance to the LES related to the development of the CIP, assisting the LES to identify local practices and procedures that contributed to the noncompliance and recommending strategies for correction. Focused monitoring and frequent reporting were required of LESs identified as being out of compliance with the 45-day timeline. One outcome of these activities was the improvement of internal LES tracking systems and procedures to ensure that the 45-day requirement was met and to promote sustained improvement over time.

The lead agency developed and implemented a more comprehensive focused monitoring process for the lowest performing LESs in meeting the 45-day timeline. The purpose of this monitoring was to provide a framework for low performing LESs to assess performance, to identify practices that impede or facilitate high performance, and to assist LESs with recent demonstration of correction to sustain gains made. Targeted LESs for this monitoring activity were those with performance less than 75% in meeting the 45-day timeline. In 2009-2010, one LES had performance of less than 75% and therefore, was required to complete the additional monitoring activity. The LES that participated in this additional monitoring activity improved significantly in its performance with the 45-day timeline.

2. Technical assistance was provided to all LESs, with a special emphasis on those LESs demonstrating noncompliance with the 45-day timeline. Lead agency staff customized the technical assistance provided based on the causal factors and identified needs for each LES to improve performance and to achieve or maintain compliance. Technical assistance was provided in the form of onsite visits, desk reviews (review and feedback on documentation submitted by the LES), conference calls with LESs, facilitation of training, and policy clarification. The lead agency maintained a channel of communication with LESs and provided opportunities to address local issues or questions regarding the requirements for the 45-day timeline through monthly conference calls, statewide meetings, dissemination of an electronic weekly memo, and individualized technical assistance activities. Monthly Service

Coordination Workgroup calls provided opportunities for training and technical assistance on a regular basis.

3. To provide an ongoing mechanism for self-assessment, each LES has the capacity to produce ad-hoc reports from the Early Steps Data System to self-assess for progress and slippage on Indicator 7. A quarterly report was calculated from data in the Early Steps Data System and provided to LESs to track trends. As a result, LESs were better able to identify and analyze barriers to completing IFSPs within the 45-day timeline.

4. An analysis was conducted to account for the untimely completion of the evaluation, assessment, and initial IFSP to obtain a more thorough understanding of the issues faced by LESs and to inform the lead agency regarding statewide and LES technical assistance needs. The results of this analysis are represented in the following chart.

An Analysis of Barriers to Timely Evaluation and Assessment and Initial IFSP for the 270 Children in the Actual Target Data		
	Number of Children	% Total Children
A. Evaluation and assessment and initial IFSP were completed within the 45-day timeline	204	75.556%
B. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline for documented exceptional family circumstances	44	16.296%
C. TOTAL: Children whose evaluation and assessment and initial IFSP were completed within the 45-day timeline or the evaluation and assessment and initial IFSP were delayed due to documented exceptional family circumstances (A + B = C)	248	91.852%
D. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline due to provider availability issues	3	1.111%
E. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline due to LES capacity issues (includes Service Coordinator or other staff vacancy, and inadequate documentation of follow-up to ensure evaluation and assessment and initial IFSP were completed timely)	19	7.037%
F. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline due to delays in insurance authorization	0	0.000%
G. TOTAL: Children whose evaluation and assessment and initial IFSP were not completed within the 45-day timeline for reasons other than documented exceptional family circumstances (D + E + F = G)	22	8.148%
H. TOTAL (C + G = H)	270	100.000%

Based on this analysis, LES capacity issues (including vacant caseloads due to service coordinator turnover) continues to be the greatest barrier to meeting the 45-day timeline. This analysis prompted technical assistance to LESs from lead agency staff related to capacity issues and the disproportionate number of children whose IFSPs were late for documented exceptional family circumstances.

5. The lead agency implemented measures to improve efficiencies within its service coordinator enrollment processes. Revised procedures for service coordinator enrollment implemented in January 2009 resulted in more timely caseload assignment for newly hired Service Coordinators. This positively impacted individual service coordination caseload sizes in 2009-2010. With reduced caseloads, Service Coordinators more effectively initiated contact with families to gather information about the family's concerns, priorities, and resources, as well as scheduled the evaluation and assessment and initial IFSP.

6. Public reporting of statewide and local performance related to Indicator 7 was accomplished in February 2010.

7. Due to vigilance by the lead agency, all 2008-2009 findings of noncompliance related to Indicator 7 have now been corrected. Indicator 9 of this APR provides additional information about the lead agency’s activities to improve performance in correction of noncompliance as soon as possible, but no later than within one year of identification.

Indicator 7: Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **91%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	12
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	9
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	3

Indicator 7: Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	3
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	3
6. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Verification of Correction (either timely or subsequent):

The lead agency has verified that each LES with noncompliance identified in FFY 2008: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, and (2) has corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LES, consistent with OSEP Memorandum 09-02.

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducted a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance was relative to the extent and root cause of the findings of noncompliance. Additionally, for each LES with findings of noncompliance, the lead agency verified that the LES conducted the evaluation and assessment and initial IFSP, although late, unless the child was no longer within the jurisdiction of the LES. This verification was based on follow-up reporting by the LES on individual children whose evaluation and assessment and initial IFSP had not been conducted.

The three FFY 2008 findings of noncompliance with Indicator 7 that were not corrected within one year of identification were from three LESs. These three LESs were subject to increased reporting requirements until the noncompliance was corrected.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 7:

FFY	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Continue to determine compliance with the 45-day timeframe through QA monitoring (including child record review). Local ES Programs that are not in compliance with the 45-day timeline will be required to develop strategies to ensure compliance is reached as soon as possible, but no later than within one year of identification. The Lead Agency will verify compliance and utilize sanctions and enforcement actions if compliance is not reached within one year of identification.	Ongoing through 2013	Lead Agency, local ES Programs
3. Review data from QA monitoring child record review and the ES Data System to determine the efficacy of improvement strategies and identify additional improvement activities that need to be implemented.	July 2006 and continuing through 2013	ES Continuous Improvement Workgroup, Lead Agency
4. Monitor effectiveness of improvement strategies by review of compliance data, issues arising from complaints, due process hearings, and mediation requests related to the 45-day timeline and implement improvement strategies as indicated.	July 2006, and ongoing through 2013	Lead Agency, FICCIT
5. Report to the public on ES compliance with 45-day timeline, reporting on statewide compliance as well as compliance by each local ES Program.	June 2007 and annually through 2013	Lead Agency

The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
9. Use ARRA funds for improvements to the Early Steps Data System to include, but not limited to, Service Coordinator reports to plan for 45-day timelines.	July 2010 through June 2011	Lead Agency

INDICATOR 8: EFFECTIVE TRANSITION PLANNING

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 local education agency (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.

Account for untimely transition conferences, including reasons for delays.

REPORT OF PROGRESS - INDICATOR 8			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 8A: IFSPs with transition steps and services	100%	92%	94%
Indicator 8B: Notification to the LEA if the child is potentially eligible	100%	95%	96%
Indicator 8C: Timely transition conference	100%	80%	85%

RAW DATA CALCULATION - INDICATOR 8A			
A	B	C	D
Total child records reviewed (represents children from all 15 LESSs)	Children with transition plans that include steps and services to support the child’s transition	Children with transition plans that do not include steps and services to support the child’s transition	% Children with transition plans including steps & services (B / A x 100 = D)

270	255	15	94%
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RAW DATA CALCULATION - INDICATOR 8B				
A	B	C	D	E
Total child records reviewed (represents children from all 15 LESs)	Children whose families opted out of notification	Children with notification to the LEA	Children for whom the LEA was not notified (excluding children whose families opted out of notification)	% Children with notification to the LEA $(C / (A-B) \times 100 = E)$
270	10	250	10	96%

RAW DATA CALCULATION - INDICATOR 8C						
A	B	C	D	E	F	G
Total child records reviewed	Children for whom the family did not provide approval to conduct the transition conference	Total child records reviewed less the children for whom the family did not provide approval to conduct the transition conference $(A-B=C)$	Children with timely transition conference	Children with the transition conference being held less than 90 days prior to the child's third birthday, with exceptional family circumstances documented in the child's record	% Children with timely transition conference or with a documented exceptional family circumstance that delayed the transition conference $((D + E) / C \times 100 = F)$	Children with the transition conference being held less than 90 days prior to the child's third birthday for reasons other than documented exceptional family circumstances $(C-D-E=G)$
270	1	269	187	41	85%	41

The actual target data are derived from QA monitoring results. The actual target data represent review of randomly selected child records in all 15 LESs. Children whose families chose to opt out of notification in accordance with the OSEP-approved Early Steps opt out policy, are excluded from the numerator and denominator for calculating the actual target data for Indicator 8B. Documented exceptional family circumstances that prevented the timely completion of the transition conference are included in the numerator and denominator for calculating the actual target data for Indicator 8C. The child for whom the family did not provide approval to conduct the transition conference is excluded from the numerator and denominator of Indicator 8C.

To measure timely transition planning, each LES was required to provide copies of IFSPs for each identified child showing the transition steps and services, as well as providing the date of notification to the LEA and the date of the transition conference. QA monitoring included a review of child record documentation to verify there was appropriate documentation in the child's record to justify any delay in conducting a transition conference at least 90 days prior to the child's third birthday due to exceptional family circumstances. QA Monitoring is described in more detail in the overview to the APR.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicators 8A, 8B, and 8C. A key factor influencing improvement on Indicator 8 was collaboration between the lead agency and DOE to provide joint regional trainings for LESs and LEAs. Additionally, training of Service Coordinators and other LES staff impacted progress on Indicator 8.

Activities completed to improve performance on Indicator 8:

1. Lead agency staff, DOE staff, and stakeholders at the local level collaborated on the activities described below. These collaborative efforts increased communications between all parties, resulting in a better understanding of roles and responsibilities and more effective problem-solving at the system and child level.

The lead agency and DOE held five joint regional trainings pertaining to transition and child outcomes for LESs and LEAs in April 2009. In preparation for these regional trainings, an informal root cause analysis was conducted between each participating LES and its partner LEAs to identify issues and barriers to effective transition from Part C to Part B and to ensure that the training addressed these barriers. These trainings addressed Early Steps and school district policies to ensure children receive a timely and seamless transition from Part C to Part B and promoted collaboration in implementation of Florida's birth to five child outcomes measurement system. Agenda topics included notification strategies, summer birthdays, collaboration between LESs and LEAs related to transition procedures, implementation of the child outcomes measurement system, BDI-2 assessment process, sharing of the Part C to Part B transition tracking form, and effective transition practices. Meeting materials were posted on the TATS website for sharing with those who were not in attendance at the meetings.

2. The lead agency held a statewide meeting for Service Coordinators and other LES staff in May 2009 that included presentations pertaining to transition. Presentations and discussions included steps required in the transition process (focusing on the role of the Service Coordinator and policy with regard to notification), the transition conference, referral to LEA/community services, and closure to Early Steps. Data entry and completion of the transition planning section of the IFSP were also addressed.

A Training Tool CD, containing all of the presentations and handouts from the Service Coordinator statewide meeting, was distributed to each LES Training Coordinator following the meeting. The purpose of the CD distribution to Training Coordinators was to provide training materials from the meeting for local use.

3. Enhancements to the Early Steps Data System made in November 2008 and November 2009 provided an automated means for LESs to more easily track performance related to timely transition conferences, notification and identification of barriers to holding timely transition conferences. This provided a means for LESs to track due dates for transition activities and self-assess its performance related to Indicators 8B and 8C.

4. LESs with noncompliance in transition requirements were required to develop a CIP that addresses the strategies planned to correct the noncompliance as soon as possible, and in no case later than within one year of identification. Lead agency staff provided consultation and technical assistance to the LES related to the development of the CIP, assisting the LES to identify local practices and procedures that contribute to the noncompliance and recommending strategies for correction. Focused monitoring and frequent reporting were required of LESs identified as being out of compliance with transition requirements. One outcome of these activities was the improvement of internal LES tracking systems and

procedures to ensure that transition requirements were met and to promote sustained improvement over time.

5. Technical assistance was provided to all LESs, with a special emphasis on those LESs demonstrating noncompliance with transition requirements. Lead agency staff customized the technical assistance provided based on the causal factors and identified needs for each LES to improve performance and to achieve or maintain compliance. Technical assistance was provided in the form of onsite visits, desk reviews (review and feedback on documentation submitted by the LES), conference calls with LESs, facilitation of training, policy clarification, and provision of other resources. The lead agency maintained a channel of communication with LESs and provided opportunities to address local issues or questions regarding the requirements for transition through monthly conference calls, statewide meetings, policy clarification, dissemination of an electronic weekly memo, and other technical assistance activities.

Training and technical assistance were provided to Service Coordinators through monthly Service Coordination Workgroup calls. Service Coordinators received an introduction to new data entry fields in the Early Steps Data System for tracking transition timelines, shared implementation procedures for notification, and discussed effective practices through these workgroup calls.

6. An analysis was conducted to account for untimely transition conferences to obtain a more thorough understanding of the issues faced by LESs and to inform the lead agency regarding statewide and LES technical assistance needs. The results of this analysis are represented in the following chart.

An Analysis of Barriers to Timely Transition Conference for the 270 Children in the Actual Target Data		
	Number of Children	% Total Children
A. Children for whom the family did not provide approval to conduct the transition conference	1	N/A
B. Children for whom the transition conference was conducted at least 90 days prior to the child's third birthday	187	69.517%
C. Children for whom the transition conference was conducted less than 90 days prior to the child's third birthday for documented exceptional family circumstances	41	15.241%
D. TOTAL: Children whose transition conference was held at least 90 days prior to the child's third birthday or the transition conference was delayed due to documented exceptional family circumstances (B + C = D)	228	84.758%
E. Children for whom the transition conference was held less than 90 days prior to the child's third birthday due to LES capacity issues (includes Service Coordinator or other staff vacancy, and inadequate documentation of follow-up to ensure the transition conference was held on time).	39	14.498%
F. Children for whom the transition conference was held less than 90 days prior to the child's third birthday due to LEA representative availability to participate in the transition conference.	2	.074%
G. TOTAL: Children whose transition conference was held less than 90 days prior to the child's third birthday for reasons other than documented exceptional family circumstances (E + F = G)	41	15.242%
H. TOTAL (D + G = H)	270	100.000%

Based on this analysis, LES capacity issues (including vacant caseloads due to service coordinator turnover) continues to be the greatest barrier to holding the transition conference at least 90 days prior to the child's third birthday. This analysis prompted technical assistance to LESs from lead agency staff related to capacity issues and the disproportionate

number of children whose transition conferences were late for documented exceptional family circumstances.

7. Family Resource Specialists continue to provide the transition module of the family training curriculum, *A New Star, A Families Guide to Navigating Early Steps*, to families of children approaching age 3.

8. Public reporting of statewide and local performance related to Indicator 8 was accomplished in February 2010.

9. Due to vigilance by the lead agency, all 2008-2009 findings of noncompliance related to Indicator 8 have been corrected.

Indicator 8A: Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **92%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	9
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	9
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Indicator 8A: Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Indicator 8B: Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **95%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	7
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	7
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Indicator 8B: Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Indicator 8C: Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **80%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	10
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	9
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

Indicator 8C: Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	1
6. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Verification of Correction (either timely or subsequent):

The lead agency has verified that each LES with noncompliance identified in FFY 2008: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, and (2) has corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LES, consistent with OSEP Memorandum 09-02.

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducted a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance was relative to the extent and root cause of the findings of noncompliance. Additionally, for each LES with findings of noncompliance related to the timeline requirement of conducting a transition conference, the lead agency verified that the LES conducted the transition conference, although late, unless the child was no longer within the jurisdiction of the LES. For each LES with a finding of noncompliance concerning a transition requirement that is not a timeline requirement, the lead agency

verified that the LES implemented the required action, unless the child was no longer within the jurisdiction of the LES. These verification activities were based on follow-up reporting by the LES on individual children for whom transition planning activities had not been conducted.

The LES in which the one FFY 2008 finding of noncompliance with Indicator 8 was not corrected within one year of identification was subject to increased reporting requirements until the noncompliance was corrected.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 8:

FFY	
2011 (2011-2012)	A. 100% B. 100% C. 100%
2012 (2012-2013)	A. 100% B. 100% C. 100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Continue to measure compliance with transition requirements through QA monitoring (including child record review). Local ES Programs that are not in compliance with transition requirements will be required to develop strategies to ensure compliance is reached as soon as possible, but no later than within one year of identification. The Lead Agency will verify compliance and utilize sanctions and enforcement actions if compliance is not reached within one year of identification.	Ongoing through 2013	Lead Agency staff, local ES Programs
2. Continue to offer <i>A New Star</i> training to families whose children are approaching the age of three. Analyze evaluations from this training and make adjustments as indicated.	Ongoing through 2013	Local ES Programs, Family Resource Specialists
10. Monitor the effectiveness of improvement strategies related to transition by review of statewide and disaggregated compliance data, data on exiting children, family survey results, and issues identified in complaints to determine the effectiveness of improvement strategies and if additional actions are needed to effect compliance.	July 2006 and ongoing through 2013	Lead Agency, FICCIT, DOE

12. Report to the public on ES compliance with transition requirements, reporting on statewide compliance as well as compliance by each local ES Program.	June 2007 and annually through 2013	Lead Agency
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The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
14. Use ARRA funds for improvements to the Early Steps Data System to include, but not limited to, planning for transition activities	July 2010 through June 2011	Lead Agency, ES Data Center

INDICATOR 9: GENERAL SUPERVISION

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

REPORT OF PROGRESS - INDICATOR 9			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
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	100%	61%	88%

RAW DATA CALCULATION - INDICATOR 9					
	A	B	C	D	E
	Total findings of noncompliance 2008 - 2009	Findings from Column (A) corrected within one year of identification	Percent findings from Column (A) corrected within one year of identification (B/A x 100 = C)	Findings from Column A which were not corrected within one year, but there has been subsequent correction	Percent findings from Column (A) corrected to date (B+D) / A x 100 = E)
NONCOMPLIANCE IDENTIFIED IN 2008 - 2009	108	95	88%	13	100%

The actual target data reflect noncompliance identified through QA monitoring and complaints from July 1, 2008 through June 30, 2009. When noncompliance is identified, a finding of noncompliance is issued. In the case of noncompliance identified through QA monitoring, the date that the QA report is issued is the date of identification of noncompliance and the noncompliance must be corrected within one year of this date. In the case of a finding of noncompliance issued as a result of a complaint, the date of final complaint report issuance is the date of identification of the noncompliance and the noncompliance must be corrected within one year of this date.

There were a total of 108 findings of noncompliance identified in the timeframe of July 1, 2008 through June 30, 2009. Ninety-five of these findings (88%) were corrected within one year of identification. Subsequent correction has been demonstrated and verified by the lead agency for the remaining 13 findings of noncompliance identified in 2008-2009. Therefore, 100% of the findings of noncompliance identified in 2008-2009 have now been corrected and correction has been verified by the lead agency in accordance with the OSEP Memorandum 09-02. The lead agency has determined that each LES is correctly implementing the specific regulatory requirements based on a review of child records and other data reflecting performance subsequent to the noncompliance. The Indicator 9 Worksheet provided as an attachment to the APR includes detailed information regarding noncompliance identified in the timeframe of July 1, 2008 through June 30, 2009.

In its letter of June 3, 2010, OSEP advised the lead agency of technical assistance sources related to Indicator 9 and required the lead agency to report how the technical assistance selected by the lead agency is addressing factors contributing to ongoing noncompliance. The sources of technical assistance which have been utilized by the lead agency since submission of the FFY 2008 Annual Performance Report on February 1, 2010 to improve performance on Indicator 9 are:

- Participation in sessions at the 2010 IDEA Part B and Part C Data Meetings and the 2010 OSEP Mega Conference in which OSEP provided updates on identification and correction of noncompliance
- Participation on conference calls provided by OSEP and SERRC in which the requirements of OSEP Memorandum 09-02 were reviewed and clarified
- Participation in periodic conference calls with the OSEP State Contact for Florida Part C

In addition to the technical assistance accessed as described above, the following sources of technical assistance were used previously by the lead agency and also contributed to improvement on Indicator 9. These were:

- Review of APRs from selected states recommended by NECTAC staff as having effective systems of general supervision
- Participation in June 2009, MSIP Conference Call, "Updates on SPP/APR Issues"
- Participation in the session "Part C Timely Correction: Definition, Documentation and Impact on State Determinations" at the OSEP 2009 Overlapping IDEA Part B and Part C Data Meeting

Lessons learned from these technical assistance activities have been incorporated into lead agency practices to improve performance on Indicator 9. These technical assistance activities have informed changes to the lead agency's general supervision practices for monitoring, identification of noncompliance, and ensuring timely correction of noncompliance. The most significant of these changes has been the implementation of practices to actively and systematically intervene with LESs prior to the one-year time frame for correction of noncompliance. As a result, the actual target data for 2009-2010 shows significant improvement and data for 2010-2011 (to be reported in the FFY 2010 APR) shows 100% of

the findings of noncompliance identified in 2009-2010 were corrected as soon as possible, but no later than within one year of identification.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009–2010:

Florida significantly improved its performance on Indicator 9. The primary factors impacting this improved performance were the lead agency's active and systematic intervention with LESs prior to the one-year time frame for correction of noncompliance and the assignment of an additional staff person to support the lead agency's efforts to work more intensely with LESs to facilitate timely correction of noncompliance.

Activities completed to improve performance on Indicator 9:

1. Changes to the state's practices in the timeline cycle of activities designed to ensure timely correction of noncompliance were amended to begin earlier, resulting in more timely correction of noncompliance. If an LES had not demonstrated correction of noncompliance within nine months from the date of identification of noncompliance, lead agency staff required focused monitoring to be conducted by the LES and the results reported to the lead agency. Focused monitoring provides a format for demonstrating correction and informal root cause analysis of internal processes. Lead agency staff provided feedback on focused monitoring results to promote effective practices and improved performance. This requirement for increased reporting continued until the LES demonstrated correction.
2. A hierarchical approach to correction of noncompliance was implemented, depending on whether the identified noncompliance was extensive or found in only a small number of child records. Therefore, the lead agency more effectively utilized its resources to intervene with LESs most needing assistance.
3. In December 2008, the lead agency implemented a new system for tracking of focused monitoring activities, including assignment date, due date, receipt date, verification date, and next steps. In addition, lead agency staff assessed the status of all uncorrected noncompliance on a monthly basis.
4. To assess performance and to identify noncompliance, annual QA reviews of each of the 15 LESs were conducted through self-assessment of child records randomly selected by the lead agency. The QA self-assessment information completed by each LES was submitted to the lead agency for review, along with information from the child record. The lead agency conducted a desk review of the self-assessment information and included in its analysis a review of other pertinent data to determine consistency among various sources of information, such as prior performance, progress on the CIP, and improvement activities implemented by the LES. When there was unexplained inconsistency across sources of information, the lead agency requested copies of additional documentation from child records to verify the self-assessment information. Targeted LESs were selected to receive technical assistance in the form of a facilitated self-assessment. The facilitated self-assessment was conducted onsite at the LES and provided an opportunity for lead agency staff to mentor LES staff on the correct interpretation of compliance and included rich technical assistance discussions.
5. Complaints were another means through which noncompliance was identified. Revised internal procedures for complaint follow-up were implemented to ensure that noncompliance identified as a result of a complaint was corrected as soon as possible, but no later than within one year of identification.
6. LESs with identified noncompliance were required to develop a CIP that addressed the strategies planned to correct noncompliant practices as soon as possible, and in no case

later than within one year of identification. Lead agency staff met via conference call with the LES to provide consultation and technical assistance to the LES related to the development of the CIP, assisting the LES to identify local practices and procedures that contributed to the noncompliance and recommending strategies for correction. The LES prepared the CIP which included activities and timelines to ensure correction of the noncompliant practice as soon as possible, but in no case later than within one year of identification.

LESs with a “meets requirements” determination were required to submit CIP updates every six months, while other LESs were required to, at a minimum, submit quarterly updates to the CIP. Depending on the progress toward improved performance by LESs not in the determination category of “meets requirements”, more frequent CIP updates were required. All CIP updates must include the status of each of the planned activities. Requirements for CIP development and submission of updates were included in contracts with each LES. LESs were also required to submit a training plan that included planned staff and provider training to address any areas of noncompliance.

7. Technical assistance was provided to all LESs, with a special emphasis on those LESs with identified noncompliance. Lead agency staff customized the technical assistance provided based on the causal factors and identified needs for each LES to improve performance and to achieve or maintain compliance. Technical assistance was provided in the form of onsite visits, desk reviews (review, and feedback on child record documentation submitted by the LES), conference calls with LESs, facilitation of training, policy clarification, and linking the LES to other resources.

8. The lead agency maintained a channel of communication with LESs regarding indicators, performance improvement, and the requirement to correct identified noncompliance as soon as possible, but no later than within one year of identification through monthly conference calls, statewide meetings, policy clarification correspondence, dissemination of an electronic weekly memo, and other technical assistance activities.

9. If an LES did not demonstrate correction of noncompliance within 12 months from the date of identification, the lead agency implemented increased reporting requirements until the noncompliance was corrected.

10. To better align with OSEP requirements for determinations and to reinforce the requirement to correct noncompliance within one year of identification, the lead agency consulted with a stakeholder workgroup to revise its determination criteria. Prior to 2010-2011, the determinations criteria utilized by the lead agency specified that if the LES corrected all identified noncompliance prior to the date the lead agency made determinations, the determination for the LES was “meets requirements”. As a result, the LES could be in “meets requirements” even if noncompliance was corrected beyond the one-year timeframe. The revised criteria, effective July 2010, specifies that the LES must have corrected all noncompliance within the one year timeframe in order to be in the determinations category of “meets requirements.” In addition, in assessing the process for making determinations, it was apparent that the timelines for QA monitoring and determination announcements should be better aligned. Effective with determinations made in 2010-2011, determinations were made within a month of issuance of the QA reports by the lead agency. Based on interactions between the lead agency and staff of LESs, there is a strong motivation on the part of LESs to achieve a “meets requirements” determination. While these changes to the determinations criteria and process will not impact performance until 2011-2012, it is expected that these changes will assist the lead agency to sustain the gains made in performance on Indicator 9.

11. The lead agency also consulted with its stakeholder workgroup to assess its practices for incentives to ensure alignment with the requirement to correct noncompliance as soon as possible, but no later than within one year of identification. As a result of this assessment, the criteria for statewide recognition was changed. LESs must now have corrected

noncompliance within one year of identification to receive statewide recognition for demonstrating highest overall scores on QA monitoring.

Indicator 9: Correction of FFY 2008 Findings of Noncompliance Timely Corrected (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009) (Sum of Column a on the Indicator C 9 Worksheet)	108
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	95
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	13

Indicator 9: Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	13
5. Number of findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	13
6. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

Verification of Correction (either timely or subsequent):

The lead agency has verified that each LES with noncompliance identified in FFY 2008: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data, and (2) has corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the LES, consistent with OSEP Memorandum 09-02.

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducted a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance was relative to the extent and root cause of the findings of noncompliance. The lead agency ensured correction of all instances of identified noncompliance. For noncompliance related to a timeline requirement, the lead agency required follow-up reporting to ensure that the required action was completed for each identified child, although late, unless the child was no longer within the jurisdiction of the LES. For other noncompliance, the lead agency verified that the LES had corrected each individual instance of noncompliance, unless the child was no longer within the jurisdiction of the LES.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 9:

FFY	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Ensure compliance by review of statewide and disaggregated compliance and performance data on at least a quarterly basis by the Lead Agency and other key stakeholders to inform decision making regarding personnel development and training needs, resource allocation, and the implementation of incentives and enforcement actions. Information to be reviewed to include: compliance and performance data from the ES Data System (including 618 data), family survey results, issues identified in complaints, due process hearings, and mediations, QA monitoring results, and Continuous Improvement Plan activities completed.	January 2006 and ongoing through 2013.	Lead Agency, FICCIT, ES Continuous Improvement Workgroup
2. Evaluate the effectiveness of the system for General Supervision including its ability to monitor, support and ensure compliance by analyzing statewide and local ES Program performance across time. Based on the results of this analysis, recommend and implement actions for improvement.	January 2006 and ongoing through 2013	Lead Agency, FICCIT, ES Continuous Improvement Workgroup
4. Review the information described in Activity # 1 and provide recommendations to the Lead Agency regarding improvement activities (including TA, personnel development and training, policy clarification), compliance correction, and incentives and enforcement actions.	March 2006 and ongoing through 2013	FICCIT, ES Continuous Improvement Workgroup, Lead Agency
5. Include enforcement actions, consequences, and timelines in contracts with local ES Programs. Implement enforcement actions per contract specifications.	July 2006 and annually through 2013	Lead Agency

6. Implement enforcement actions.	July 2006 and annually through 2013	Lead Agency
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INDICATOR 10: WRITTEN COMPLAINTS

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.

REPORT OF PROGRESS - INDICATOR 10			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
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	100%	100%	100%

The actual target data are based on information recorded in the lead agency’s complaint tracking log and as reported in Florida’s 618 data on November 1, 2010.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009-2010:

Florida sustained its performance and met the target for Indicator 10. During 2009-2010, one written signed complaint was received. The report for this complaint was issued within the required timeline 60-day and there were no findings of noncompliance as a result of this complaint.

Florida’s system of formal dispute resolution includes mediation, complaint investigation, and due process hearings. While families and stakeholders are encouraged to address concerns about the early intervention system informally at the local level, these formal options are always available. Families are informed of these options during the following:

- their initial orientation to Early Steps by their Service Coordinators
- at IFSP meetings
- when they express dissatisfaction or a concern
- anytime before the LES or service provider proposes to initiate, change, or refuses to initiate or change the identification, evaluation, or placement of the infant or toddler with a disability; or the provision of appropriate early intervention services to the child or the child’s family

The family training curriculum, *A New Star: A Family’s Guide to Navigating Early Steps*, includes a module on resolution of disputes.

Florida’s complaint procedures provide for the filing of complaints to the lead agency, the completion of an independent investigation which includes the opportunity for the complainant and respondent to submit information orally or in writing, a review of preliminary findings and opportunity to provide further information, and the issuance of a final written decision that addresses each allegation and the associated findings.

Activity completed to sustain performance on Indicator 10:

Lead agency procedures for internal accountability of handling of complaints were followed to ensure that the complaint filed received prompt attention by lead agency staff, including assignment of an independent investigator, and completion of the final report within the 60-day timeline.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 10:

FFY	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Evaluate the timeliness and effectiveness of the dispute resolution system by analyzing complaints, due process hearing, and mediation requests received, timeliness of investigations, reports and other actions, and verification of correction of any compliance issues identified. Based on the results of this analysis, take actions as necessary to ensure that all timelines are met and compliance is corrected as soon as possible or, at least within one year of identification of the noncompliance.	February 2006 and annually through 2013	Lead Agency, FICCIT, ES Continuous Improvement Workgroup

The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
3. Report the status of complaints received monthly to the Lead Agency ES Management Team.	March 2006 and monthly through 2013	Lead Agency

INDICATOR 11: DUE PROCESS HEARING REQUESTS

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.

REPORT OF PROGRESS - INDICATOR 11			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline	100%	No hearings held	No hearings held

The actual target data are based on information recorded in the lead agency’s tracking log of due process hearing requests and as reported in Table 4 of Florida’s 618 data on November 1, 2010.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009-2010:

During 2009-2010, there were no requests for a due process hearing.

Tracking and internal accountability will be ongoing to ensure that any due process hearing requests received are handled within applicable timelines. Internal accountability is facilitated by written procedures for handling of complaints, due process hearing requests, and mediation requests by lead agency staff.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 11:

FFY	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Evaluate the timeliness and effectiveness of the dispute resolution system by analyzing complaints, due process hearing, and mediation requests received, timeliness of investigations, reports and other actions, and verification of correction of any compliance issues identified. Based on the results of this analysis, take actions as necessary to ensure that all timelines are met and compliance is corrected as soon as possible or, at least within one year of identification of the noncompliance.	February 2006 and annually through 2013	Lead Agency, FICCIT, ES Continuous Improvement Workgroup
2. Report the status of due process hearing requests received monthly to the Lead Agency ES Management Team.	March 2006 and monthly through 2013	Lead Agency

INDICATOR 12: RESOLUTION OF DUE PROCESS HEARING REQUESTS

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.

This indicator is not applicable to Florida, as the Part B due process procedures have not been adopted.

INDICATOR 13: MEDIATIONS RESULTING IN MEDIATION AGREEMENTS

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.

REPORT OF PROGRESS - INDICATOR 13			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 13: Percent of mediations that resulted in mediation agreements	N/A	50%	0%

The actual target data are based on information recorded in the lead agency’s mediation tracking log and as reported in Table 4 of Florida’s 618 data on November 1, 2010.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009-2010:

Florida slipped in its performance on Indicator 13. Florida received one request for mediation during 2009-2010. In accordance with lead agency written procedures for handling of mediation requests, the mediation session was held within fifteen days of receipt of the request for mediation. Unfortunately, the parties to the mediation session were not able to reach agreement and therefore, the session did not result in a mediation agreement. The family did not pursue other due process options. Three months after the mediation session, the IFSP team (including the family) agreed that the outcomes on the child’s IFSP had been met and the child was subsequently closed to Early Steps.

Activity completed to improve performance on Indicator 13:

Tracking and internal accountability has been ongoing to ensure that mediation sessions are held promptly. In addition, the mediator encourages the parties to use a positive and constructive approach to mediation so that a mediation agreement can be reached.

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

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
<p>1. Evaluate the timeliness and effectiveness of the dispute resolution system by analyzing complaints, due process hearing, and mediation requests received, timeliness of investigations, reports and other actions, and verification of correction of any compliance issues identified. Based on the results of this analysis, take actions as necessary to ensure that all timelines are met and compliance is corrected as soon as possible or, at least within one year of identification of the noncompliance.</p>	<p>February 2006 and annually through 2013</p>	<p>Lead Agency, FICCIT, ES Continuous Improvement Workgroup</p>
<p>2. Report the status of due process hearing requests monthly to the Lead Agency ES Management Team.</p>	<p>March 2006 and Monthly through 2013</p>	<p>Lead Agency, FICCIT</p>

INDICATOR 14: TIMELY AND ACCURATE DATA

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)

REPORT OF PROGRESS - INDICATOR 14			
	Measurable and Rigorous Target 2009 - 2010	Actual Target Data 2008 - 2009	Actual Target Data 2009 - 2010
Indicator 14: State reported data are timely and accurate	100%	96.4%	100%

The actual target data are derived from the SPP/APR package Indicator 14 data rubric, which is copied below.

SPP/APR Data - Indicator 14			
APR Indicator	Valid and reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8A	1	1	2
8B	1	1	2
8C	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	1	1	2
		Subtotal	30
APR Score Calculation	Timely Submission Points - If the FFY 2009 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total - (Sum of subtotal and Timely Submission Points) =		35

618 Data - Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 – Child Count Due Date: 2/1/10	1	1	1	1	4
Table 2 – Program Settings Due Date: 2/1/10	1	1	1	1	4
Table 3 – Exiting Due Date: 11/1/10	1	1	1	NA	3
Table 4 – Dispute Resolution Due Date: 11/1/10	1	1	1	N/A	3
				Subtotal	14
618 Score Calculation		Grand Total (Subtotal x 2.5)=			35

Indicator #14 Calculation	
A. APR Grand Total	35.00
B. 618 Grand Total	35.00
C. APR Grand Total (A) + 618 Grand total (B) =	70.00
Total NA in APR	0.00
Total NA in 618	0.00
Base	70.00
D. Subtotal (C divided by Base)=	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009 – 2010:

Florida improved its performance on Indicator 14. This improvement was a result of technical assistance received by the lead agency from DAC/WESTAT regarding filling out the annual table submissions.

Activities completed to improve performance on Indicator 14:

1. Technical assistance was pursued by the lead agency from DAC/WESTAT, OSEP, NECTAC, and SERRC, which resulted in improvement of data collection processes and the accurate completion of the Indicator 14 rubric. An onsite technical assistance visit was provided by the lead agency's OSEP State Contact to advise on general supervision practices, including the collection of valid and reliable data.
2. A verification process was implemented to ensure valid and accurate data prior to reporting of 618 data. Missing data were identified and reports issued to LESs with a required timeframe for entering the missing data into the Early Steps Data System. Prior to inclusion of the data in submitted 618 data reports, the lead agency performed a subsequent review to ensure LESs followed up on entering the missing data.
3. Enhancements to the Early Steps Data System made in November 2008 and November 2009 provided an automated means for LESs to more easily track performance related to timely transition conferences, notification, and identification of barriers to holding timely transition conferences. This provided a means for the LES to track due dates for transition activities and self-assess its performance related to Indicators 8B (notification to the LEA) and 8C (timely transition conference).
4. The lead agency determined that ARRA funds will be used for improvements to the Early Steps Data System to include, but not limited to, tracking IFSP reviews, enhance reporting of race and ethnicity, enhance the tracking of timely services, and enable more effective entry of referrals.
5. Quarterly data fix reports were provided to each LES to ensure accuracy of data. These reports targeted missing, incorrect, and/or inaccurate data, thus providing information for the LES to correct data and provide ongoing reinforcement for accurate data collection methods.
6. After the deadline for quarterly data fix reports, performance matrix reports were calculated from data in the Early Steps Data System and provided to LESs to track trends. LESs also have the capability to produce ad-hoc reports for this purpose. This trend analysis led to the identification of data anomalies and prompted correction of inaccurate data.
7. QA monitoring included an assessment of accurate data entry, requiring reviewers to compare information in child records with information recorded in the Early Steps Data System. Discrepancies were corrected and were subsequently verified by the lead agency.
8. A Data Users Workgroup, composed of representatives of the lead agency and LESs, met quarterly via conference call to provide a forum for discussion and decision-making regarding improvements to the Early Steps Data System.
9. Lead agency staff participated in the OSEP 2010 *Overlapping IDEA Part B and Part C Data* meetings in June 2010. Sessions on "Promoting and Supporting Local data Use in Your State", "Data Quality: Operationalizing and Assessing", "National Data Initiatives", "Table Discussions about National Data Initiatives", "Feedback on Annual Performance Reports and State Determinations", "Part C-OSSEP Update on Identification and Correction of Noncompliance", "Efforts to Assist Local Programs to Use Their Data for Improvement", "Using Financial and Program Data to Leverage Program Improvement", "Funds and Support Needed to Improve Data Systems", "Early Childhood Outcomes Data (Indicator 3) Analyses and Use", "Data Quality: Operationalizing and Assessing Validity and Reliability of Local Data" were attended. The lead agency also participated in the 2010 OSEP Mega Conference and attended the session "Using Data and Improvement Activities for Better Performance Across all APR Indicators". Participation in these conferences informed changes made to the state's general supervision practices for monitoring, identification of noncompliance, and

ensuring timely correction of noncompliance. In addition, input from other states helped to inform improvements to the data collection process.

10. The lead agency maintained a channel of communication with LESs and provided opportunities to address local issues or questions regarding the requirements for timely and accurate data through monthly conference calls, statewide meetings, dissemination of an electronic weekly memo, and individualized technical assistance activities.

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

Targets are added to reflect the additional two years of reporting (2011-2012 and 2012-2013).

Measurable and Rigorous Targets for Indicator 14:

FFY	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Timelines for Improvement Activities are revised to reflect the additional two years of reporting (2011-2012 and 2012-2013). Only those activities that will be extended are listed below, therefore, the numbering does not include all of the original activities from the SPP.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
3. Add additional QA measures to verify specific data entry for each child. For identified data element which is critical to IDEA, Part C compliance, local ES Programs will be required to submit the results of a review of a specified number of child records. Any local ES Program found to be out of compliance with data entry requirements will be required to implement strategies for correction as soon as possible, but no later than within one year of identification.	July 2006 and ongoing through 2013	Lead Agency, local ES Programs

The following Improvement Activity is added to the Florida SPP:

Activities	Timelines	Resources
9. The lead agency will provide training to LESs on the enhanced Early Steps Data System collection and reporting features.	July 2013	Lead Agency

