FLORIDA

ANNUAL PERFORMANCE REPORT (APR)

PART C

Federal Fiscal Year (FFY) 2008 – 2009

Florida Annual Performance Report
Part C
FFY 2008 – 2009

Table of Contents

PAGE

Overview of the Annual Performance Report.....1

PART C INDICATOR

Indicator 1: Timely Service Delivery.....4

Indicator 2: Services in Natural Environments.....11

Indicator 3: Child Outcomes.....14

Indicator 4: Family Outcomes.....15

Indicator 5: Infants and Toddlers Birth to 1.....19

Indicator 6: Infants and Toddlers Birth to 3.....22

Indicator 7: 45-Day Timeline.....25

Indicator 8: Effective Transition Planning.....30

Indicator 9: General Supervision.....37

Indicator 10: Written Complaints.....43

Indicator 11: Due Process Hearing Requests.....45

Indicator 12: Resolution of Due Process Hearing Requests.....46

Indicator 13: Mediations Resulting in Mediation Agreements.....47

Indicator 14: Timely and Accurate Data..... 48

Part C State Annual

Performance Report (APR) for 2008 – 2009

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), 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), and the Southeast Regional Resource Center (SERRC) 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, Data Accountability Center/WESTAT, in accordance with Public Law 108-446, Section 618, will be referenced in this document as "618 data".

Beginning July 1, 2006, the lead agency implemented realignment of the LESs to accomplish a more equitable distribution of geographic area, per child funding and numbers of children served by each LES. As of July 1, 2008, this realignment was completed. During 2007-2008, there were 16 LESs. Upon completion of the realignment July 1, 2008, the number of LESs was reduced to 15.

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. Historically, the Florida legislature, through funding proviso, limited the direct provision of services by the LES to service coordination and evaluation and assessment. This limitation has been eliminated and in 2005, the lead agency included a provision in LES contracts for hiring intervention service personnel by the LES. As a result, some LESs are gradually hiring intervention service staff. Demand due to increased referrals has forced the prioritization of workload for these personnel on eligibility evaluation. While this practice positively impacts performance on Indicator 7 (45-day timeline), it has a negative impact on Indicator 1 (timely service delivery) performance. 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. Administrative challenges with this system caused delays in processing and approval of applications, and subsequently, created a disincentive for early intervention providers to participate in Florida's early intervention system. This exacerbated existing issues with provider availability for delivery of early intervention services and negatively impacted performance on Indicator 1. Enhancements to the CMS Provider Management System were implemented in August 2009 in order to automate the approval process and therefore, expedite enrollment. These activities are not expected to have an impact on performance on Indicator 1 until 2009-2010.

The Florida Medicaid system has continued to transition to managed care. This has significantly reduced benefit coverage for Individual Family Service 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. In addition, the Agency for Health Care Administration (AHCA) transitioned to a new fiscal agent effective July 1, 2008. This has created further barriers as new administrative practices are implemented, problems are identified, and subsequently improved upon. Since the Medicaid fiscal agent contract changed hands, payments for Medicaid services have been severely delayed as the new agent develops proficiency processing claims.

In 2008-2009, the Florida economic forecast was bleak and budget reductions were imposed for state agencies. Further downturns in Florida's economic forecast are predicted for the next year.

Delays in publication of the final regulations of Part C, IDEA 2004 have 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 have been drafted since 2007, following release of the proposed IDEA, Part C regulations. States have not received information related to projected plans or time lines 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. Although final regulations have not yet been released; 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.

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 towards the state's system of general supervision. A realignment of staff functions in the Early Steps State Office has placed additional resources towards data management, identification and correction of noncompliance, and performance improvement activities. This realignment of lead agency staff functions was initiated in March 2008, but not fully implemented until after the current review period.

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 we believe will over time result 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 towards the State Performance Plan (SPP) targets, status of implementation of the primary service

provider approach to service delivery, identified training needs, dispute resolution issues, feedback from families, and results of Quality Assurance (QA) monitoring. This ongoing analysis provides a basis for decision-making regarding factors influencing progress or slippage and the efficacy of improvement activities. Through this analysis, the lead agency makes recommendations regarding future 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, and corrective actions 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 administrative 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, the 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 May 2009, the lead agency reported to the public on LES performance towards 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. It is anticipated that public reporting of 2008-2009 performance will be completed by May 2010.

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	100%	70%	72%

RAW DATA CALCULATION - INDICATOR 1				
A	**B**	**C**	**D**	**E**
Total child records reviewed (represents children from all 15 LESs)	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 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)
279	168	33	72%	78

The actual target data are derived from QA monitoring results. Data for the actual target data represent review of randomly selected child records in all 15 LESs. 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.

QA monitoring includes a review of child record documentation to verify that there is appropriate documentation in the child's record to justify any delay in timely service delivery due to exceptional family circumstances. To measure timely service delivery, each LES is required to provide detailed

information regarding the specific services that are 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.

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

Florida made progress on Indicator 1. A key factor influencing improvement on Indicator 1 has been the lead agency's ongoing focus on the requirement for timely service delivery. Providing technical assistance in the form of policy clarification, training, and consultation to LESs; requiring timely service delivery to be addressed in Continuous Improvement Plans (CIP); requiring focused monitoring and increased reporting by LESs to demonstrate correction of noncompliant practices; and, implementing enforcement actions have contributed to the state's improved performance. While many LESs improved in their performance on Indicator 1, there was slippage by four LESs.

To identify current progress, data from focused monitoring activities subsequent to June 30, 2009, have been analyzed. These data represent performance for 13 LESs from July 1, 2009 through December 31, 2009. The 2 LESs that were not required to participate in focused monitoring activities were performing at 93% and 100%. The focused monitoring included a review of child records to assess whether services on the child's IFSP were delivered within 30 days from the date the family consented to the service. The results of this focused monitoring show improved performance over actual target data for 2008-2009. The raw data calculation for the focused monitoring is shown in the table below.

RAW DATA CALCULATION: INDICATOR 1 FOCUSED MONITORING July 1, 2009 – December 31, 2009				
A	**B**	**C**	**D**	**E**
Total child records reviewed (represents children from 13 LESs)	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 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)
344	264	41	89%	39

Activities that have been completed to improve performance on Indicator 1 are:

1. In its letter of June 1, 2009, OSEP advised the lead agency of technical assistance sources related to Indicator 1 and required the lead agency to report on the technical assistance sources utilized and the actions the lead agency has taken as a result of the technical assistance. The lead agency researched technical assistance sources, consulted with other states, and utilized experts at OSEP, NECTAC, and SERRC regarding timely services. These technical assistance sources which have been utilized and their results are described in Activities 2, 4, 5, 7, and 10.

2. The lead agency conducted a review of the Annual Performance Reports from six selected states to assess how timely service delivery is measured and how improvement strategies are being implemented by other states to positively impact timely service delivery. States with high performance on Indicator 1 and a designation of "meets requirements" were selected for this review. In addition to reviewing Indicator 1 of the Annual Performance Report, lead agency staff contacted state representatives to gather additional information on the state's measurement of Indicator 1. This

information was used as a basis for analysis of Florida's method of measurement for timely service delivery and analysis of the efficacy of improvement strategies.

3. LESs with noncompliance in timely service delivery are required to develop a CIP that addresses the strategies they will employ to correct the noncompliance as soon as possible, and in no case later than within one year of identification. Lead agency staff provides 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 have been required of LESs identified as being out of compliance with timely service delivery. One outcome of these activities has been the improvement of internal LES tracking systems and procedures to ensure that timely service delivery requirements are met and to promote sustained improvement over time.

4. Technical assistance has been provided to all LESs, with a special emphasis on those LESs demonstrating noncompliance with timely service delivery. Lead agency staff customizes 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 has been 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 linking the LES to available expertise from OSEP, national technical assistance partners, and other resources.

5. Improving state performance on Indicator 1 is a top state priority in Florida's use of American Reinvestment and Recovery Act (ARRA) funds. The NECTAC guidance documents titled *State Activities to Increase Staff Capacity* and *Innovative Programs to Address Personnel Vacancies in Healthcare and Education* were used as a basis for decision-making regarding awarding funds to LES projects that include incentives for retention of existing early intervention providers and recruitment of new early intervention providers.

6. The lead agency made recruitment of additional providers statewide a priority for use of ARRA funds. Full time Provider Recruiter positions for each LES will be hired for the period of the ARRA funding. These positions will support the LES in recruitment of additional providers to ensure timely service delivery. The first priority of the Provider Recruiters will be to complete a local needs assessment related to provider availability and service needs to identify specific gaps for targeted recruitment.

7. To enhance the capacity of early intervention personnel to more effectively utilize a 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 primary service provider approach. These projects, to be funded using ARRA funds, are expected to have a positive impact on Indicator 1 beginning in 2010-2011.

8. An analysis of disaggregated Indicator 1 data has been performed to identify progress and slippage by LES. In 2008-2009, nine LESs demonstrated improved performance on Indicator 1 compared to prior year performance, with three LESs improving by 20% or more. In addition, most LESs that scored 75% or less during the prior year demonstrated significant improvement in their 2008-2009 results. In spite of this improved performance by many LESs, four LESs slipped in their performance by 10% or more. Technical assistance activities will be focused on these lower performing LESs.

9. 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 the Barriers to Timely Service Delivery (For the 279 children represented in the 2008-2009 Actual Target Data for Indicator 1)		
	Number of Children	**% of Total Children**
A. Children with IFSPs who received the early intervention services on their IFSP in a timely manner	168	60%
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	33	12%
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)**	**201**	**72%**
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	50	18%
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)	24	9%
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	4	1%
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)**	**78**	**28%**
H. TOTAL (C + G = H)	**279**	**100%**

Based on this analysis, community provider availability continues to be the greatest barrier to timely service delivery.

10. To share effective practices and to ensure a common understanding of the requirements for timely service delivery, the lead agency used the technical assistance document posted on the Regional Resource Center website titled *Investigative Questions for Part C, Indicator 1.* The information in this document was the basis for preparation of a Timely Service Delivery resource kit provided to LES Directors. Using the Investigative Questions as a guide, the resource kit includes 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 kit includes a presentation template related to timely service delivery, specifying federal and state requirements for timely service delivery. The presentation template can be customized by each LES for presentation to community therapists and other early interventionists so that there is a common understanding of the requirements for timely service delivery. The resource tool kit was reviewed and discussed at a timely service delivery session at the August 2009, Early Steps Statewide meeting and therefore, is not expected to have an impact on performance on Indicator 1 until 2009-2010.

11. LESs are beginning to implement new processes and procedures in an effort 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 these materials and processes with their peers at annual meetings and during monthly LES Director and Service Coordination Workgroup calls.

12. A pilot project conducted in 2007-2008 provided valuable insight into how a primary service provider approach can benefit the child and family. One finding of the pilot project was that children who received the primary service provider approach to service delivery were more likely to receive services in a timely manner. Another finding was that providers are more likely to utilize the primary service provider approach if they are compensated for the time spent collaborating with other IFSP team members. The revised rate structure for Early Steps, implemented in July 2007, provides for payment to providers for this professional consultation. However, based on the findings of this pilot project, providers were not accessing this payment mechanism.

13. To ensure that early intervention providers are knowledgeable of the provisions of the revised rate structure and how to bill for the non-direct service time spent collaborating with other IFSP team members, guidance materials were developed and distributed to all LESs.

14. The process for service coordinator enrollment was revised in January 2009. The new process decreased administrative barriers to timely caseload assignment for newly hired Service Coordinators which positively impacted service coordination caseload. Service coordinator responsibilities include facilitating access to early intervention services in a timely manner.

15. The lead agency maintained frequent contact with the state Medicaid agency and its fiscal agent to solve Medicaid provider enrollment issues to reduce barriers to timely enrollment of new Medicaid providers, a prerequisite to Early Steps provider enrollment.

16. The lead agency delivered training to LES staff on the CMS Provider Management System in April 2009, to improve user competency, thus expediting the enrollment process. Enhancements to the CMS Provider Management System were implemented in August 2009 in order to automate the approval process, also expediting enrollment. These activities are not expected to have an impact on performance on Indicator 1 until 2009-2010.

17. The lead agency maintained a channel of communication with LESs and provided 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.

18. Public reporting of statewide and local performance related to Indicator 1 was accomplished in May 2009.

19. Due to vigilance by the lead agency, all 2007-2008 findings of noncompliance related to Indicator 1 have now been corrected. In addition, the remaining two findings of noncompliance identified in 2006-2007 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 2007 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2007 for this indicator: **70%**

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	**3**
2. Number of FFY 2007 findings the State verified as timely corrected (corrected within	**0**

one year from the date of notification to the LES of the finding)	
3. Number of FFY 2007 findings not verified as corrected within one year [(1) minus (2)]	**3**

Indicator 1: Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

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

Indicator 1: Correction of Remaining FFY 2006 Findings of Noncompliance:

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

Due to improved general supervision by the lead agency, both remaining findings of noncompliance related to timely service delivery identified in 2006-2007 have now been corrected. Both LESs were subject to increased reporting requirements with lead agency staff reviewing child record documentation to assess progress toward correction of the noncompliance. When the lead agency made determinations of LESs, one of these two LESs had demonstrated significant progress towards correction. In accordance with the lead agency's determinations criteria, this LES was designated as a "meets requirements" LES. The other LES was not demonstrating progress toward improved practices to support timely service delivery and therefore, this LES was required to do a root cause analysis using an outside facilitator. The LES was required to report the results of the root cause analysis to the lead agency, including planned strategies to correct noncompliant practices. The lead agency then held a conference call with the LES management team to discuss and provide input on the planned strategies. This LES was designated as a "needs intervention" LES under the lead agency's determinations process due to the uncorrected noncompliance and the lack of progress toward correction. As a part of the lead agency's sanctions process, the determination letter was sent to personnel senior to the LES Director.

Verification of Correction (either timely or subsequent):

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducts a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance is relative to the extent and root cause of the findings of noncompliance. Additionally, for each LES with findings of noncompliance, the lead agency verifies that the LES has

initiated services for each child, although late, unless the child is no longer within the jurisdiction of the LES. This verification is based on follow-up reporting by the LES on individual children whose services had not been initiated.

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

The following improvement activity is revised in the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 1, Improvement Activity 5	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 ~~2008~~ 2011	Lead Agency

The following improvement activity is added to the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 1, Improvement Activity 13	13. Implement a statewide contract using ARRA funds to provide Provider Recruiter positions for each LES. These positions will support the LES in recruitment of additional providers to ensure timely service delivery.	July 2010	Lead Agency, LESs

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	76%	75%	77%

RAW DATA CALCULATION - INDICATOR 2					
A	**B**	**C**	**D**	**E**	**F**
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	Infants and toddlers with IFSPs receiving service coordination only and/or developmental surveillance (subset of C)	Total infants and toddlers with IFSPs reported (A + B + C = E)	% Infants and toddlers with IFSPs receiving services in the home or community-based settings (A + B + D / E x 100 = F)
6,993	1,087	5,181	2,084	13,261	77%

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 17, 2008, as reported to WESTAT and OSEP on February 1, 2009. 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 2008 – 2009:

Florida made progress on Indicator 2 and exceeded the target. This improvement is the result of a revised payment rate structure for services, statewide training, and technical assistance designed to promote service delivery in the natural environment. 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.

Activities that have been completed to improve performance on Indicator 2 are:

1. A revised payment rate structure for services, developed in collaboration with a stakeholder workgroup to promote the provision of services in natural environments, was implemented in July 2007. This revised rate structure provides for enhanced payment of consultation services (collaboration among professionals) and provider travel to natural environments.

2. A pilot project conducted in 2007-2008 provided valuable insight into how a primary service provider approach can benefit the child and family. One finding of the pilot project was that children who received the primary service provider approach to service delivery were more likely to receive services in a timely manner. Another finding was that providers are more likely to utilize the primary service provider approach if they are compensated for the time spent collaborating with other IFSP team members. The revised rate structure for Early Steps, implemented in July 2007, provides for payment to providers for this professional consultation. However, based on the findings of this pilot project, providers were not accessing this payment mechanism.

3. To ensure that early intervention providers are knowledgeable of the provisions of the revised rate structure and how to bill for the non-direct service time spent collaborating with other IFSP team members, guidance materials were developed and distributed to all LESs.

4. Analysis of disaggregated Indicator 2 data was performed. In 2008-2009, nine LESs demonstrated improved performance on Indicator 2 compared to prior year performance. Of the six LESs that did not meet the statewide target, four made progress, one maintained, and one had slippage from the prior year. The lead agency continues to monitor performance trends and provides targeted technical assistance to low performers.

5. 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. This training is not anticipated to impact performance on Indicator 2 until 2009-2010.

6. A Training Tool CD, containing all of the presentations and handouts from the Service Coordinator statewide meeting (discussed in #6), was distributed to all LES Training Coordinators in May 2009. The purpose of the CD distribution to Training Coordinators was to provide all of the training materials from the meeting for local use. The increased knowledge and information gained by each LES attending this meeting is expected to have a positive impact on Indicator 2 performance beginning with 2009-2010.

7. The NECTAC guidance documents titled *State Activities to Increase Staff Capacity* and *Innovative Programs to Address Personnel Vacancies in Healthcare and Education* were used as a basis for decision-making regarding awarding American Reinvestment and Recovery Act (ARRA) funds to local Early Steps projects that included incentives for retention of existing early intervention providers and recruitment of new early intervention providers. All LESs not meeting the statewide target for Indicator 2 will be using ARRA funds for recruitment and retention of additional providers to serve in the natural environment.

8. The lead agency made recruitment of additional providers statewide a priority for use of ARRA funds. Full time Provider Recruiter positions for each LES will be hired for the period of the ARRA funding. These positions will support the LES in recruitment of additional providers for services in the natural environment. The first priority of the Provider Recruiters will be to complete a local needs assessment related to provider availability and service needs to identify specific gaps for targeted recruitment.

9. 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.

10. Public reporting of statewide and local performance related to Indicator 2 was accomplished in May 2009.

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

The following improvement activity is revised in the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 2, Improvement Activity 9	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 2011	Lead Agency, FICCIT, Early Steps Continuous Improvement Workgroup, local ES Programs

The following improvement activity is added to the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 2, Improvement Activity 11	11. Implement a statewide contract using ARRA funds to provide Provider Recruiter positions for each LES. These positions will support the LES in recruitment of additional providers for services in the natural environment.	July 2010	Lead Agency

INDICATOR 3: CHILD OUTCOMES

Per instructions from OSEP, this indicator is addressed in Florida's revised State Performance Plan

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 4A: Percent of families who report that early intervention services have helped the family know their rights	58%	65%	67%
Indicator 4B: Percent of families who report that early intervention services have helped the family effectively communicate their children's needs	55%	61%	64%
Indicator 4C: Percent of families who report that early intervention services have helped the family help their children develop and learn	60%	75%	78%

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)
1,275	858	67%

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)
1,275	816	64%

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)
1,275	994	78%

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 already working with the family assisted. The target audience for the 2008-2009 survey included all families whose children were enrolled in Early Steps and had an initial IFSP for at least six months. During a four-week timeframe, Service Coordinators and Family Resource Specialists were asked to make personal contact with all families meeting the survey criteria and offer the family an opportunity to complete the survey. 5,782 family surveys were distributed, with 1,275 valid surveys returned, resulting in a 22% response rate.

In the following charts, child demographics from Florida's 618 dataset are compared to the demographics of survey respondents. This comparison demonstrates that the survey respondents were representative of the families served by Early Steps.

	618 DATA 2008 - 2009		FAMILY SURVEY RESPONDENTS 2008 - 2009	
Sex	**Total Statewide 618**	**Percent 618 Statewide**	**Total Surveys Received**	**Percent Surveys Received**
Female	4,881	36.8 %	500	39.2%
Male	8,380	63.2 %	775	60.8%
Total	13,261	100%	1,275	100%

	618 DATA 2008 - 2009		FAMILY SURVEY RESPONDENTS 2008 - 2009	
Child's Race	**Total Statewide 618**	**Percentage 618 Statewide**	**Total Surveys Received**	**Percent Surveys Received**
Black	2,287	17.3%	201	15.8%
White	5,309	40.0%	571	44.8%
Hispanic	3,228	24.3 %	336	26.4%
Asian	193	1.5 %	23	1.8%
Native American	12	.1 %	1	.1%
Unknown	1,600	12.0 %	83	6.4%
Other	632	4.8 %	60	4.7%
	13,261	100%	1,275	100%

	618 DATA 2008 - 2009		FAMILY SURVEY RESPONDENTS 2008 - 2009	
Medicaid Enrollment	**Total Statewide**	**Percentage Statewide**	**Total Surveys Received**	**Percent Surveys Received**
Medicaid Enrolled	8,232	62.1%	759	59.5%
Not Medicaid Enrolled	5,029	37.9%	516	40.5%
Total	13,261	100%	1275	100%

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

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

Activities that have been completed to improve performance on Indicator 4 are:

1. Training and technical assistance were provided 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 relationship-based practices, the IFSP process, transition, and teaming.

2. All LES Service Coordinators 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. Improved tracking of orientation completion has been implemented to ensure conformity.

3. The lead agency provided 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.

4. Family Resource Specialists were provided ongoing technical assistance on how to effectively identify and assist families experiencing difficulties in understanding the Early Steps system and their rights.

5. Family Resource Specialists continue 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.

6. 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 Early Steps State Office. Topics of these publications included the role of families, advocacy, and the family survey process.

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.

8. Public reporting of statewide and local performance related to Indicator 4 was accomplished in May 2009.

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

No changes are being made to the Improvement Activities for Indicator 4 in the SPP.

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 5: Percent of infants and toddlers with IFSPs birth to 1	.70%	.58%	.59%

RAW DATA CALCULATION - INDICATOR 5 (includes comparison with national data)						
	2007 State Child Count			**2008 State Child Count**		
	A	**B**	**C**	**D**	**E**	**F**
	Number of children with IFSPs birth to 1	State population birth to 1	Percent of children with IFSPs birth to 1 (A / B x 100 = C)	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	1,375	238,748	0.58%	1,368	232,050	0.59%
National Average			1.06%			1.04%

The actual target data for Indicator 5 are part of the state's 618 Data, reported to WESTAT and OSEP on February 1, 2009. The reported data are based on enrolled children who had an IFSP on October 17, 2008. Florida served 1,368 infants and toddlers birth to age 1 with IFSPs out of a population of 232,050 children of the same age or .59% 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 2008 – 2009:

Florida improved in 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 that have been completed to improve performance on Indicator 5 are:

1. The lead agency completed a state-level analysis of the referral sources for children birth to age 1 referred in 2007-2008 and 2008-2009. The results of this analysis indicate an increase of infants referred from neonatal intensive care units. This is likely the result of a statewide initiative in 2007-2008 to provide awareness materials to all birthing facilities and hospitals in the state, including neonatal intensive care units. Disaggregated data have been analyzed, revealing that five of the 15 LESs showed a decline in referrals from neonatal intensive care units. These lower performing LESs continue to be monitored and technical assistance provided as needed. One of these LESs has been awarded an ARRA project focused on child find. Results of this project will be utilized for possible future replication.

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 is analyzing its public awareness activities to more effectively utilize the internet and other technology to expand public awareness efforts in a time of diminishing resources.

3. The lead agency continues to participate in statewide outreach events including conferences targeted to individuals likely to come into contact with infants and toddlers. This includes the Family Café conference, the Dependency Summit sponsored by the Florida Department of Children and Families, One Goal conference (a conference for early education and care providers and leaders), and the annual meeting of the Child Protection Teams. In addition, the lead agency participates in the annual Children's Week activities at the Florida Capitol.

4. The Florida Interagency Coordinating Council for Infants and Toddlers (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.

5. 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 2009 Governor's Task Force Report, which includes recommendations for early identification and referral of young children with disabilities.

6. To improve performance on Indicator 5, the lead agency plans to utilize ARRA funds to supplement existing public awareness activities by implementing a marketing campaign to pediatricians and other health care providers. This will 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.

7. In consultation with stakeholders and following the required public participation period, the lead agency has 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 will result in a broader outreach to children birth to age 1 who are likely to be eligible for services. This revised policy is expected to be implemented July 2010, and therefore is expected to have a positive impact on Indicator 5 performance in 2010-2011.

8. 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 convene state stakeholders for 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 is actively involved in Florida's Act Early state team to finalize and implement an action plan for Florida's Act Early campaign. This is expected to have a positive impact on performance in 2010-2011.

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

The following improvement activities are added to the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 5, Improvement Activity 9	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	Lead Agency, Stakeholders
Indicator 5, Improvement Activity 10	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 for Children and Youth.	October 2009 and ongoing	Lead Agency, Stakeholders
Indicator 5, Improvement Activity 11	11. Supplement existing public awareness activities by implementing a marketing campaign to pediatricians and other health care providers using ARRA funds.	July 2010	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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 6: Percent of infants and toddlers with IFSPs birth to age 3	1.88%	1.66%	1.91%

RAW DATA CALCULATION - INDICATOR 6 (includes comparison with national data)						
	2007 State Child Count			**2008 State Child Count**		
	A	**B**	**C**	**D**	**E**	**F**
	Number of children with IFSPs birth to 3	State population birth to 3	Percent of children with IFSPs birth to 3 (A / B x 100 = C)	Number of children with IFSPs birth to 3	State population birth to 3	Percent of children with IFSPs birth to 3 (D / E x 100 = F)
Florida	11,691	705,223	1.66%	13,261	693,781	1.91%
National Average			2.52%			2.66%

The actual target data for Indicator 6 are part of the state's 618 Data, reported to WESTAT and OSEP on February 1, 2009. The reported data are based on enrolled children who had an IFSP on October 17, 2008. Florida served 13,261 infants and toddlers birth to age 3 with IFSPs out of a population of 693,781 children of the same age or 1.91% 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 2008 – 2009:

Florida improved performance on Indicator 6 and exceeded the target. The actual target data for 2008-2009 reflect an improvement of .25%.

Activities that have been completed to improve performance on Indicator 6 are:

1. The lead agency completed a state-level analysis of referrals received in 2007-2008 and 2008-2009. The results of this analysis indicate there has been an increase in the number of children referred from child welfare professionals and, as referenced in Indicator 5, neonatal intensive care units. The increase is likely the result of the lead agency's participation in initiatives to implement the Child Abuse Prevention and Treatment Act (CAPTA) and a statewide initiative in 2007-2008 to provide awareness materials to all birthing facilities and hospitals in the state, including neonatal intensive care units. 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 has established greater linkages with Florida's child abuse prevention and treatment professionals, which has 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 is analyzing its public awareness activities to more effectively utilize technology to expand public awareness efforts in a time of diminishing resources.

3. The lead agency continues to participate in statewide outreach events including conferences targeted to individuals likely to come into contact with infants and toddlers. This includes the Family Café conference, the Dependency Summit sponsored by the Florida Department of Children and Families, One Goal conference (a conference for early education and care providers and leaders), and the annual meeting of the Child Protection Teams. In addition, the lead agency participates in the annual Children's Week activities at the Florida Capitol.

4. The Florida Interagency Coordinating Council for Infants and Toddlers (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.

5. 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 2009 Governor's Task Force Report, which includes recommendations for early identification and referral of young children with disabilities.

6. To improve performance on Indicator 6, the lead agency plans to utilize ARRA funds to develop and implement a marketing campaign to pediatricians and other health care providers. This will 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.

7. 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.

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

The following improvement activities are added to the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 6, Improvement Activity 12	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	Lead Agency, Stakeholders
Indicator 6, Improvement Activity 13	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 for Children and Youth.	October 2009 and ongoing	Lead Agency, Stakeholders
Indicator 6, Improvement Activity 14	14. Supplement existing public awareness activities by implementing a marketing campaign to pediatricians and other health care providers using ARRA funds.	July 2010	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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
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%	80%	91%

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)
285	210	48	91%	27

The actual target data are derived from QA monitoring results. Data for the actual target data represent review 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 the actual target data.

QA monitoring includes a review of child record documentation to verify that there is appropriate documentation in the child's record to justify any delay in meeting the 45-day timeline due to exceptional family circumstances. This documentation is then compared to information in the Early Steps Data System to ensure that the appropriate barrier code was entered. Following the monitoring, every instance of inconsistent data entry is corrected.

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

Florida made progress on Indicator 7. A key factor influencing improvement on Indicator 7 has been the lead agency's ongoing focus on the 45-day timeline. Providing technical assistance in the form of policy clarification, training, and consultation to LESs; requiring the 45-day timeline to be addressed in Continuous Improvement Plans (CIP); requiring focused monitoring and increased reporting by LESs to demonstrate correction of noncompliant practices; and, implementing enforcement actions have contributed to the state's improved performance.

Activities that have been completed to improve performance on Indicator 7 are:

1. LESs with noncompliance in timely completion of the evaluation and assessment and initial IFSP are required to develop a CIP that addresses the strategies they will employ to correct the noncompliance as soon as possible, and in no case later than within one year of identification. Lead agency staff provides 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 have been required of LESs identified as being out of compliance with the 45-day timeline. One outcome of these activities has been improvement of internal LES tracking systems and procedures to ensure that requirements are met and to promote sustained improvement over time.

2. Technical assistance has been provided to all LESs, with a special emphasis on those LESs demonstrating noncompliance with the 45-day timeline. Lead agency staff customizes 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 has been 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 linking the LES to available expertise from OSEP, national technical assistance partners, and other resources.

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. The lead agency also provides quarterly reports to LESs for this purpose. The addition of barrier codes to the Early Steps Data System has provided identification, statewide and by LES, of specific issues that negatively affect timely completion of the initial IFSP. As a result, LESs are better able to identify and analyze barriers to completing IFSPs within the 45-day timeline.

4. An analysis was conducted of disaggregated data from QA monitoring results on meeting the 45-day timeline. Fourteen of 15 LESs maintained or improved performance on meeting the 45-day timeline. The sole LES with decreased performance was the result of one child's IFSP delay of one

day beyond the 45-day timeline for reasons other than documented exceptional family circumstances. Five LESs performed at 100% on the 45-day timeline.

5. 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 the Barriers to Timely Completion of the Evaluation and Assessment and Initial IFSP for the 285 Children in the Actual Target Data		
	Number of children	**% Total children in actual target data**
A. Evaluation and assessment and initial IFSP were completed within the 45-day timeline	210	74%
B. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline for documented exceptional family circumstances	48	17%
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)	**258**	**91%**
D. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline due to provider availability issues	3	1%
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)	24	8%
F. Evaluation and assessment and initial IFSP were not completed within the 45-day timeline due to delays in insurance authorization	0	0%
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)	**27**	**9%**
H. TOTAL (C + G = H)	**285**	**100%**

Twelve LESs demonstrated a decrease in the number of delays due to LES capacity issues. Six had no capacity issues, while four had only one instance in which the delay was due to capacity issues. There were only three instances in two LESs in which provider availability was an issue. One LES accounted for 30% of the children whose evaluation and assessment and IFSP were not completed within the 45-day timeframe for reasons other than documented exceptional family circumstances. Compared to performance of the prior year, there is evidence of improved service coordination and internal tracking.

6. The process for Service Coordinator enrollment was revised in January 2009. The new process decreased administrative barriers to timely caseload assignment for newly hired Service Coordinators which positively impacted service coordination caseload. Service Coordinator responsibilities include initiating contact with families to gather information about the family's concerns, priorities, and resources, as well as scheduling the initial IFSP.

7. To ensure implementation of Florida's system of child outcomes measurement, six Battelle Developmental Inventory-2 (BDI-2) training sessions were held in addition to three train-the-trainer workshops. A result of these training activities is an increase in the number of personnel qualified to administer the BDI-2, thereby increasing LES capacity to meet the 45-day timeline.

8. Monthly Service Coordination Workgroup calls provide opportunities for training and technical assistance on a regular basis. "Monitoring Compliance within 45 Days" was an agenda item on the December 2008 call and participants shared their strategies for success, including internal monitoring and tracking systems.

9. 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.

10. Public reporting of statewide and local performance related to Indicator 7 was accomplished in May 2009.

11. Due to vigilance by the lead agency, all 2007-2008 findings of noncompliance related to Indicator 7 have now been corrected.

Indicator 7: Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2007 for this indicator: **80%**

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

Indicator 7: Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

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

Verification of Correction (either timely or subsequent):

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducts a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance is relative to the extent and root cause of the findings of noncompliance. Additionally, for each LES with findings of noncompliance, the lead agency verifies that the LES has conducted the evaluation and assessment and initial IFSP, although late, unless the child is no longer

within the jurisdiction of the LES. This verification is based on follow-up reporting by the LES on individual children whose evaluation and assessment and initial IFSP had not been conducted.

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

No changes are being made to the Improvement Activities for Indicator 7 in the SPP.

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 2008 - 2009	**Actual Target Data 2007 – 2008**	**Actual Target Data 2008 - 2009**
Indicator 8A: IFSPs with transition steps and services	100%	79%	92%
Indicator 8B: Notification to the LEA if the child is potentially eligible	100%	86%	95%
Indicator 8C: Timely transition conference	100%	80%	80%

RAW DATA CALCULATION - INDICATOR 8A			
A	**B**	**C**	**D**
Total child records reviewed (represents children from all 15 LESs)	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)
243	224	19	92%

RAW DATA CALCULATION - INDICATOR 8B			
A	**B**	**C**	**D**
Total child records reviewed (represents children from all 15 LESs)	Children with notification to the LEA	Children for whom the LEA was not notified	% Children with notification to the LEA (B/A x 100 = D)
285	270	15	95%

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 x 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)
285	7	278	170	52	80%	56

The actual target data are derived from QA monitoring results. Data for the actual target data represent review of randomly selected children in all 15 LESs. 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. Children for whom the family did not provide approval to conduct the transition conference are excluded from the numerator and denominator of Indicator 8C.

QA monitoring includes a review of child record documentation to verify that there is 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. This documentation is then compared to information in the Early Steps Data System to ensure that the appropriate barrier code was entered. Following the monitoring, every instance of inconsistent data entry is corrected.

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

Florida made progress on Indicators 8A (IFSPs with transition steps and services) and 8B (notification to the LEA). Performance on Indicator 8C (timely transition conference) was maintained. A key factor influencing improvement on Indicator 8 has been the lead agency's ongoing focus on timely transition planning. Providing technical assistance in the form of policy clarification, training, and consultation to LESs; requiring transition to be addressed in Continuous Improvement Plans; requiring focused monitoring and increased reporting by LESs to demonstrate correction of noncompliant practices; and, implementing enforcement actions have contributed to the state's improved performance.

Activities that have been completed to improve performance on Indicator 8 are:

1. The lead agency participated in the National Early Childhood Transition Initiative, a collaborative technical assistance effort of OSEP, the Regional Resource Center Program, NECTAC, the National Early Childhood Transition Center, and the Data Accountability Center. In consultation with SERRC, NECTAC, and Florida's Technical Assistance and Training System (TATS), a pilot project was implemented to improve performance on Part C Indicators 8A, 8B, and 8C and Part B Indicator 12. Through this project, three LESs and five of their corresponding LEAs were provided a framework for self-assessment of transition practices. Following the self-assessment, participating LESs and LEAs collaboratively developed action plans that included strategies for improvement. A Part C to Part B transition tracking form to improve transition processes was developed as a result of this activity. All three LESs participating in the pilot made progress on Indicator 8.

2. The lead agency and DOE completed a plan to meet requirements for reporting progress of Part C and Part B child outcomes as measured in Part C Indicator 3 and Part B Indicator 7. Transition performance from Part C to Part B was positively impacted as a result of the collaboration and communication between LESs and LEAs in this activity. The six LESs participating as early adopters of the child outcomes measurement system made progress or maintained high performance on Indicator 8C. It is anticipated that the subsequently phased in LESs will demonstrate progress in 2009-2010.

3. The lead agency and DOE held five joint regional meetings pertaining to transition and child outcomes for LESs and LEAs in April 2009. These meetings provided training on 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. It is anticipated that these activities will have a positive impact on performance in 2009-2010.

4. Florida's Transition Project continues to provide technical assistance to support the transition of children from Part C to Part B. To promote effective interagency agreements, this project developed a checklist for annual monitoring and evaluation of completed interagency agreements. The checklist is employed as a basis for assessing progress on transition issues as written in the interagency agreements. All 15 LESs now have transition interagency agreements in place with their corresponding LEAs.

5. Each of the improvement activities listed above was accomplished collaboratively with staff from the lead agency, staff from DOE, and stakeholders at the local level. This collaboration resulted in increased ongoing communication between all parties, better understanding of roles and responsibilities, and more effective problem solving at the system and individual child level.

6. LESs with noncompliance in transition requirements are required to develop a CIP that addresses the strategies they will employ to correct the noncompliance as soon as possible, and in no case later than within one year of identification. Lead agency staff provides 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 have been required of LESs identified as being out of compliance with transition requirements. One outcome of these activities has been the improvement of internal LES tracking systems and procedures to ensure that transition requirements are met and to promote sustained improvement over time.

7. Technical assistance has been provided to all LESs, with a special emphasis on those LESs demonstrating noncompliance with transition requirements. Lead agency staff customizes 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 has been 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 linking the LES to available expertise from OSEP, national technical assistance partners, and other resources.

8. The lead agency provided onsite monitoring to three LESs in August and September 2008. This onsite monitoring included discussions and review of procedures for transition planning. Subsequent to this onsite monitoring and technical assistance, all three LESs demonstrated improved performance on Indicator 8.

9. Enhancements made to the Early Steps Data System in November 2008 provide 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. LES Service Coordinators and supervisors reported to the lead agency that these enhancements to the Early Steps Data System enable them to track information that, in the past, could only be found by reviewing individual child records.

10. Family Resource Specialists continue to provide the transition module of the family training curriculum, *A New Star: A Family's Guide to Navigating Early Steps,* to families of children approaching the age of three. 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. Family Resource Specialists also presented the transition module during the annual 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.

11. Technical assistance and training related to transition was provided to Service Coordinators through monthly Service Coordination Workgroup calls. Service Coordinators received an introduction to new fields in the Early Steps Data System for tracking transition timelines, shared implementation procedures for notification, and discussed effective practices through these workgroup calls.

12. The lead agency held a statewide meeting for Service Coordinators in May 2009 that included presentations pertaining to transition. Topics in this training 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, and closure to Early Steps. Data entry and completion of Form I

(Transition Plan) of the IFSP were covered in each of the above areas of presentations and discussions.

13. A Training Tool CD, containing all of the presentations and handouts from the Service Coordinator statewide meeting (discussed in #12), was distributed to all LES Training Coordinators in May 2009. The purpose of the CD distribution to Training Coordinators was to provide all of the training materials from the meeting for local use. The increased knowledge and information gained by each LES attending this meeting is expected to have a positive impact on Indicator 8 performance beginning with 2009-2010.

14. 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.

15. Public reporting of statewide and local performance related to Indicator 8 was accomplished in May 2009.

16. Due to vigilance by the lead agency, all 2007-2008 findings of noncompliance related to Indicator 8 have been corrected.

Indicator 8A: Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2007 for this indicator: **79%**

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	**6**
2. Number of FFY 2007 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	**4**
3. Number of FFY 2007 findings not verified as corrected within one year [(1) minus (2)]	**2**

Indicator 8A: Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	**2**
5. Number of FFY 2007 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**2**
6. Number of FFY 2007 findings not verified as corrected [(4) minus (5)]	**0**

Indicator 8B: Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2007 for this indicator: **86%**

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	**8**
2. Number of FFY 2007 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	**4**
3. Number of FFY 2007 findings not verified as corrected within one year [(1) minus (2)]	**4**

Indicator 8B: Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

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

Indicator 8C: Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2007 for this indicator: **80%**

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007, through June 30, 2008)	**9**
2. Number of FFY 2007 findings the State verified as timely corrected (corrected within one year from the date of notification to the LES of the finding)	**6**
3. Number of FFY 2007 findings not verified as corrected within one year [(1) minus (2)]	**3**

Indicator 8C: Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

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

Verification of Correction (either timely or subsequent):

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducts a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance is relative to the extent and root cause of the findings of noncompliance. Additionally, for each LES with a finding of noncompliance related to the timeline requirement of

conducting a transition conference, the lead agency verifies that the LES has conducted the transition conference, although late, unless the child is no longer within the jurisdiction of the LES. For each LES with a finding of noncompliance concerning a child-specific transition requirement that is not a timeline requirement, the lead agency verifies that the LES has implemented the required action, unless the child is no longer within the jurisdiction of the LES. These verification activities are based on follow-up reporting by the LES on individual children for whom transition planning activities had not been conducted.

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

No changes are being made to the Improvement Activities for Indicator 8 in the SPP.

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
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%	73%	61%

RAW DATA CALCULATION - INDICATOR 9					
	A	**B**	**C**	**D**	**E**
	Total findings of noncompliance 2007 - 2008	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 as of January 29, 2010 ((B+D) / A x 100 = E)
NONCOMPLIANCE IDENTIFIED IN 2007 - 2008	66	40	61%	26	100%

The actual target data reflect noncompliance identified through QA monitoring and complaints from July 1, 2007 through June 30, 2008. Identification of noncompliance occurs when 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 through 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. The Indicator 9 Worksheet provided as an attachment to this APR includes detailed information regarding noncompliance identified in the timeframe of July 1, 2007 through June 30, 2008.

There were a total of 66 findings of noncompliance identified in the timeframe of July 1, 2007 through June 30, 2008. Forty of these findings (61%) were corrected within one year of identification. Subsequent correction has been demonstrated and verified by the lead agency for the remaining 26 findings of noncompliance identified in 2007-2008. Therefore, 100% of the findings of noncompliance identified in 2007-2008 have now been corrected and correction has been verified by the lead agency.

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

Florida slipped in its performance on Indicator 9. The primary factor impacting this slippage was the lead agency placing priority on correction of noncompliance from prior years. Therefore, available resources were utilized to intervene with LESs to correct findings of noncompliance that had been identified in 2005-2006 and 2006-2007 and were still uncorrected. Due to this prioritization, the lead agency did not consistently intervene with LESs to ensure correction of all 2007-2008 findings of noncompliance until the one-year timeframe for correction had passed.

As a result of the lead agency's placing priority on correction of noncompliance from prior years, the backlog of noncompliance from prior years has now been corrected.

Activities that have been completed to improve performance on Indicator 9 are:

1. The lead agency implemented revised practices to actively and systematically intervene with LESs prior to the one-year time frame for correction of noncompliance. These revised practices were implemented in January 2008 and, as a result, preliminary data for noncompliance identified in 2008-2009 show improved performance on Indicator 9. As of January 29, 2010, the status of noncompliance identified in 2008-2009 is as follows.

Preliminary Data on Correction of Noncompliance Identified in 2008 - 2009 (to be reported in FFY 2009 APR)					
	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 as January 29, 2010 ((B + D) / A x 100 = E)
NONCOMPLIANCE IDENTIFIED IN 2008 - 2009	108	93	86%	5	91%

2. LESs with identified noncompliance are required to develop a Continuous Improvement Plan (CIP) that includes strategies that will be implemented to ensure noncompliant practices are corrected as soon as possible, but no later than within one year of identification. Lead agency staff provides 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. The LES prepares the CIP, which includes activities and timelines to ensure correction of the noncompliant practice as soon as possible, but no later than within one year of identification. LESs with a "meets requirements" determination are required to submit CIP updates every six months, while other LESs are required to submit quarterly updates to the CIP. All CIP updates must include the status of each of the planned activities. Requirements for CIP development and submission of updates are included in contracts with each LES. With realignment of staff functions, mentoring is being provided to increase consistency across lead agency staff and to more effectively intervene with lower performing LESs.

3. If an LES has not demonstrated correction of noncompliance within 9 months from the date of identification of noncompliance, lead agency staff conducts focused monitoring. Focused monitoring provides a format for demonstrating correction and informal root cause analysis of internal processes. Lead agency staff provides feedback on focused monitoring results to promote effective practices and improved performance.

4. Technical assistance has been provided to all LESs, with a special emphasis on those LESs with identified noncompliance. Lead agency staff customizes 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 has been 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 available expertise from OSEP, national technical assistance partners, and other resources.

5. In December 2008, a new system was implemented for tracking of corrective action assignments to LESs, including receipt of completed assignments by the lead agency, results of lead agency verification review, and next steps. This tracking system has been a factor in improved performance on Indicator 9, which will be reported in the FFY 2009 APR.

6. In September 2009, the lead agency assigned an additional staff person to support the lead agency's efforts to work more intensely with LESs to facilitate correction of noncompliance.

7. The lead agency maintains 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, dissemination of an electronic weekly memo, and other technical assistance activities.

8. Complaints and due process proceedings are a means through which noncompliance is identified. In the current reporting period for Indicator 9 (noncompliance identified in 2007-2008), there were six findings of noncompliance as a result of complaints. Three of these findings were not corrected within one year of identification. To ensure that noncompliance identified as a result of a complaint is corrected as soon as possible, but no later than within one year of identification, revisions have been made to internal procedures for complaint follow-up.

9. Statewide recognition was provided to those LESs demonstrating highest overall scores on QA monitoring. Recognition was also provided to those LESs demonstrating greatest improvement in performance. This recognition, however, is based on an overall score as a result of QA monitoring. Therefore, an LES may receive recognition for a very high overall score on QA monitoring, while the LES has noncompliance remaining uncorrected one year after identification. This is an area that

needs further assessment by the lead agency to ensure that all practices of sanctions and incentives, including recognition, support the requirement to correct noncompliance within one year of identification.

10. As a part of the lead agency system of sanctions, determinations are made of each LES in accordance with the requirements of the 2004 reauthorization of IDEA. Determinations of LESs were made and announced in May 2009. 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. However, the determination criteria currently utilized does not fully account for the timeliness of noncompliance correction. In accordance with the state's determinations criteria, if the LES corrects all identified noncompliance prior to the date specified by the lead agency as a cut-off for determinations (driven by the APR due date), the determination for the LES is "meets requirements", even if noncompliance was corrected beyond the one-year timeframe. The criterion for determinations was developed in collaboration with a stakeholder workgroup in 2006. Since that time, the lead agency has matured in its understanding of noncompliance correction and now recognizes that all sanctions and incentives must be aligned with the requirement to correct all noncompliance as soon as possible, but no later than within one year of identification.

11. In its letter of June 1, 2009, OSEP advised the lead agency of technical assistance sources related to Indicator 9 and required the lead agency to report on the technical assistance sources utilized and the actions the lead agency has taken as a result of the technical assistance. These technical assistance sources which have been utilized and their results are described in Activities 12, 13, and 14.

12. Lead agency staff participated in the OSEP 2009 *Overlapping IDEA Part B and Part C Data* conference in June 2009. Sessions on "Charting the Course: Smoother Data Sharing for Effective Early Childhood Transition," "Part C-Timely Correction: Definition, Documentation, and Impact on State Determinations," and "Methods to Verify and Validate Monitoring Data" all have informed changes made to the state's general supervision practices for monitoring, identification of noncompliance, and ensuring timely correction of noncompliance.

13. To further refine Florida's system for correction of noncompliance, the lead agency utilized guidance provided by OSEP on the June 2009, Monitoring and State Improvement Planning Conference Call, *Updates on SPP/APR Issues*, the October 2008, *OSEP Timely Correction Memo,* and the September 2008 document, *Frequently Asked Questions Regarding Identification and Correction of Noncompliance*. As a result, a hierarchical approach to correction of noncompliance has been implemented, depending on whether the identified noncompliance was extensive or found in only a small number of child records.

14. The lead agency consulted with NECTAC representatives to gather information from selected states related to processes to identify noncompliance and to ensure correction within one year. Six states were selected based on the NECTAC representatives' knowledge of specific states with effective systems of general supervision. Based on information gained during this process, the lead agency analyzed its practices of noncompliance identification and correction. As a result, the lead agency has modified its activities to ensure correction of individual and systemic noncompliance. Changes to the state's practices in the timeline cycle of activities designed to ensure timely correction of noncompliance have also been amended to begin earlier.

Indicator 9: Correction of FFY 2007 Findings of Noncompliance Timely Corrected (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007 through June 30, 2008) (Sum of Column a on the Indicator C 9 Worksheet)	**66**
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)	**40**
3. Number of findings not verified as corrected within one year [(1) minus (2)]	**26**

Indicator 9: Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	**26**
5. Number of findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**26**
6. Number of findings not yet verified as corrected [(4) minus (5)]	**0**

Indicator 9: Correction of Remaining FFY 2006 Findings of Noncompliance:

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

Due to improved general supervision by the lead agency, both remaining findings of noncompliance identified in 2006-2007 have now been corrected. These findings of noncompliance were related to timely service delivery. Both LESs were subject to increased reporting requirements with lead agency staff reviewing child record documentation to assess progress toward correction of the noncompliance. When the lead agency made determinations of LESs, one of these two LESs had demonstrated significant progress towards correction. In accordance with the lead agency's determinations criteria, this LES was designated as a "meets requirements" LES. The other LES was not demonstrating progress toward improved practices to support timely service delivery and was required to perform a root cause analysis using an outside facilitator. The LES was required to report the results of the root cause analysis to the lead agency, including planned strategies to correct noncompliant practices. The lead agency then held a conference call with the LES management team to discuss and provide input on the planned strategies. This LES was designated as a "needs intervention" LES under the lead agency's determinations process due to the uncorrected noncompliance and the lack of progress toward correction. As a part of our sanctions process, the determination letter was sent to personnel senior to the LES Director.

Verification of Correction (either timely or subsequent):

In order to ensure that noncompliant practices have been revised and the LES is correctly implementing the regulatory requirements, the lead agency conducts a review of child records for each LES with findings of noncompliance. The number of child records reviewed to verify correction of the noncompliance is relative to the extent and root cause of the findings of noncompliance. The lead agency ensures correction of all instances of identified noncompliance. For noncompliance concerning a child-specific requirement that is not a timeline requirement, the lead agency verifies that the LES has corrected each individual instance of noncompliance, unless the child is no longer within the jurisdiction of the LES. For noncompliance related to a timeline requirement, the lead agency requires follow-up reporting to ensure that the required action is completed for each identified child, although late, unless the child is no longer within the jurisdiction of the LES.

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

The following improvement activity is added to the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 9, Improvement Activity 10	10. Utilizing stakeholder input, revise determinations criteria and incentives to reinforce the requirement to correct noncompliance as soon as possible, but no later than within one year of identification.	July 2010	Lead Agency, Continuous Improvement Workgroup

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
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 Table 4 of Florida's 618 data on November 1, 2009.

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

Florida sustained performance and met the target for Indicator 10. During 2008-2009, six written signed complaints were received. Reports were issued within the 60-day timeline for five of the complaints. One complaint was withdrawn by the complainant within the 60-day timeline. In this case, the complainant chose to pursue informal resolution of the issues.

In the FFY 2007 APR, the lead agency reported four findings of noncompliance identified as a result of complaints in 2007-2008 and that these four findings would be reported in the Indicator 9 Worksheet in FFY 2008 APR. The lead agency has utilized the document *Frequently Asked Questions Regarding Identification and Correction of Noncompliance* (September, 2008) to gain further understanding of the requirement to separately report noncompliance identified as a result of a complaint and noncompliance identified as a result of monitoring activities. Based on this guidance, there were actually six (not four) findings of noncompliance identified as a result of complaints in 2007-2008 and these six findings are reported in the Indicator 9 Worksheet submitted as an attachment to the FFY 2008 APR.

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 their initial orientation to Early Steps by their Service Coordinators, at IFSP updates, and when they express dissatisfaction or a concern. The family training curriculum, *A New Star: A Family's Guide to Navigating Early Steps,* includes a module on resolution of disputes.

Activities that have been completed to sustain performance on Indicator 10 are:

1. Informal grievances, consisting of phone calls, emails, and letters are tracked and disaggregated by LES and area of concern. This information is compiled along with the issues of the signed written complaints (even those withdrawn due to local resolution) and analyzed for noncompliant practices, issues and trends statewide, and by LES. The results of this analysis have prompted further inquiry and analysis by the lead agency, provision of technical assistance, and clarification of policy.

2. To ensure that noncompliance identified as a result of a complaint is corrected as soon as possible, but no later than within one year of identification, revisions have been made to internal procedures for complaint follow-up. These revised procedures specify lead agency staff roles, responsibilities, and timelines related to follow-up of corrective actions required as a result of a complaint investigation, correction of any identified noncompliance, verification of correction, and completion of the complaint closure letter.

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

No changes are being made to the Improvement Activities for Indicator 10 in the SPP.

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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline	100%	0%	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, 2009.

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

During 2008-2009, there were no requests for a due process hearing.

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 their initial orientation to Early Steps by their Service Coordinator, at IFSP updates and when they express dissatisfaction or a concern. The family training curriculum, *A New Star: A Family's Guide to Navigating Early Steps,* includes a module on resolution of disputes.

Tracking and internal accountability will be ongoing to ensure that any due process hearing requests received are handled within applicable timelines.

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

No changes are being made to the Improvement Activities for Indicator 11 in the SPP.

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 MEDIATON 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 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 13: Percent of mediations that resulted in mediation agreements	N/A	0%	50%

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, 2009.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008-2009:
Florida made progress on Indicator 13. Florida received three requests for mediation during 2008-2009. None of these mediation requests were related to due process. Mediation sessions were held for two of these requests no later than 18 days from the date the lead agency received the request for mediation. One mediation session resulted in a mediation agreement. The third request was withdrawn by the parent 13 days after the lead agency received the request.

An activity that has been completed to improve performance on Indicator 13 is:

1. Tracking and internal accountability has been ongoing to ensure that mediation sessions are held within applicable timelines.

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

No changes are being made to Improvement Activities for Indicator 13 in the SPP.

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)

Measurement:
State reported data, including 618 data, State performance plan, and annual performance reports, are:
a. Submitted on or before due dates (February 1 for child count and settings and November 1 for exiting and dispute resolution); and
b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the "Indicator 14 Data Rubric" for reporting data for this indicator (see Attachment B).

REPORT OF PROGRESS - INDICATOR 14			
	Measurable and Rigorous Target 2008 - 2009	**Actual Target Data 2007 - 2008**	**Actual Target Data 2008 - 2009**
Indicator 14: State reported data are timely and accurate	100%	100%	96.3%

The actual target data are derived from the SPP/APR package Indicator 14 data rubric, which is 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	N/A	N/A	0
13	1	1	2
		Subtotal	28
APR Score Calculation	**Timely Submission Points** - If the FFY 2008 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total - (Sum of subtotal and Timely Submission Points) =		33

Indicator 14 - 618 Data					
Table	**Timely**	**Complete Data**	**Passed Edit Check**	**Responded to Data Note Requests**	**Total**
Table 1 – Child Count Due Date: 2/1/09	1	1	1	1	4
Table 2 – Program Settings Due Date: 2/1/09	1	1	0	1	3
Table 3 – Exiting Due Date: 11/1/09	1	1	1	N/A	3
Table 4 – Dispute Resolution Due Date: 11/1/09	1	1	1	N/A	3
				Subtotal	13
618 Score Calculation		**Grand Total** (Subtotal x 2.5)=			32.5

Indicator #14 Calculation	
A. APR Grand Total	33.00
B. 618 Grand Total	32.50
C. APR Grand Total (A) + 618 Grand Total (B) =	65.50
Total NA in APR	2.00
Total NA in 618	2.00
Base	**68.00**
D. Subtotal (C divided by Base)=	0.963
E. Indicator Score (Subtotal D x 100) =	96.3

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

Florida slipped in its performance on Indicator 14. This slippage was due to a small discrepancy in the race/ethnicity count of settings data. The lead agency apportions children with unknown race/ethnicity into the five race/ethnicity categories. This procedure resulted in a rounding error that created a discrepancy for the race/ethnicity reporting of one child between the Table 1 and Table 2 submissions. This discrepancy was identified by WESTAT staff during the edit check and a revised Table 2 was promptly submitted to correct the error.

Activities that have been completed to improve performance on Indicator 14 are:

1. A verification process has been implemented to ensure valid and accurate data prior to reporting of 618 data. Missing data are 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 performs a subsequent review to ensure the LESs have followed up on entering the missing data.

2. Changes made to the Early Steps Data System in November 2008 provide 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. LES Service Coordinators and supervisors have reported to the lead agency that these changes to the Early Steps Data System have enabled them to track information that, in the past, could only be found by reviewing individual child records.

3. 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 enabling more streamlined entry of referrals.

4. Quarterly data fix reports are provided to each LES to ensure accuracy of data. These reports target missing, incorrect, and/or inaccurate data, thus providing information for the LES to correct data and provide ongoing reinforcement for accurate data collection methods.

5. A performance matrix report is 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 has led to the identification of data anomalies and prompted correction of inaccurate data.

6. QA monitoring continues to assess accurate data entry, requiring reviewers to compare information in child records with information recorded in the Early Steps Data System. This information is subsequently verified by the lead agency.

7. A Data Users Workgroup, composed of representatives of the lead agency and LESs, continues to meet quarterly via conference call to provide a forum for discussion and decision-making regarding improvements to the Early Steps Data System.

8. State-specific technical assistance has been pursued by the lead agency from the Data Accountability Center/WESTAT, OSEP, NECTAC, and SERRC, through conference calls, email, and face-to-face meetings. This technical assistance has resulted in improved processes for the SPP/APR and 618 data collection and the accurate completion of the Indicator 14 rubric.

9. Lead agency staff participated in the OSEP 2009 *Overlapping IDEA Part B and Part C Data* conference in June 2009. Sessions on “Charting the Course: Smoother Data Sharing for Effective Early Childhood Transition,” “Part C-Timely Correction: Definition, Documentation, and Impact on

State Determinations," and "Methods to Verify and Validate Monitoring Data" were attended. Lead agency staff also attended the OSEP National Early Childhood Conference in December 2008, attending a workshop "Using Valid and Reliable Data to Identify and Correct Noncompliance." Participation in these conferences has informed changes made to the state's general supervision practices for monitoring, identification of noncompliance, and ensuring timely correction of noncompliance.

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 2008 – 2009:

The following Improvement Activities are added to the Florida SPP:

SPP Improvement Activity	Activities	Timelines	Resources
Indicator 14, Improvement Activity 7	7. The lead agency will provide training to LESs on the Early Steps Data System ad hoc reporting capabilities.	July 2011	Lead Agency
Indicator 14, Improvement Activity 8	8. 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 enabling easier entry of referrals.	July 2011	Lead Agency