



OHIO DEPARTMENT OF HEALTH

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John R. Kasich / Governor

Theodore E. Wymyslo, M.D. / Director of Health

April 15, 2011

Office of Special Education Programs
U.S. Department of Education
Office of Special Education Programs

Attention: Melody Musgrave, Director
OSERS.capr@ed.gov

Dear Dr. Melody Musgrove:

Attached is Ohio's Revised Annual Performance Report and updated State Performance Plan, including the Interagency Coordinating Council (ICC) Certification form signed by the co-chairs of the Council as required for the Annual Performance Report (APR). The report covers the period July 1, 2009 to June 30, 2010.

OSEP provided Ohio with the opportunity to revise the APR/SPP submitted on February 1, 2011. We have taken that opportunity to clarify information previously submitted for Indicators 1, 5, 8C, 9 and 14. Changes were redlined and highlighted as requested and can be found on the following pages:

Indicator 1: Revised APR, pages 1, 2, and 3

Indicator 5: Revised APR, pages 22 and 23

Indicator 8C: Revised APR, page 34

Indicator 9: Revised APR, pages 40 and 41*

Indicator 14: Revised APR, page 49

*For Indicator 9, no language was changed, but a section was highlighted so that reviewers can note that the state did report on the actions it took to address the uncorrected noncompliance. The Ohio Status Table indicated an omission.

If you have any questions or need additional information, please contact Wendy Grove, Ohio's Part C Coordinator in the Bureau of Early Intervention Services, at 614.728.9152 or via email at wendy.grove@odh.ohio.gov.

Sincerely,

Wendy Grove, Ph.D.
Part C Coordinator & Early Childhood Program Administrator
Ohio Department of Health

OHIO's PART C Annual Performance Report (APR)

FFY 2009 (July 1, 2009 – June 30, 2010)

Resubmitted with Clarifications
April 15, 2011



Overview of the Annual Performance Report Development:

The Annual Performance Report (APR) was developed by the Ohio Department of Health, Bureau of Early Intervention Services, the lead agency for Early Intervention (EI) in Ohio. Much of the data for the APR were captured and extracted from the electronic web-based data collection system, Early Track (ET), as well as self-assessment reporting by the county programs. The Bureau data team staff analyzed the data for the APR and created the data tables and summary of the data.

The various committees of the Ohio Help Me Grow (HMG) Advisory Council assisted Bureau staff in carrying out various activities and reporting on the progress of completion of those activities. Each committee provided a verbal report to the Ohio HMG Advisory Council which included progress or slippage and recommended additional activities for next fiscal year. The committees are co-chaired by Council members and include parents as co-chairs of some of the committees, local providers and other state agency personnel.

The APR will be sent to all HMG Project Directors, County Family and Children First Council Coordinators, and all Ohio Help Me Grow Advisory Council members. The APR and updated SPP have also been posted on the www.ohiohelpmegrow.org website.

The performance of each county Help Me Grow program in meeting the state targets will be sent to all HMG Project Directors and County Family and Children First Council Coordinators and shared with the Ohio Help Me Grow Advisory Council members. The county listing will also be posted on the www.ohiohelpmegrow.org website in 2011 to align with the release of the state and county determination process.

Ohio has taken the Office of Special Education Programs up on the opportunity to clarify its APR submitted on February 1, 2011. The version provided here provides clarification on Indicators 1, 5, 8c, 9 and 14.

**ANNUAL REPORT CERTIFICATION OF THE
INTERAGENCY COORDINATING COUNCIL
UNDER PART C OF THE
INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)**

Under IDEA Section 641(e)(1)(D) and 34 CFR §303.654, the Interagency Coordinating Council (ICC) of each jurisdiction that receives funds under Part C of the IDEA must prepare and submit to the Secretary of the U.S. Department of Education (Department) and to the Governor of its jurisdiction an annual report on the status of the early intervention programs for infants and toddlers with disabilities and their families operated within the State. The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) provide this certification with the State lead agency's Annual Performance Report (APR)¹ under Part C of the IDEA. This certification (including the annual report or APR) is due no later than February 1, 2011.

On behalf of the ICC of the State/jurisdiction of Ohio, I hereby certify that the ICC is: [please check one]

1. [] Submitting its own annual report (which is attached); or
2. [✓] Using the State's Part C APR for FFY 2009 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C APR for accuracy and completeness.²

I hereby further confirm that a copy of this Annual Report Certification and the annual report or APR has been provided to our Governor.

Kim Johnson
Signature of ICC Chairperson

1/3/11
Date

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Daytime telephone number

¹ Under IDEA Sections 616(b)(2)(C)(ii)(II) and 642 and under 34 CFR §80.40, the lead agency's APR must report on the State's performance under its State performance plan and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

² If the ICC is using the State's Part C APR and it disagrees with data or other information presented in the State's Part C APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 1, 2011.

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On behalf of the ICC of the State/jurisdiction of OHIO, I hereby certify that the ICC is: [please check one]

1. [] Submitting its own annual report (which is attached); or
2. [X] Using the State's Part C APR for FFY 2009 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C APR for accuracy and completeness.²

I hereby further confirm that a copy of this Annual Report Certification and the annual report or APR has been provided to our Governor.

Kimberly P. Javers
Signature of ICC Chairperson

12/22/2010
Date

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¹ Under IDEA Sections 616(b)(2)(C)(ii)(II) and 642 and under 34 CFR §80.40, the lead agency's APR must report on the State's performance under its State performance plan and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

² If the ICC is using the State's Part C APR and it disagrees with data or other information presented in the State's Part C APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 1, 2011.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:
 Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.
 Account for untimely receipt of services, including the reasons for delays.

FFY	Measurable and Rigorous Target
2009-2010	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.

Actual Target Data for FFY09:

Ohio used monitoring data from its data system (Early Track) to determine its percent compliance for this indicator. All children who had services added to IFSPs during the January 2, 2010 to March 31, 2010 timeframe were examined electronically. A sample of records was then verified to ensure accurate reporting. 2580 2850 of the 3030 children examined, or 94 percent, were compliant, as a result of services starting within 30 days of the signed IFSP.

The 2524 2580 records counted as being compliant includes 156 that were non-timely due to documented extraordinary family circumstances. These 156 records are included in the numerator and denominator.

The 180 noncompliant records are deemed as such for the following reasons:

- 9 percent for staff oversight/error
- 87 percent for staff scheduling/availability
- 4 percent for data/documentation errors

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

94 percent indicates slippage from the 99 percent compliance reported for FFY2008.

Slippage can be attributed to increased efforts to effectively monitor county programs with the goal of increasing the accuracy of data reported and the rigor with which information is verified. The largest impact results from a focused monitoring visit conducted with a local EIS program that comprises

APR Template – Part C (4)

Ohio
STATE

more than ten percent of Ohio’s Part C population during the Federal Fiscal Year. Serious documentation issues were uncovered during the visit and as a result of corrective action, the local program’s compliance percentage for Indicator 1 dropped significantly. As a result of the scale of the local EIS program showing significant noncompliance, Ohio’s compliance percentage is impacted accordingly.

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008, through June 30, 2009)	7
2. Number of FFY 2008 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	6
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

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

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

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

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

For the **6** EIS programs determined to have corrected findings of noncompliance from FFY08 (due to be corrected in FFY09) in a timely manner for this indicator ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the completion of any/all required actions, albeit late, for each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program.

For the **1** EIS programs not demonstrating timely correction of noncompliance Ohio will monitor in a manner consistent with OSEP Memorandum 09-02, and will similarly verify correction of noncompliance.

For the 1 EIS program determined to have subsequently corrected findings of noncompliance from FFY07 (due to be corrected in FFY08) for this indicator, ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the completion of any/all required actions, albeit late, for each individual case of noncompliance from FFY2007 for children who were still in the corresponding EIS program.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2008:The only non-continuous improvement activity which was completed was #1: “implementing a plan to remove barriers and conduct a cost study for the delivery of services of Help Me Grow.” The cost study data collection and analysis has been completed and the report is in its final editing stages.

Improvement Activities for Indicator 1	Timeline	Resources
1. Continue to monitor this indicator via ODH’s web-based data system, Early Track, and on site focused monitoring visits.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS data and monitoring teams and state partners ➤ County staff
<p>2. ODH will provide technical assistance to counties who are identified with noncompliance in this area.</p> <p>Progress ODH conducted webcasts for counties on the TRS compliance report and TRS Corrective Action Plan (CAP) log found in Early Track. Reports are designed for counties to monitor their compliance data.</p> <p>ODH additionally requested and received technical assistance from the Data Accountability Center and the North Central Regional Resource Center concerning data quality and reporting issues in an ongoing effort to improve the quality of the information counties report in Early Track to ODH.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS HMG technical assistance team ➤ State partners
<p>3. Propose a training plan for the service delivery practices identified to enhance providers understanding of family centered relationships and strength based approaches to early intervention service delivery to include strategies for listening to families and planning interventions based on conversations about what is already being done, what is working and family priorities, to include:</p> <ul style="list-style-type: none"> • Identifying possible trainers (including parents); • Identifying a training schedule of counties for FFY10 and beyond such that all 88 counties are trained; and • Developing a training sustainability plan. 	FFY10	<ul style="list-style-type: none"> ➤ Service Delivery Committee ➤ CSPD Committee
4. Provide feedback on how to use the cost study information and how to link this information with that contained in the Part C review recommendations for future funding/financing decisions.	FFY10	<ul style="list-style-type: none"> ➤ Funding Committee and BEIS liaisons

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09

[If applicable]

Proposed improvement activities were updated to reflect work that is underway in the state around service delivery for children in Part C of IDEA. As a result of a review of Part C in the state in 2009 and 2010, a recommendation was made that all children in Part C have access to a core team of professionals who would be responsible for coaching the family in natural environments using a trans-disciplinary, or evidence-based early intervention principles, model.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

FFY	Measurable and Rigorous Target
2009-2010	81% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.

Actual Target Data for FFY09:

91 percent of infants and toddlers with IFSPs primarily received early intervention services in the home or programs for typically developing children. The source data for this indicator are from the December 1, 2009 Table 2 (Report of Program Setting where Early Intervention Services Are Provided) reported to Westat by the Ohio Department of Health (ODH). ODH reported that 13,055 children of the total 14,336 received early intervention services in home or in programs for typically developing children.

As the data indicates, for FFY09, Ohio exceeded its target by 10 percent.

The data for this indicator were captured via ODH’s data system. Data for this area are reported as the primary location where the child receives the majority of his/her services. The Service Coordinators determine the primary location by reviewing what is documented on the IFSP as the location for each EI service.

The percentages were calculated by (1) adding all the primary settings categorized as inclusive (i.e., programs for typically developing children) or home and then (2) dividing the sum of one (1) by the total number children with primary settings in all locations.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2008:

91 percent indicates progress from the 90 percent performance reported for FFY2008. None of the improvement activities have been completed, they are in progress and moving. Two of the three have been deemed important enough to now be ongoing activities.

APR Template – Part C (4)

Ohio
STATE

Improvement Activities for Indicator 2	Timeline	Resources
<p>1. Identify providers of early intervention and related services and utilize them for ERAP services.</p> <p>Progress ODH is contracting with providers of early intervention services and continue to add providers to our EI System of Payment.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS ➤ ODODD ➤ County Boards of DD ➤ Bureau for Children with Medical Handicaps (BCMH) at ODH ➤ ODE ➤ Private providers
<p>2. Utilize information to develop an implementation plan to embed and integrate the development of functional skills through a trans-disciplinary approach within home, child care and other settings.</p> <p>Progress Ohio has moved toward an evidenced-based model of early intervention service delivery. A few counties in the state have implemented the use of the Routines Based Interview and use of a trans-disciplinary team with a primary service provider. ODH and ODODD have delivered training on the topic and the Part C review group has provided a recommendation on the service delivery model for the state. The state has also put in place an inter-agency agreement to train master coaches who reside in the state and will be available to train service providers in the approach.</p>	Ongoing	<ul style="list-style-type: none"> ➤ Data from state cost survey and other state information ➤ BEIS ➤ DODD
<p>3. Change Medicaid state plan to help finance early intervention services in non-Medicaid settings (e.g., home, day care, community settings).</p> <p>Progress The Ohio Department of Job and Family Services (ODJFS), Office of Medicaid passed new rules allowing developmental therapy services to be provided in conjunction (i.e. OT, PT, and ST) and in natural environments for children birth – 6 years of age. ODH is working more closely with ODJFS Medicaid office, areas of discussion include the use of Medicaid for developmental evaluation and assessment and service coordination. Moreover, the Part C Review group made a recommendations to the lead agency in Spring 2010 regarding utilization of various payment sources including Medicaid.</p>	FFY2013	<ul style="list-style-type: none"> ➤ ODJFS ➤ BEIS ➤ Governor's Office
<p>4. Collect, compile, and analyze information to Everyday Routines, Activities, and Places (ERAP).</p>	FFY 2011	<ul style="list-style-type: none"> ➤ State survey data and other state information ➤ ET 3.0
<p>5. Work with licensing boards to explore ways to promote ERAP and EI practice for early intervention services.</p>	FFY 2011	<ul style="list-style-type: none"> ➤ BEIS ➤ Professional Licensing Boards

APR Template – Part C (4)

Ohio
STATE

		<ul style="list-style-type: none"> ➤ CSPD ➤ Higher Education
6. Propose ways to develop and enhance undergraduate and graduate coursework and curriculum that enhance understanding of relationship- and strength-based services in all areas of early intervention practice (early education, physical therapy, nursing, audiology, child development, family relations, psychology, etc.).	FFY 2011	<ul style="list-style-type: none"> ➤ CSPD Committee
7. Propose ways to utilize and embed in higher education course work requirements the Special Quest training materials for inclusive early childhood practices.	FFY 2010	<ul style="list-style-type: none"> ➤ CSPD Committee ➤ National Professional Development Center on Inclusion

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

Timelines have been adjusted because the work is ongoing and in progress. Four new improvement activities have been added from the work of the interagency coordinating council (Help Me Grow Advisory Council) to update Council and committee work plans.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

Outcomes:

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

Progress categories for A, B and C:

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

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

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

Measurement for Summary Statement 1:

Percent = # of infants and toddlers reported in progress category (c) plus # of infants and toddlers

reported in category (d) divided by [# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

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

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

FFY	Measurable and Rigorous Target
2009-2010	63% See Summary Statements table below

Actual Target Data for FFY09:

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	217	6.1%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	679	19.1%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	449	12.7%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	920	25.9%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1284	36.2%
Total	N=3549	100%

B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	203	5.7%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	654	18.4%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	488	13.8%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	935	26.3%

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1269	35.8%
Total	N=3549	100%

C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	202	5.7%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	690	19.4%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	462	13.0%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	932	26.3%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1263	35.6%
Total	N=3549	100%

Summary Statements	% of children
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60.4
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	62.1

Summary Statements	% of children
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	62.4
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	62.1
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60.1
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	61.8

Entry data are collected based on information gathered through the evaluation/assessment process, including screenings, and through parent feedback and observations of the child in various settings. Entry data is only collected for children who have an IFSP dated on/after six (6) months of age. All programs collecting data for Indicator 3 reporting do so by completing a Child Outcome Summary Form (COSF) which was adapted for use by Ohio’s Part C program from the Early Child Outcome Center’s form. The COSF uses a seven (7)-point scale with ratings of six (6) and seven (7) being “comparable to same-aged peers.”

All COSFs are submitted electronically to Ohio’s data system. They are checked for accuracy and completeness, including:

- Correct child identification information,
- Appropriate rating dates (i.e., on/after date of IFSP or exit from Part C program),
- All Outcomes completed, and
- Progress reported appropriately (i.e., “Yes” or “No” with justification)

Provision of training and technical assistance supports to administrators and service providers in outcome data collection, reporting, and use

- In FFY07 ODH completed its training of the eighty-eight (88) county Part C programs.
- In FFY08 ODH transitioned its Indicator 3-related data collection to its larger web-based early intervention data system.
- In FFY08 ODH began to provide web-based training resources allowing county Part C programs to refresh employees and/or train new employees to the COSF processes.

Measurement strategies to collect data

- Who are included in the measurement? All infants and toddlers who enter the early intervention system with an IFSP that qualifies for Entry COSF Ratings*
*Children must have an IFSP in place in Ohio's Part C program on/after six (6) months of age, and prior to thirty (30) months of age.
- What assessment / measurement tool(s) and/or other data sources will be used? The child's IFSP team including the child's family will use a variety of data sources to make a determination of the child's performance level. The child's performance will be scored using a seven (7)-point scale included on the adapted COSF originally developed by the Early Childhood Outcome Center.
- What data will be reported to the state, and how will the data be transmitted? Currently, on an ongoing basis, at entry (or IFSP review for children entering under six (6) months of age), each annual IFSP, and exit, local programs complete hardcopy COSFs and submit those to the state. What data analysis methods will be used to determine the progress categories? ODH uses the recommended COSF to OSEP Categories Calculator provided by the Early Childhood Outcome Center.
- What criteria will be used to determine whether a child's functioning was "comparable to same aged peers"? ODH has adapted the Early Childhood Outcome Center's definition for "comparable to same-aged peers", a child who has been scored as a six (6) or seven (7) on the seven (7)-point scale included on the COSF.

Quality assurance and monitoring procedures to ensure the accuracy and completeness of the outcome data

- Currently all submitted COSFs to the state are checked for accuracy and completeness, including:
 - Correct child identification information,
 - Appropriate rating dates (i.e., on/after date of IFSP or exit from Part C program),
 - The electronic version of the COSF on Early Track does not allow incomplete or inappropriate (i.e., no IFSP or Exit) ratings to be saved to a child's record,
 - All Outcomes completed, and
 - Progress reported appropriately (i.e., "Yes" or "No" with justification)
 - ODH intends to support county administrators in reviewing random samples of COSFs for quality and completeness (i.e., comparing ratings to supportive evidence), and
 - ODH intends to analyze data summaries to look for discrepancies by county program, service agency, and service coordinator

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

Slippage from FFY08 to FFY09 can be explained by the method by which ODH trained local staff on the collection of child outcomes. Statewide training was not complete until FFY07. As such, FFY09 was the first year in which data representative to the entire state could have been available for reporting in the APR. Variance in the outcomes, therefore, is to be expected, given the different populations used across the two time periods.

Improvement Activities #1 "Move COSF to Early Track" and #3 "Create a web-based COSF refresher self-tutorial" have been completed.

Improvement Activities for Indicator 3	Timeline	Resources
1. Quality assurance on data to ensure accuracy & completeness. Support county administrators in reviewing random samples of COSFs for quality & completeness.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ County Administrators ➤ HMG Advisory Council ➤ Evaluation committee
2. Analyze data summaries to look for discrepancies by county, service agency, service coordinator	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ County administrators
3. Analyze outcomes of COSF update to Council and strategize on improvements to education, information, or/and process.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS ➤ Evaluation committee

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

One new improvement activity was added to ensure that the ICC is kept informed of the state’s progress on fully implementing the child outcomes measures.

Since the target data for FFY09 is showing a somewhat significant decrease for the outcomes reported during the baseline year, we are decreasing our FFY09 targets to attainable levels based on the actual target data reported for the FFY09 APR. Ohio’s stakeholder groups feel strongly that targets should be set at conservative levels, given the variation we see between the FFY08 baseline and the FFY09 actual target data. Since FFY09 is the first year in which statewide data could have been available for Ohio to report due to the rollout training process it took toward implementing the collection of this data at the local level, a year-to-year difference such as that between FFY08 and FFY09 is not unexpected. As a result of the decrease, ODH is maintaining the attainable targets for FFY10 in order to provide adequate time to implement improvement strategies for this indicator. Revisions to targets to FFY09 and FFY10 are reflected in the SPP. Below are Ohio’s revised targets for FFY09:

Summary Statements	Revised FFY09 Target
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	60

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Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	60

Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	60

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

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

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
2009-2010	<ul style="list-style-type: none"> A. 93% of families participating in Part C who report that early intervention services have helped families know their rights. B. 93% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs. C. 93% of families participating in Part C who report that early intervention services have helped families help their children develop and learn.

Actual Target Data for FFY09:

- A. 93 percent Know their rights:** 1932 respondent families participating in Part C report that early intervention services helped them know their rights divided by 2082 respondent families participating in Part C times 100. We received a total of 2115 questionnaires; 2082 responded to question referencing Indicator 4A. Thirty-three (33) non-responses were removed from denominator.
- B. 95 percent Effectively communicate their children's needs:** 2004 respondent families participating in Part C report that early intervention services helped them effectively communicate their children's needs divided by 2109 respondent families participating in Part C times 100. We received a total of 2115 questionnaires; 2109 responded to question referencing Indicator 4B. Six non-responses were removed from denominator.

- C. 94 percent Help their children develop and learn:** 1978 respondent families participating in Part C report that early intervention services helped family help their children develop and learn divided by 2111 respondent families participating in Part C times 100. We received a total of 2115 questionnaires; 2111 responded to question referencing Indicator 4C. Four non-responses were removed from denominator.

Discussion of how Ohio gathered data which produced results listed above:

Ohio used the three questions from the ECO Family Questionnaire to gather the data for the 3 measurements for this indicator.

1. To what extent has Help Me Grow helped your family know and understand your rights?
2. To what extent has Help Me Grow helped your family effectively communicate your child's needs?
3. To what extent has Help Me Grow helped your family be able to help your child develop and learn?

Each question had a scale of 1 to 7 with the following anchors:

- 1 – Help Me Grow has done a **poor** job of helping us . . .
- 3 – Help Me Grow has done a **fair** job of helping us . . .
- 5 – Help Me Grow has done a **good** job of helping us . . .
- 7 – Help Me Grow has done an **excellent** job of helping us . . .

Based on technical assistance from ECO, Ohio used responses of 5, 6, and 7 for each question to determine what families were helped by Help Me Grow in the three areas of this indicator.

Tool Used to Gather Family Outcomes Data

The Ohio Department of Health used a modified version of the Early Childhood Center's Family Outcome Questionnaire. The following modifications were made:

- Help Me Grow was substituted for Part C throughout the questionnaire as that is how families "know" Part C in Ohio.
- The OSEP questions (i.e., to what extent has Help Me Grow helped your family know and understand your rights?; to what extent has Help Me Grow helped your family effectively communicate your child's needs?; and to what extent has Help Me Grow helped your family be able to help your child develop and learn?) were the first questions on the Ohio questionnaire rather than the last questions.
- ODH modified the ECCO by removing some questions and adding others for the purposes of addressing Ohio Help Me Grow outcomes and maintaining the brevity of the original questionnaire. The version of the HMG Family Outcomes Questionnaire used for FFY09 is attached.

Administration of the Questionnaire

In FFY09, questionnaires were hand-delivered to participants by their Service Coordinator in an effort to improve response rates from FFY08, during which questionnaires were mailed to recipients. The hand delivery method yielded higher response rates in previous years, which is why ODH decided to return to this method of questionnaire distribution. Ohio replicated steps taken in FFY07 and 06, which included:

- Asking local programs to instruct their service coordinators to hand-deliver printed versions of the questionnaire and accompanying cover letter to their families.
- Tracking local progress in delivering the questionnaires to highlight accountability.
- Making follow-up calls to families who received a survey but had not yet responded.

In order to improve the response rate from traditionally underrepresented populations, Ohio took the following steps:

- Translated the paper survey into Spanish and distributed the translated version to the local programs in cases where the family was identified as being a primarily Spanish-speaking household in Ohio's Part C program's data system.
- In cases where Spanish-speaking families were incorrectly identified as English-speaking in the data system, Spanish surveys were re-distributed to the local programs.

Service Coordinators were given the pre-addressed (including their unique identifier) questionnaires, along with instructions on how to distribute and explain the questionnaire to families. Local program staff (most often the County Project Director) were asked to track the distribution of the questionnaire and periodically report back to the Ohio Department of Health on the progress. Service Coordinators were instructed not to administer the questionnaires in person. Service Coordinators were additionally provided talking points to share with the families. Service coordinators were encouraged to study the questionnaire and prepare themselves for questions from the family. Additionally, Service Coordinators were instructed to discuss the following features of the family questionnaire:

- Voluntary – completion of the survey is not required.
- Anonymous – individual responses will not be shared with the service coordinator who is distributing the survey.
- Methods for completing the survey –Service Coordinators were asked to remind families that responses can be provided by mailing in a completed questionnaire, over the phone or online. Service Coordinators were further asked not to re-collect the survey themselves once completed).
- Service Coordinators were asked to remind the family that their feedback is valued.
- Timeline for responses – Service Coordinators were asked to please deliver all surveys to their families by October 25 and to encourage the respondents to return the surveys within one week of receipt.

Response

With the survey, families were provided a cover letter that gave brief instructions on different methods for submitting the completed questionnaire. They were:

- Complete the hard copy questionnaire and return it to The Ohio Department of Health by mail using an enclosed addressed, stamped envelope.
- Complete the questionnaire on the Helpline website. Upon logging into the online survey site, families were prompted to enter their child's Early Track Identification (ETID) number and then answer the questionnaire.
- Call the HMG Helpline and respond to the questions via phone interview.

Table 1: Distribution of Questionnaire Respondents' Response Type

Response Method		
Inbound Calls	120	5.7%
Outbound Calls (Includes follow-up calls)	243	11.5%
Mailed (Written Questionnaire)	1558	73.7%
Web	194	9.2%
Total	2115	100.00%

5684 total questionnaires were distributed to families still enrolled in the program at the time of distribution, beginning October 25, 2010 with a current Individualized Family Service Plan from the December 1, 2009 child count. Counties informed ODH in cases where a family had exited the program between the time the extract was made and when the questionnaires were distributed. Counties reported that 349 families statewide exited following the final data extract, which were removed from the denominator, yielding a revised N of 5335. The Ohio Department of Health received 2115 surveys for a response rate of 40 percent. All of Ohio's 88 counties were represented in the responses to the Family Outcomes questionnaire.

This data will be disaggregated, summarized by county and sent to all HMG Project Directors and County Family and Children First Council Coordinators and posted on the Ohio Help Me Grow website.

How representative is the sample of families being reported above?:

Demographic description of families who responded by race, age and sex:

Table 2: Race and Ethnic Distribution of Children Represented by Questionnaire Respondents

Race/Ethnicity	Questionnaire Respondents	
American Indian or Alaska Native	8	0.38%
Asian or Pacific Islander	43	2.03%
Black or African American	291	13.77%
Hispanic	98	4.64%
White	1675	79.20%
Total	2115	100%

Note: One respondent was identified in the data system as "unknown" race. This respondent was proportionally distributed among the other categories.

Table 3: Sex Distribution of Children Represented by Questionnaire Respondents

Sex	Questionnaire Respondents	
Female	908	42.93%
Male	1207	57.07%
Total	2115	100%

Table 4: Age Distribution of Children Represented by Questionnaire Respondents

Age Range	Questionnaire Respondents	
0-1	3	0.14%
1-2	790	37.35%
2-3	1322	66.51%
Total	2115	100%

Analysis of Representativeness of Response

For FFY09, Ohio used a census approach for questionnaire distribution. Families were eligible to be part of the questionnaire process if their family became eligible for Part C on or before December 1, 2009 and were still in the program and had a current IFSP during the distribution of questionnaires, which began on October 25, 2010. In using Ohio's most recent 618 data for comparison, Tables Five, Six and Seven display representativeness in race/ethnicity, sex and age.

Table 5: Race and Ethnicity Distribution of Questionnaire Respondents and 618 Data

Race/Ethnicity	Questionnaire Respondents		618	
American Indian or Alaska Native	8	0.38%	38	0%
Asian or Pacific Islander	43	2.03%	301	2%
Black or African American	291	13.77%	2903	20%
Hispanic	98	4.64%	874	6%
White	1675	79.20%	10220	71%
Total	2115	100%	14336	100%

Table 6: Sex Distribution of Questionnaire Respondents and 618 Data

Sex	Questionnaire Respondents		618	
Female	908	42.93%	5890	41%
Male	1207	57.07%	8446	59%
Total	2115	100%	14336	100%

Table 7: Child Age Distribution of Questionnaire Respondents and 618 Data

Age Range	Questionnaire Respondents		618	
	Count	Percentage	Count	Percentage
0-1	3	0.14%	2587	18%
1-2	790	37.35%	4719	33%
2-3	1322	62.51%	7030	49%
Total	2115	100%	14336	100%

In general, steps taken to assure representativeness across race and sex categories were successful. Although response within the African American or Black and Hispanic categories is below the expected distribution, underrepresentation among both categories is not uncommon in survey research. The gap between the proportion of Hispanic families in the program and Hispanic families responding to the questionnaire is quite small, indicating our efforts to encourage the response of Hispanic families were effective.

One demographic area in which the results are skewed is age. Specifically, those falling into the 2-3 age category appears to be over-represented in our survey results compared to the general Part C population in Ohio, per Ohio’s 618 tables. Consequently, survey respondents with children in the 0-1 age category appear to be under-represented, using the same population standard. The reasons for this disparity are due to the manner in which Ohio chose to select eligible families for the response pool. Ohio selected all families who were determined eligible for Help Me Grow’s Part C program on or before December 1, 2009 and were still in the program during questionnaire distribution, which was completed in October of 2010. Age of the respondents’ child was calculated based on the date of delivery, October 25, 2010. As a result, any child falling in to the 0-1 category would have had to have become eligible between October 14, 2009 and November 30 2009 still been under one year old on October 15, 2010, which represents a very small cross-section of our families. Ohio chose these selection criteria in order to assure that each family has had an adequate amount of time in the program to inform their decisions on indicators captured by the survey.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

- A. 93 percent indicates slippage from 94 percent performance reported for FFY2008
- B. 95 percent indicates progress from 94 percent performance reported for FFY2008
- C. 94 percent indicates progress from 92 percent performance reported for FFY2008

Although slippage from the previous year’s performance is observable for Indicators 4B, Ohio did meet its targets for this indicator. It is additionally not unusual to observe minor variation between years, particularly given the methodology employed in collecting data for this indicator, via questionnaire. Ohio is in progress of reviewing and revising the Parents’ Rights brochure.

Improvement activity #4 “Revise Parent Support policy” was completed and implemented July 16, 2010. #1 “creation of an educational seminar series” was changed from a discreet activity to an ongoing improvement activity to ensure that we are providing families with various kinds of opportunities for education.

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Improvement Activities for Indicator 4	Timeline	Resources
1. Creation of an educational seminar series for families which will target parent’s rights, parent involvement in decisions for services, and parent advocacy which will be delivered both in person and online.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS ➤ Family Information Network ➤ Family Engagement committee of the Ohio Family and Children First Council
2. Review survey data annually & process for distribution to determine areas for continuous improvement.	Annually & ongoing	<ul style="list-style-type: none"> ➤ HMG Evaluation committee ➤ BEIS staff
3. Revise Parents Rights brochure.	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee ➤ BEIS staff
4. Propose a training plan for the service delivery practices identified to enhance providers understanding of family centered relationships and strength based approaches to early intervention service delivery to include strategies for listening to families and planning interventions based on conversations about what is already being done, parents serve as faculty along with other trainers.	FFY 10 and FFY11	<ul style="list-style-type: none"> ➤ Service Delivery Committee
5. Revise Family Support expectations/Rule/activities and propose ways to implement the Part C review recommendation to assure the availability of family-to-family support statewide in a cost neutral manner.	FFY11	<ul style="list-style-type: none"> ➤ Service Delivery Committee

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

Two new improvement activities have been added (# 4 & # 5 above) from the work of the interagency coordinating council (Help Me Grow Advisory Council) to update Council and committee work plans.

Part C State Annual Performance Report (APR) for FFY09
Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

FFY	Measurable and Rigorous Target
2009-2010	1.4% of infants and toddlers birth to age one year will have IFSPs.

Actual Target Data for FFY20089:

1.975 percent of infants and toddlers birth to age one year had IFSPs for FFY09. This percentage is calculated by dividing the 0 to 1 child count reported to Westat by the Ohio Department of Health (ODH) on February 1, 2010 of 2,587 and the 2009 population estimate of 147,725.

[Source: U.S. Bureau of the Census. Population data for 2009 accessed August 2010 from 'http://www.census.gov/popest/states/asrh/files/SC-EST2009-AGESEX-RES.CSV]

The data for this indicator were captured via Ohio's data system (Early Track).

Comparing Ohio to Other States

Ohio ranks 8th nationally.

[Source: U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS), OMB #1820-0557: "Infants and Toddlers Receiving Early Intervention Services in Accordance with Part C," 2009. Data updated as of August 3, 2010.]

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

1.975 percent indicates **progress slippage** from the 1.8 percent performance reported for FFY2008.

Slippage observable in Ohio's percent of infants and toddlers birth to age one with IFSPs can be attributed to two factors expected to have an ongoing impact on the birth to three child count. First, in 2007, Ohio changed its requirement for children eligible for Help Me Grow Part C with a developmental delay. Where previously a delay was relatively undefined, Ohio chose to define a developmental delay as being 1.5 standard deviations below the mean as shown on a required, standardized developmental evaluation tool. This change in policy intuitively suggests an anticipated decrease in children becoming eligible for Part C in Ohio. More recently, Ohio provided clarification to counties that it is permissible to exit the family from the program if Early Intervention Services are no longer necessary, at the discretion of the IFSP team. This clarification suggests that families

within the program whose goals no longer require intervention from our service providers will be exited at an increased rate. Both the above-explained change in eligibility policy and the clarification concerning exiting families are expected to have an impact on the birth to one child count.

Improvement Activities for Indicators 5 and 6	Timeline	Resources
<p>1. Develop a statewide marketing plan in order to increase referrals to Help Me Grow; increase collaboration and coordination of the child find initiative; propose strategies to improve public awareness about child development and the need for early intervention and how to make a referral or obtain services, targeting but not limited to:</p> <ul style="list-style-type: none"> a. Parents and the general public; b. Birthing hospitals; c. Hospitals with NICU and/or PICU, level III hospitals; d. Physicians, clinics, WIC; e. Job and Family Services (JFS), Child Welfare agencies; f. The Hospital-Based Child-Find Program; g. Childcare providers; h. Childcare resource and referral agencies; and i. Agencies representing homeless families. j. OFCF k. AAP l. OIMRI m. Childcare n. BCMH o. Early Head Start p. Head Start q. Other child-find 	<p>FFY 10 and FFY 11</p>	<ul style="list-style-type: none"> ➤ Help Me Grow 800-number ➤ BEIS Data and Training Staff ➤ ODH Public Relations ➤ County Help Me Grow Outreach ➤ Public Awareness/Child Find Committee ➤ BEIS Management ➤ County HMG Outreach ➤ ODE, Ohio Head Start Association ➤ Ohio AAP and ODH BCMH

agencies		
2. Implement specific training on typical and atypical development of infants and toddlers to Help Me Grow staff to increase the referral of infants.	Ongoing	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ BEIS Training Staff
3. Propose strategies to improve public awareness about child development the need for early intervention how to make a referral or obtain services.	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
4. Propose ways to involve county-level representatives in identifying key messages and communications strategies	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
5. Propose revisions to HMG website for parents section.	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

The timeline was expanded for improvement activity #1 above because of a new public awareness committee who is committed to the work. One improvement activity was determined to be irrelevant in the state now (#2: “develop a new policy utilizing the hospital to home plan”: given Ohio invests in Hospital-Based Child Find Specialists and has continued to fund individuals whose sole job is to identify families at birthing hospitals who might benefit from Help Me Grow and inform parents about the program and refer parents to the program. Finally, two new improvement activities were added because of the ICC revising their committee work plans.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

FFY	Measurable and Rigorous Target
2009-2010	2.9% of infants and toddlers birth to age three years will have IFSPs.

Actual Target Data for FFY09:

3.2 percent of infants and toddlers birth to age three years old had IFSPs for FFY09. This percentage is calculated by dividing the 0 to 3 child count reported to Westat by the Ohio Department of Health (ODH) on February 1, 2010 of 14,336 and the 2009 population estimate of 446,374.

[Source: U.S. Bureau of the Census. Population data for 2009 accessed August 2009 from <http://www.census.gov/popest/states/asrh/files/SC-EST2009-AGESEX-RES.CSV>]

The data for this indicator was captured via Ohio's data system.

Comparing Ohio to Other States

Ohio ranks 16th nationally.

[Source: U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS), OMB #1820-0557: "Infants and Toddlers Receiving Early Intervention Services in Accordance with Part C," 2009. Data updated as of August 3, 2010.]

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

3.2 percent indicates slippage from the 3.3 percent performance reported for FFY2008.

Minor slippage observable in Ohio's percent of infants and toddlers birth to age three with IFSPs can be attributed to two factors expected to have an ongoing impact on the birth to three child count. First, in 2007, Ohio changed its requirement for children eligible for Help Me Grow Part C with a developmental delay. Where previously a delay was relatively undefined, Ohio chose to define a developmental delay as being 1.5 standard deviations below the mean as shown on a required, standardized developmental evaluation tool. This change in policy intuitively suggests an anticipated decrease in children becoming eligible for Part C in Ohio. More recently, Ohio provided clarification to counties that it is permissible to exit the family from the program if Early Intervention Services are no longer necessary, at the discretion of the IFSP team. This clarification suggests that families within the program whose goals no longer require intervention from our service providers will be

exited at an increased rate. Both the above-explained change in eligibility policy and the clarification concerning exiting families are expected to have an impact on the birth to three child count.

Improvement Activities for Indicators 5 and 6	Timeline	Resources
<p>1. Develop a statewide marketing plan in order to increase referrals to Help Me Grow; increase collaboration and coordination of the child find initiative; propose strategies to improve public awareness about child development and the need for early intervention and how to make a referral or obtain services, targeting but not limited to:</p> <ul style="list-style-type: none"> a. Parents and the general public; b. Birthing hospitals; c. Hospitals with NICU and/or PICU, level III hospitals; d. Physicians, clinics, WIC; e. Job and Family Services (JFS), Child Welfare agencies; f. The Hospital-Based Child-Find Program; g. Childcare providers; h. Childcare resource and referral agencies; and i. Agencies representing homeless families. j. OFCF k. AAP l. OIMRI m. Childcare n. BCMH o. Early Head Start p. Head Start 	<p>FFY 10 and FFY 11</p>	<ul style="list-style-type: none"> ➤ Help Me Grow 800-number ➤ BEIS Data and Training Staff ➤ ODH Public Relations ➤ County Help Me Grow Outreach ➤ Public Awareness/Child Find Committee ➤ BEIS Management ➤ County HMG Outreach ➤ ODE, Ohio Head Start Association ➤ Ohio AAP and ODH BCMH

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q. Other child-find agencies		
2. Implement specific training on typical and atypical development of infants and toddlers to Help Me Grow staff to increase the referral of infants.	Ongoing	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ BEIS Training Staff
3. Propose strategies to improve public awareness about child development the need for early intervention how to make a referral or obtain services.	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
4. Propose ways to involve county-level representatives in identifying key messages and communications strategies	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
5. Propose revisions to HMG website for parents section.	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

The timeline was expanded for improvement activity #1 above because of a new public awareness committee who is committed to the work. One improvement activity was determined to be irrelevant in the state now (#2: “develop a new policy utilizing the hospital to home plan”): given Ohio invests in Hospital-Based Child Find Specialists and has continued to fund individuals whose sole job is to identify families at birthing hospitals who might benefit from Help Me Grow and inform parents about the program and refer parents to the program. Finally, two new improvement activities were added because of the ICC revising their committee work plans.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

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

FFY	Measurable and Rigorous Target
2009-2010	<i>100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C’s 45-day timeline.</i>

Actual Target Data for FFY09:

Ohio used monitoring data from its data system to determine its percent compliance for this indicator. All children who were determine Part C eligible after being referred during the 10/17/2009 to 1/14/2010 timeframe were examined electronically. A sample of records was then verified to ensure accurate reporting. 2,319 of the 2,378 children examined, or 98 percent, were compliant.

The 2,319 records counted as being compliant includes 470 that were non-timely due to documented extraordinary family circumstances. These 470 records are included in the numerator and denominator.

The 59 noncompliant records are deemed as such for the following reasons:

- 53 percent for data/documentation issues
- 25 percent for staff scheduling/availability
- 12 percent for staff oversight/error
- 10 percent for insufficient evaluation slots

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

98 percent indicates progress from the 94 percent compliance reported for FFY2008.

For the 17 EIS programs determined to have corrected noncompliance in a timely manner for the initial IFSP meeting, ODH verified that each program was correctly implementing the specific

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regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the completion of any/all required actions, albeit late, for each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program.

For the 1 EIS program not demonstrating timely correction of noncompliance Ohio will monitor in a manner consistent with OSEP Memorandum 09-02, and will similarly verify correction of noncompliance.

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008, through June 30, 2009)	17
2. Number of FFY 2008 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	16
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

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

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

Two improvement activities were completed (R(1) Expand and standardize developmental evaluations across Ohio and (2) Revise Early Track to add a drop down box.

Improvement Activities for Indicator 7	Timeline	Resources
<p>1. Continue to monitor this indicator via ODH’s web-based data system, Early Track, and on site focused monitoring visits.</p> <p>Progress ODH conducted webcasts for counties on the 45 Days compliance report and 45 Days Corrective Action Plan (CAP) log found in Early Track. Reports are designed for counties to monitor their compliance data.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS data and monitoring teams ➤ State partners ➤ Local partners
<p>2. ODH will provide technical assistance to counties who are identified with noncompliance in this area.</p> <p>Progress Counties identified as either significant noncompliance or continuing noncompliance received intensive TA.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS Technical Assistance team ➤ State partners

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<p>3. Examine barriers identified by counties in not meeting developmental evaluations and/or not completing IFSPs within 45 days.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ Service Delivery Committee ➤ BEIS staff
<p>4. Identify members from the Service Delivery Committee who would participate on a work group (e.g. Help Me Grow Advisory Council committee including family members) that makes recommendations on assessment for program planning process including researching approaches and tools.</p>	<p>FFY 2011 and FFY 2012</p>	<ul style="list-style-type: none"> ➤ Service Delivery Committee

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

Two improvement activities were deleted from the list (#1, “expand and standardize developmental evaluations”; #2 “develop and implement a plan to remove barriers”) because they were not deemed relevant given the other activities occurring in the state around 45 day timeline. Two new improvement activities were added because of the ICC revising their committee work plans.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- 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.

FFY	Measurable and Rigorous Target
2009-2010	<ul style="list-style-type: none"> A. 100% of children exiting Part C have an IFSP with transition steps and services B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred

Actual Target Data for FFY09:

A. IFSPs with transition steps and services	Number of children	Percent of children
a. Children exiting Part C whom have an IFSP with transition steps and services	372	98
b. Children exiting Part C whom do not have an IFSP with transition steps and services	9	2
TOTAL	381	100

Ohio used monitoring data from a self-assessment to determine its compliance percentage for this indicator. Children who had a Transition Planning Conference between March 1, 2010 and May 30, 2010 according to Ohio’s Part C data system were examined for this indicator. The Ohio Department of Health specified which children local programs had to report on whether or not the child’s IFSP included transition steps and services. In order to assure accurate data ODH compared child records to the data reported by counties on the self-assessment for selected children. Forty-five (45) of Ohio’s 88 county programs were represented in the analysis and were sampled to demographically represent the state as a whole. Transition steps and services were included on IFSPs for 372 of the 381 or 98 percent child records examined.

Of the 9 noncompliant cases, all were noncompliant per local programs’ self-report. Although verification of records reported by counties to be compliant was completed, all records initially reported to be compliant were verified to be compliant when

B. Notification to the LEA, if child potentially eligible for Part B	Number of children	percent of children
a. Children exiting Part C and potentially eligible for Part B for whom notification to the LEA occurred	6326	97
b. Children exiting Part C and potentially eligible for Part B for whom notification to the LEA did not occur	169	3
TOTAL	6495	100

Ohio created a data set from reports distributed to LEAs from local Help Me Grow programs. Reports are automatically generated using Ohio’s statewide data system of all Part C children turning three between February 1, 2009 and January 31, 2010 potentially eligible for Part B. When distributing these reports to the LEAs, local Help Me Grow Programs were asked to submit copies of the report to ODH as well. The reports were compiled and local and statewide compliance was calculated. Of 6495 children who fit the criteria of being potentially eligible for Part B services, LEAs were notified of 6326 (97 percent).

In 2009, Ohio’s Transition policy was revised to accommodate Part C family requests to opt out of having their contact information shared with LEAs. Ohio’s data system was subsequently enhanced to accommodate this policy change. For FFY09, 510 families opted out of having their information shared with the LEA. These records were not included in this analysis and were removed from the numerator and the denominator.

All of the 169 noncompliant cases showed evidence that the reports were submitted past the submission deadline, among six local EI programs.

C. Transition Planning Conferences	Number of children	percent of children
a. Children exiting Part C and potentially eligible for Part B for whom a TPC should have occurred	2026	98
b. Children exiting Part C and potentially eligible for Part B for whom a TPC occurred no later than 90 days before their 3 rd birthday	49	2
TOTAL	2075	100

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Ohio used monitoring data from its data system to determine its percent compliance for this indicator. All Part C children who were reaching age three during the 3/1/2010 to 5/30/2010 timeframe were examined electronically. A sample of records was then verified to ensure accurate reporting. 2026 of the 2075 children examined, or 98 percent, were compliant.

The 2026 records counted as being compliant includes 208 that were non-timely due to documented extraordinary family circumstances. These 208 records are included in the numerator and denominator.

The 49 noncompliant records are deemed as such for the following reasons:

- 57 percent for staff oversight/error
- 27 percent for LEA scheduling issues
- 16 percent for data/documentation errors

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

A. 98 percent indicates maintenance of the 98 percent compliance reported for FFY2008.

For the 4 EIS programs determined to have corrected noncompliance in a timely manner for this indicator, ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the correction of each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program.

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008, through June 30, 2009)	4
2. Number of FFY 2008 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	4
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

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

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

B. 97 percent indicates progress from 87 percent compliance reported for FFY2008.

For the 3 EIS programs determined to have corrected noncompliance prior to having received findings for this indicator, ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and

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the correction of each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program.

C. 98 percent indicates progress from 94 percent compliance reported for FFY2008.

For the 2423 EIS programs determined to have corrected noncompliance in a timely manner for this indicator ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the completion of any/all required actions, albeit late, for each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program.

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008, through June 30, 2009)	2423
2. Number of FFY 2008 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	2423
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

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

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

Two improvement activities were completed: (1) Establish a web-based tutorial and (2) Develop training to be presented at regional meetings.

Improvement Activities for Indicator 8	Timeline	Resources
<p>1. Establish a mechanism to develop a shared database to identify the number of children transitioning from Part C services to Part B services and documents the transition process across systems.</p> <p>Progress An MOU was signed recently to share data between Part C and Part B programs in the state which was an essential first step to achieving this activity.</p>	FFY 2011	<ul style="list-style-type: none"> ➤ BEIS staff ➤ ODE, possible contract with external entity
<p>2. Provide information for families that support transition activities.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ ODE ➤ HMG Advisory

<p>Progress Revision of several documents around Transition are underway with the goal of providing similar information in similar formats as Part B so families are familiar with the layout and information methods.</p>		<ul style="list-style-type: none"> ➤ Council Transition Committee
<p>3. Continue to monitor this indicator via ODH's web-based data system, Early Track, and on site focused monitoring visits.</p> <p>Progress ODH conducted webcasts for counties on Transition compliance report and the Transition Corrective Action Plan (CAP) log found in Early Track. Reports are designed for counties to monitor their compliance data.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS data and monitoring teams ➤ State partners
<p>4. Develop a model framework and guidance for the creation of local and state interagency agreements that address the specifics needed to ensure smooth and timely transitions for eligible children and families moving from Part C to Part B services.</p>	FFY 11	<ul style="list-style-type: none"> ➤ ODH, ODE, ➤ HMG Advisory Council ➤ Transition Committee
<p>5. ODH will provide technical assistance to counties who are identified with noncompliance in this area.</p> <p>Progress Counties identified as either significant noncompliance or continuing noncompliance received intensive TA.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS Technical Assistance staff ➤ State partners
<p>6. Update the Transition—What is It? brochure for parents.</p>	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee
<p>7. Examine the Transition documents available from NECTAC and other states.</p>	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee
<p>8. Provide recommendations for informing and educating service coordinators on writing transition outcome(s) on IFSPs.</p>	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee
<p>9. Create updated guidance and support on developing local interagency agreements (IAA) using the already developed IAA framework, between HMG, LEA, CBDD, HS, EHS.</p>	FFY 11 and ongoing	<ul style="list-style-type: none"> ➤ Transition Committee
<p>10. Monitor progress on implementation of the student identifier (SSID) between ODH & ODE for opportunities for committee response.</p>	FFY 10 and ongoing	<ul style="list-style-type: none"> ➤ Transition Committee
<p>11. Create a training document which outlines how Family Support Specialists can help families in and through transition.</p>	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee ➤ Family Information Network

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

Timelines have been adjusted to several improvement activities because the activities were not completed, are in progress, and or are deemed important enough to now be ongoing activities. Moreover, several new improvement activities have been added due to the ICC revising their committee work plans.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:
Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

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

FFY	Measurable and Rigorous Target
2009-2010	100% of identified findings of noncompliance are corrected as soon as possible but in no case later than one year from identification.

Actual Target Data for FFY09:

94 percent of findings of noncompliance identified were corrected within one year, or 99 of 105 total findings of noncompliance issued during FFY08.

Indicator/Indicator Clusters	General Supervision System Components.	# of EIS programs issued findings in FFY2008 (7/1/08 – 6/30/09)	(a) # of EIS findings of noncompliance identified in FFY2008 (7/1/08 – 6/30/09)	# of findings of noncompliance from (a) for which correction was verified no later than 1 year from identification
1. % of infants & toddlers with IFSPs who receive EI services on their IFSPs in a timely manner	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	7	7	6
	Dispute resolution: complaints, hearings	4	4	4

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Indicator/Indicator Clusters	General Supervision System Components.	# of EIS programs issued findings in FFY2008 (7/1/08 – 6/30/09)	(a) # of EIS findings of noncompliance identified in FFY2008 (7/1/08 – 6/30/09)	# of findings of noncompliance from (a) for which correction was verified no later than 1 year from identification
2. % of infants & toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	0	0	0
	Dispute resolution: complaints, hearings	0	0	0
3. % of infants & toddlers with IFSPs who demonstrate improved outcomes	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	0	0	0
	Dispute resolution: complaints, hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	0	0	0
	Dispute resolution: complaints, hearings	0	0	0
5. Percent of infants & toddlers birth to 1 with IFSPs 6. Percent of infants & toddlers birth to 3 with IFSPs	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	0	0	0
	Dispute resolution: complaints, hearings	0	0	0
7. Percent of eligible infants & toddlers with IFSPs for whom an evaluation & assessment and an initial IFSP meeting were conducted within part C's 45 day timeline	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	17	17	16
	Dispute resolution: complaints, hearings	2	2	2
8. percent of	Monitoring activities:	4	4	4

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Indicator/Indicator Clusters	General Supervision System Components.	# of EIS programs issued findings in FFY2008 (7/1/08 – 6/30/09)	(a) # of EIS findings of noncompliance identified in FFY2008 (7/1/08 – 6/30/09)	# of findings of noncompliance from (a) for which correction was verified no later than 1 year from identification
children exiting Part C who received timely transition planning to support the child’s transition to preschool & other appropriate community services by their 3 rd birthday including A. IFSPs with transition steps & services	self-assessment/Local APR, data review, desk audit, on site visits or other			
	Dispute resolution: complaints, hearings	0	0	0
8. percent of children exiting Part C who received timely transition planning to support the child’s transition to preschool & other appropriate community services by their 3 rd birthday including B. Notification to LEA, if child potentially eligible for Part B	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	0	0	0
	Dispute resolution: complaints, hearings	0	0	0
8. percent of children exiting Part C who received timely transition planning to support the child’s transition to preschool & other appropriate community services by their 3 rd birthday including C. Transition Conference, if	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	23	23	23
	Dispute resolution: complaints, hearings	0	0	0

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Indicator/Indicator Clusters	General Supervision System Components.	# of EIS programs issued findings in FFY2008 (7/1/08 – 6/30/09)	(a) # of EIS findings of noncompliance identified in FFY2008 (7/1/08 – 6/30/09)	# of findings of noncompliance from (a) for which correction was verified no later than 1 year from identification
child potentially eligible for Part B infants & toddlers with IFSPs who receive EI services on their IFSPs in a timely manner				
Others areas of Noncompliance	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	7	35	31
	Dispute resolution: complaints, hearings	6	13	13

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

7. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2008 through June 30, 2009) (Sum of Column a on the Indicator C 9 Worksheet)	105
8. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	99
9. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	6

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

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

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)	152
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	150
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	2

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 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
6. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	1

For most methods (statewide analysis of information from the data system) of monitoring local programs’ compliance and performance, data from all 88 local programs are analyzed. For Indicator 8A, 45 of Ohio’s 88 counties were analyzed via self-assessment. For focused monitoring, Ohio selects counties based on whether counties are experiencing continuing noncompliance (or whether they fail to meet targets for two consecutive years or longer).

For the 101 EIS findings determined to have been corrected in a timely manner, ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the correction of each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program, or the completion of any/all required actions, albeit late, for each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program as appropriate.

For the 6 findings for which EIS programs did not demonstrate timely correction of noncompliance, Ohio will monitor in a manner consistent with OSEP Memorandum 09-02, and will similarly verify correction of noncompliance. Subsequently, 1 of the EIS programs had more recent data indicate the program was correctly implementing the specific regulatory requirements for the Indicator.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

Ninety-five (95) percent demonstrates slippage from the 99 percent reported in FFY08. Slippage can be attributed to more rigorous and effective monitoring techniques and steps toward improving data quality. Of the five findings that were not corrected within one year, two were issued to one EIS program that received a focused monitoring visit in November 2009 to address the issue of their failure to correct noncompliance within one year. Two additional local EIS programs received findings following focused monitoring visits and failed to correct them within a year, one of which has since corrected three findings. Technical assistance has been provided to the EIS program who has failed

to correct one finding from its onsite visit and discussion of escalated sanctions is underway. ODH will provide ongoing targeted technical assistance and monitoring to this program on a monthly basis in order to assure correction of noncompliance.

One improvement activity was completed (1) Determine factors that would be used to implement a performance-based funding formula.

Improvement Activities for Indicator 9	Timeline	Resources
1. Develop process for progressive sanctioning and/or incentives for non-correctors of non-compliance. Progress ODH does have progressive sanctions established for monitoring compliance.	Ongoing	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ BEIS staff
2. Review complaint information (e.g., mediations, due process hearing, investigations) to determine areas of non-compliance and identify trends.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff
3. Review and monitor county corrective action plans to assure correction of noncompliance areas within one year of identification of complaints.	Within one year of complaint	<ul style="list-style-type: none"> ➤ BEIS staff
4. Provide technical assistance or training as needed to assure correction of noncompliance.	As outlined in corrective action plan	<ul style="list-style-type: none"> ➤ BEIS staff ➤ State partners
5. Notify Director of Health of continued noncompliance, in order to impose sanctions as appropriate.	As needed for any complaints with noncompliance	<ul style="list-style-type: none"> ➤ BEIS staff
6. Assist ODH in its efforts to develop the monitoring process for Part C service delivery.	FFY 12	<ul style="list-style-type: none"> ➤ Service Delivery Committee ➤ Evaluation Committee

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

[If applicable]

One improvement activity was added to this indicator, #6, as a result of the ICC revising its committee work plans.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2009-2010	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Actual Target Data for FFY09:

25% of signed written complaints were issued reports and were resolved within the 60-day timeline.

During this period, ODH received six (6) signed written complaints. Of the six complaints, two were withdrawn. Four (4) of the signed written complaints resulted in a written report with findings. One (1) of the four complaints was resolved within the 60-day required timeline.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

Slippage is a result of reduced staff and increased job responsibilities. While Ohio failed to meet the target for a third year in a row, the protocol timeline has been adjusted, and new checklists and tools have been created to inform all involved of the 60 day timeline and their response expectations. Of the four investigations, one missed the deadline by only one calendar day, while another was held due to the parent’s request to investigate allegations outside of the scope of Part C. While slippage has occurred, Ohio is certain the root of the problem delaying the response has been addressed.

Improvement Activities for Indicator 10	Timeline	Resources
1. Initiate complaint resolution procedure as outlined in the Procedural Safeguards Policy.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ Local Family and Children First Council
2. Re-evaluate complaint timelines and protocols to identify areas of improvement needed and lost time in the process.	FFY10	
<p>Progress The state revised its internal timelines so that every person involved in reading, editing, and signing off on</p>		

<p>a complaint report and/or letter is aware of the timeline and how long he/she has to provide comment. There is still room for improvement and we will re-evaluate with every complaint we investigate.</p>		
<p>3. Monitor activities within complaint report.</p> <p>Progress The revised protocols for state staff follow-up now include technical assistance and monitoring staff and supervisors so that everyone is aware of their role in the complaints process and follow up of any parent complaint.</p>	<p>Ongoing</p>	

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2009:

The revised protocol and procedures for an investigation report (improvement activity #2) was revised slightly to allow for continuous improvement and re-evaluation as complaints occur and we can examine to what extent the protocols have helped the state meet its timelines for this indicator.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

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

Measurement: Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

FFY	Measurable and Rigorous Target
2009-2010	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.

Actual Target Data for FFY09:

ODH received no requests for hearings during this time period.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

No improvement activities were completed because no requests for hearings were received.

Improvement Activities for Indicator 11	Timeline	Resources
1. Initiate administrative hearing procedure as outlined in the Procedural Safeguards Policy.	Within 30 days of receipt of request for administrative hearing (for activities 1-4)	➤ ODH staff
2. Assign Hearing Officer and conduct administrative hearing at date, time and location based on reasonable convenience of the family.	Within 30 days of receipt of request for administrative hearing (for activities 1-4)	
3. Assure that family is notified of their rights in the administrative hearing process. The decision of the hearing officer is binding.	Within 30 days of receipt of request for administrative hearing (for activities 1-4)	

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4. Monitor for resolution within required timelines.	Within 30 days of receipt of request for administrative hearing (for activities 1-4)	
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Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

Not applicable.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

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

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
2009-2010	Not applicable - Ohio Part C does not use Part B due process procedures.

Actual Target Data for FFY09:

Not Applicable

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

Not Applicable

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

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

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2009-2010	86% of mediations held will result in mediation agreements.

Actual Target Data for FFY09:

100% of mediations held resulted in mediation agreements. During this period, ODH received two requests for mediation. One of the mediations resulted in agreement and the other request for mediation was withdrawn by the parent before the mediation was scheduled.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2008:

Given that the state surpassed the target for this indicator, improvement activities were kept the same.

Improvement Activities for Indicator 13	Timeline	Resources
1. Continue use of protocol for dispute resolution process specific to mediation activities and timelines.	Within 30 days of receipt of request for administrative hearing (for activities 1-3).	➤ ODH staff
2. Assign Mediation Officer and conduct mediation at date, time and location based on reasonable convenience of the family.	Within 30 days of receipt of request for administrative hearing (for activities 1-3).	➤ ODH staff
3. Assure that mediation process and agreement is kept confidential.	Within 30 days of receipt of request for administrative hearing (for activities 1-3).	➤ ODH staff/family/other participants

APR Template – Part C (4)

Ohio
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4. Monitor for implementation of mediation agreement within required timelines.	Within 60 - 90 days following mediation agreement.	➤ ODH staff/other participants
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Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

Not Applicable.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

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

FFY	Measurable and Rigorous Target
2009-2010	100% of State reported data, including 618 data, State performance plan, and annual performance reports, are: a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).

Actual Target Data for FFY09:

100 percent of state reported data were submitted on time and accurately by Ohio as determined by using the Data Rubric for data applicable to the APR time period (7/1/09 – 6/30/10).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY09:

~~100~~ **95.7** percent indicates progress from the 93 percent reported for FFY2008. Because the state showed improvement since the previous year for this indicator, improvement activities were not changed.

APR Template – Part C (4)

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Improvement Activities for Indicator 14	Timeline	Resources
<p>1. Revise Web Based data system (Early Track).</p> <p>Progress ODH Data and IT staff continue to implement upgrades in Early Track to capture compliance and performance data for several indicators.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ OMIS staff and vendor
<p>2. Revise Early Track reports.</p> <p>Progress Reports have been developed in ET 3.0 with additional reports continuing to be developed ongoing.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ OMIS staff ➤ County program input
<p>3. Report data to Westat/OSEP by required timelines.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ Early Track
<p>4. Conduct trainings for county staff who manage data in ET 3.0 to focus on various reporting functions that can be used to help local staff monitor their data entry into our system (i.e., accuracy and timeliness).</p> <p>Progress Training continues to be developed & offered to county staff.</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ Early Track
<p>5. Implement various data verification strategies with counties.</p> <p>Progress Verified data related to compliance (i.e., transition, 45 days, Timely receipt of services as well as some demographic data).</p>	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY09:

Not applicable.

OHIO's PART C State Performance Plan (SPP)

FFY 2009 (July 1, 2009 – June 30, 2010)

February 2011



Part C State Performance Plan (SPP) for 2005 – 2012

Overview of the State Performance Plan Development:

In 2005, the Ohio Department of Health, the lead agency for Early Intervention (EI) in Ohio gathered and analyzed all available data for the development of the six (6) year State Performance Plan (SPP). The Bureau of Early Intervention Services staff, led by the data team gathered the following data for inclusion in the SPP: monitoring data, complaint data and 618 data for the Early Tack data collection system. The data team took the lead on analyzing and presenting the data to the SPP Workgroup. The SPP Workgroup included the co-chairs from the Help Me Grow (HMG) Advisory Council, committee co-chairs which includes a parent as co-chair of each committee, local providers and other state agency personnel. The SPP Workgroup met on three occasions to review and discuss the data; assist the Department in examining the baseline data, setting targets for certain indicators; and developing improvement activities/strategies. The draft SPP was sent electronically to the full HMG Advisory Council. A meeting was held for the full HMG Advisory Council to review the document and make any suggestions for changes. The final SPP included the suggested changes.

In 2007, ODH entered into a Compliance Agreement with the Office of Special Education Programs (OSEP) regarding indicators 1, 7, 8A, 8C & 9. OSEP requested that ODH revise its baseline data in the SPP to reflect new baseline data reported by ODH to OSEP during the course of the Compliance Agreement. OSEP approved the revised SPP and it was sent to the Help Me Grow Advisory Council members in Spring 2009. It was also posted on the www.ohiohelpmegrow.org website so that our local partners, stakeholders, families and other interested parties can review our updated SPP online.

In 2010, ODH presented the SPP indicators, activities, and benchmarks to its Interagency Coordinating Council, the Help Me Grow Advisory Council. The ICC reviewed the existing activities and benchmarks as well as drafted new activities and benchmarks for the extended years of 2011 – 2012 and 2012 – 2013. The targets and improvement activities for all years were discussed over in-person meetings and revisions by ODH were approved by the ICC (HMGAC) at its December 2010 meeting.

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.

Overview of Issue/Description of System or Process:

This indicator is supported by the following policy statements and procedures:

The revised (OSEP approved 8-2009) **Individualized Family Service Plan (IFSP) policy** states: “A review of the IFSP for a child and the child’s family shall be conducted every six months or more frequently if conditions warrant, or if the family requests such a review.” Moreover, it states that “The IFSP shall be developed and signed by parents and other team members within 45 calendar days of the initial referral” and “The IFSP shall include the projected dates for initiation of the specific early intervention services as soon as possible after the IFSP meetings and the anticipated duration of those services.”

The **Part C Service Coordination policy** (revised 7-2010) states “Service coordination must include the following: coordinating completion of all required Individualized Family Service Plans in accordance with the IFSP policy.”

Moreover, a new policy (revised 7-2010), **Part C Service Delivery**, describes what service providers must assure for families whose children are receiving services under IDEA. Those assurances include providing services by qualified professionals in natural environments, teaching parents about the provision of needed services, provide information about the assessment(s) on their child, parental right to decide or accept any service, parental written consent requirements, written prior notice requirements, and when an interim IFSP is appropriate.

Ohio’s system of early intervention services depends on the Service Coordinator to assure that children/families are receiving the services as listed on their IFSP. The revised IFSP policy now contains the definition of timely services.

The Service Coordinator credentialing process began in November 2004. To date, ODH has certified over 2,700 Service Coordinators in the state. Service coordinators must pass a Skills Inventory and complete several trainings within their first year of employment to obtain their credential. The credential must also be renewed every two years, with a minimum requirement of 10 continuing education credits per year on topics related to Birth – 3 to remain credentialed.

Ohio implemented a new EI System of Payment in July 2006, the process includes the recruitment of early intervention service providers. Providers are required to complete an application process, fulfill criteria developed by the Department and sign an agreement. A new EI System of Payment policy was developed and approved by OSEP. A list of approved EI providers has been published and updated periodically and distributed statewide. The Department continues to recruit new providers and is exploring ways to streamline the provider recruitment process with the Bureau of Children with Medical Handicaps (BCMH), Ohio’s Title V program.

SPP Template – Part C

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Baseline Data for FFY 2004 (2004-2005): (revised per OSEP with Compliance Agreement data)

This indicator is included in the Compliance Agreement.

72% - Based on 728 records out of 1006, all new services listed on the IFSPs for all children with a Part C eligibility in 2006 were delivered in a timely manner. The 728 records counted as being timely includes 68 that were late due to documented extraordinary family circumstances.

Noncompliant services are deemed as such for the following reasons:

- 7% for program staff oversight/error
- 8% for program staff scheduling issues
- 13% for service unavailable within 30 days due to a waitlist
- 10% for early intervention service unavailable
- 63% are considered noncompliant due to insufficient documentation to support a service start date or an acceptable reason for noncompliance.

Discussion of Baseline Data:

ODH acquired its baseline data by using its web-based data system, Early Track, and counties inquiries to ascertain what IFSP had new services and then determine if those services began in a timely manner.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2006 (2006-2007)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2007 (2007-2008)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2008 (2008-2009)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2009 (2009-2010)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2010 (2010-2011)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2011 (2011-2012)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2012 (2012-2013)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.

SPP Template – Part C

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Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 1	Timeline	Resources
1. Continue to monitor this indicator via ODH's web-based data system, Early Track, and on site focused monitoring visits.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS data and monitoring teams and state partners ➤ County staff
2. ODH will provide technical assistance to counties who are identified with noncompliance in this area.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS HMG technical assistance team ➤ State partners
<p>3. Propose a training plan for the service delivery practices identified to enhance providers understanding of family centered relationships and strength based approaches to early intervention service delivery to include strategies for listening to families and planning interventions based on conversations about what is already being done, what is working and family priorities, to include:</p> <ul style="list-style-type: none"> • Identifying possible trainers (including parents); • Identifying a training schedule of counties for FFY10 and beyond such that all 88 counties are trained; and • Developing a training sustainability plan. 	FFY10	<ul style="list-style-type: none"> ➤ Service Delivery Committee ➤ CSPD Committee
4. Provide feedback on how to use the cost study information and how to link this information with that contained in the Part C review recommendations for future funding/financing decisions.	FFY10	<ul style="list-style-type: none"> ➤ Funding Committee and BEIS liaisons

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.

Overview of Issue/Description of System or Process:

Early Intervention services in natural environments are supported through the **Help Me Grow IFSP policy** (OSEP approved 8-2009) by the following statement: “The IFSP shall include a statement of the specific early intervention services necessary to meet the unique needs of the child and the family to achieve the identified outcomes including: the natural environments in which the early intervention services shall be provided and a justification of the extent, if any, to which the services shall not be provided in a natural environment.”

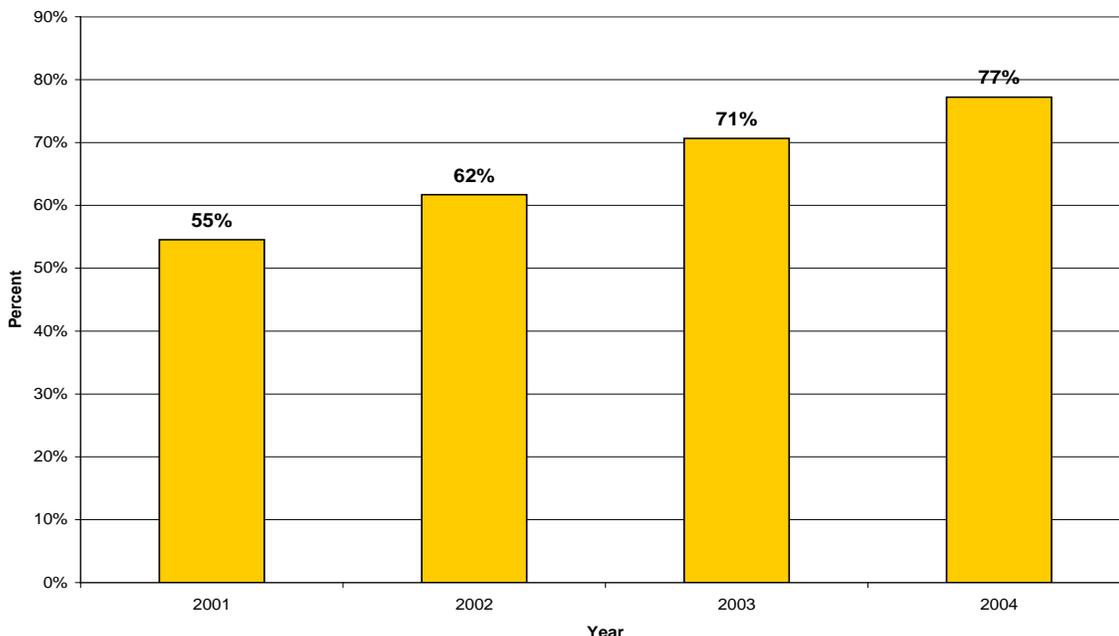
Moreover, a new policy (revised 7-2010), **Part C Service Delivery**, describes what service providers must assure for families whose children are receiving services under IDEA, including providing services by qualified professionals in natural environments.

The major service provider of EI services in Ohio are the county boards of developmental disabilities. Many county boards have developed early childhood centers where services are provided for typically developing children, childcare, Head Start, and children with developmental delays and disabilities. Through Help Me Grow, many services are offered in the home and through the county board early childhood centers. Guidance has been provided to county programs on how to code the setting in the ET data collection system.

The guidance OSEP provided at the data managers meeting regarding what constitutes a natural environment has been integrated into the data definitions for the Early Track data collection system.

Baseline Data for FFY 2004 (2004-2005):

Percent of Children with IFSPs who primarily receive services in Home / Inclusive Settings



Discussion of Baseline Data:

The data for this indicator was captured via the Early Track (ET) data collection system per the 618 settings data report. Data for this area is reported as the primary location where the child receives the majority of their services. The Service Coordinators determine the primary location by reviewing what is documented on the IFSP as the location for each EI service. It should be noted the data reported here was run on August 29, 2005 and may differ from original 618 data submissions because Early Track is a “live” data system.

The percentages were calculated by (1) adding all the settings categorized as inclusive (i.e., programs for typically developing children) or home and then (2) dividing the sum of one (1) by the total number of services located in all locations.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	77% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.
2006 (2006-2007)	78% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.
2007 (2007-2008)	79% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.
2008 (2008-2009)	80% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.

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2009 (2009-2010)	81% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.
2010 (2010-2011)	82% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.
2011 (2011-2012)	83% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.
2012 (2012-2013)	84% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or in programs for typically developing children.

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 2	Timeline	Resources
1. Identify providers of early intervention and related services and utilize them for ERAP services.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS ➤ ODODD ➤ County Boards of DD ➤ Bureau for Children with Medical Handicaps (BCMH) at ODH ➤ ODE ➤ Private providers
2. Utilize information to develop an implementation plan to embed and integrate the development of functional skills through a trans-disciplinary approach within home, child care and other settings.	Ongoing	<ul style="list-style-type: none"> ➤ Data from state cost survey and other state information ➤ BEIS ➤ DODD
3. Change Medicaid state plan to help finance early intervention services in non-Medicaid settings (e.g., home, day care, community settings).	FFY2013	<ul style="list-style-type: none"> ➤ ODJFS ➤ BEIS ➤ Governor's Office
4. Collect, compile, and analyze information to Everyday Routines, Activities, and Places (ERAP).	FFY 2011	<ul style="list-style-type: none"> ➤ State survey data and other state information ➤ ET 3.0
5. Work with licensing boards to explore ways to promote ERAP and EI practice for early intervention services.	FFY 2011	<ul style="list-style-type: none"> ➤ BEIS ➤ Professional Licensing Boards ➤ CSPD ➤ Higher Education
6. Propose ways to develop and enhance undergraduate and graduate coursework and curriculum that enhance understanding of relationship- and strength-based	FFY 2011	<ul style="list-style-type: none"> ➤ CSPD Committee

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services in all areas of early intervention practice (early education, physical therapy, nursing, audiology, child development, family relations, psychology, etc.).		
7. Propose ways to utilize and embed in higher education course work requirements the Special Quest training materials for inclusive early childhood practices.	FFY 2010	<ul style="list-style-type: none"> ➤ CSPD Committee ➤ National Professional Development Center on Inclusion

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes (use for FFY 2008-2009 reporting):

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

Measurement for Summary Statement 1:

Percent = $\frac{\# \text{ of infants and toddlers reported in progress category (c) plus } \# \text{ of infants and toddlers reported in category (d)}}{[\# \text{ of infants and toddlers reported in progress category (a) plus } \# \text{ of infants and toddlers reported in progress category (b) plus } \# \text{ of infants and toddlers reported in progress category (c) plus } \# \text{ of infants and toddlers reported in progress category (d)}]} \times 100$.

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

Measurement for Summary Statement 2: Percent = $\frac{\# \text{ of infants and toddlers reported in progress category (d) plus } [\# \text{ of infants and toddlers reported in progress category (e) divided by the total } \# \text{ of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] \times 100$.

Overview of Issue/Description of System or Process:

Provision of training and technical assistance supports to administrators and service providers in outcome data collection, reporting, and use

- In FFY07 ODH completed its training of the eighty-eight (88) county Part C programs.
- In FFY08 ODH transitioned its Indicator 3-related data collection to its larger web-based early intervention data system.
- In FFY08 ODH began to provide web-based training resources allowing county Part C programs to refresh employees and/or train new employees to the COSF processes.

Measurement strategies to collect data

- Who are included in the measurement? All infants and toddlers who enter the early intervention system with an IFSP that qualifies for Entry COSF Ratings*

*Children must have an IFSP in place in Ohio's Part C program on/after six (6) months of age, and prior to thirty (30) months of age.

- What assessment / measurement tool(s) and/or other data sources will be used? The child's IFSP team including the child's family will use a variety of data sources to make a determination of the child's performance level. The child's performance will be scored using a seven (7)-point scale included on the adapted COSF originally developed by the Early Childhood Outcome Center.
- What data will be reported to the state, and how will the data be transmitted? Currently, on an ongoing basis, at entry (or IFSP review for children entering under six (6) months of age), each annual IFSP, and exit, local programs complete hardcopy COSFs and submit those to the state.
- What data analysis methods will be used to determine the progress categories? ODH uses the recommended COSF to OSEP Categories Calculator provided by the Early Childhood Outcome Center.
- What criteria will be used to determine whether a child's functioning was "comparable to same aged peers"? ODH has adapted the Early Childhood Outcome Center's definition for "comparable to same-aged peers", a child who has been scored as a six (6) or seven (7) on the seven (7)-point scale included on the COSF.

Quality assurance and monitoring procedures to ensure the accuracy and completeness of the outcome data

- Currently all submitted COSFs to the state are checked for accuracy and completeness, including:
 - Correct child identification information,
 - Appropriate rating dates (i.e., on/after date of IFSP or exit from Part C program),
 - The electronic version of the COSF on Early Track does not allow incomplete or inappropriate (i.e., no IFSP or Exit) ratings to be saved to a child's record,
 - All Outcomes completed, and
 - Progress reported appropriately (i.e., "Yes" or "No" with justification)
 - ODH intends to support county administrators in reviewing random samples of COSFs for quality and completeness (i.e., comparing ratings to supportive evidence), and
 - ODH intends to analyze data summaries to look for discrepancies by county program, service agency, and service coordinator

Baseline Data for FFY 2008 (2008-2009):

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	217	6.1%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	679	19.1%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	449	12.7%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	920	25.9%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1284	36.2%
Total	N=3549	100%

B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	203	5.7%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	654	18.4%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	488	13.8%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	935	26.3%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1269	35.8%
Total	N=3549	100%

C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	202	5.7%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	690	19.4%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	462	13.0%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	932	26.3%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1263	35.6%
Total	N=3549	100%

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Summary Statements	% of children
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60.4
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	62.1
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	62.4
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	62.1
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	60.1
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	61.8

Discussion of Baseline Data:

Entry data are collected based on information gathered through the evaluation/assessment process, including screenings, and through parent feedback and observations of the child in various settings. Entry data is only collected for children who have an IFSP dated on/after six (6) months of age. All programs collecting data for Indicator 3 reporting do so by completing a Child Outcome Summary Form (COSF) which was adapted for use by Ohio's Part C program from the Early Child Outcome Center's form. The COSF uses a seven (7)-point scale with ratings of six (6) and seven (7) being "comparable to same-aged peers."

All COSFs are submitted electronically to Ohio's data system. They are checked for accuracy and completeness, including:

- Correct child identification information,
- Appropriate rating dates (i.e., on/after date of IFSP or exit from Part C program),
- All Outcomes completed, and
- Progress reported appropriately (i.e., "Yes" or "No" with justification)

FFY	Measurable and Rigorous Target
2005 (2005-2006)	n/a
2006 (2006-2007)	n/a

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<p>2007 (2007-2008)</p>	<p>n/a</p>
<p>2008 (2008-2009)</p>	<p>n/a</p>
<p>2009 (2009-2010)</p>	<p>60.0% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome A</u>).</p> <p>60.0% of children who were functioning within age expectations in <u>Outcome A</u> by the time they turned three years of age or exited the program.</p> <p>60.0% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome B</u>).</p> <p>60.0% of children who were functioning within age expectations in <u>Outcome B</u> by the time they turned three years of age or exited the program.</p> <p>60.0% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome C</u>).</p> <p>60.0% of children who were functioning within age expectations in <u>Outcome C</u> by the time they turned three years of age or exited the program.</p>
<p>2010 (2010-2011)</p>	<p>60% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome A</u>).</p> <p>60% of children who were functioning within age expectations in <u>Outcome A</u> by the time they turned three years of age or exited the program.</p> <p>60% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome B</u>).</p> <p>60% of children who were functioning within age expectations in <u>Outcome B</u> by the time they turned three years of age or exited the program.</p> <p>60% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome C</u>).</p> <p>60% of children who were functioning within age expectations in <u>Outcome C</u> by the time they turned three years of age or exited the program.</p>
<p>2011 (2011-2012)</p>	<p>61.5% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome A</u>).</p> <p>61.7% of children who were functioning within age expectations in <u>Outcome A</u> by the</p>

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	time they turned three years of age or exited the program.
	61.5% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome B</u>).
	61.5% of children who were functioning within age expectations in <u>Outcome B</u> by the time they turned three years of age or exited the program.
	61.3% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome C</u>).
	62% of children who were functioning within age expectations in <u>Outcome C</u> by the time they turned three years of age or exited the program.
2012 (2012-2013)	63.1% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in Outcome A).
	63.4% of children who were functioning within age expectations in Outcome A by the time they turned three years of age or exited the program.
	63% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome B</u>).
	63% of children who were functioning within age expectations in <u>Outcome B</u> by the time they turned three years of age or exited the program.
	62.6% of children who substantially increased their rate of growth by the time they turned three years of age or exited the program (of those who entered or existed the program below age expectations in <u>Outcome C</u>).
	63.6% of children who were functioning within age expectations in <u>Outcome C</u> by the time they turned three years of age or exited the program.

Improvement Activities/Timelines/Resources:

Improvement Activities for Indicator 3	Timeline	Resources
1. Quality assurance on data to ensure accuracy & completeness. Support county administrators in reviewing random samples of COSFs for quality & completeness.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ County Administrators ➤ HMG Advisory Council ➤ Evaluation committee
2. Analyze data summaries to look for discrepancies by county, service agency, service coordinator	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ County administrators
3. Analyze outcomes of COSF update to Council and strategize on improvements to education, information, or/and process.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS ➤ Evaluation committee

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.

Overview of Issue/Description of System or Process:

Families have been being made aware of their rights in Part C through the use of a Parent's Rights Brochure required for all families as well as a policy, **Procedural Safeguards** (revised June 2004). Service coordinators are trained on explaining rights to families, as well as documenting that parents have received and understand their rights across several required trainings, including 2-Day Training Institute, IFSP, and Transition.

Discussion of Baseline Data:

Percentage	Indicator
91%	Percent of families participating in Part C who report that early intervention services have helped families know their rights .
91%	Percent of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs .
91%	Percent of families participating in Part C who report that early intervention services have helped families help their children develop and learn .

Calculations:

Know their rights: 1,397 respondent families participating in Part C report that early intervention services helped them know their rights divided by 1,543 respondent families participating in Part C times 100.

Effectively communicate their children's needs: 1,410 respondent families participating in Part C report that early intervention services helped them effectively communicate their children's needs divided by 1,543 respondent families participating in Part C times 100.

Help their children develop and learn: 1,397 respondent families participating in Part C report that early intervention services helped family help their children develop and learn divided by 1,543 respondent families participating in Part C times 100.

Ohio used the three questions from the ECO Family Questionnaire to gather the data for the 3 measurements for this indicator.

1. To what extent has Help Me Grow helped your family know and understand your rights?
2. To what extent has Help Me Grow helped your family effectively communicate your child's needs?
3. To what extent has Help Me Grow helped your family be able to help your child develop and learn?

Each question had a scale of 1 to 7 with the following anchors:

- 1 – Help Me Grow has done a **poor** job of helping us . . .
- 3 – Help Me Grow has done a **fair** job of helping us . . .
- 5 – Help Me Grow has done a **good** job of helping us . . .
- 7 – Help Me Grow has done an **excellent** job of helping us . . .

Based on technical assistance from ECO, Ohio used responses of 5, 6, and 7 for each question to determine what families were helped by Help Me Grow in the three areas of this indicator.

Tool Used to Gather Family Outcomes Data

The Ohio Department of Health used a modified version of the Early Childhood Center's Family Outcome Questionnaire. The following modifications were made:

- Help Me Grow was substituted for Part C throughout the questionnaire as that is how families "know" Part C in Ohio.
- The OSEP questions (i.e., to what extent has Help Me Grow helped your family know and understand your rights?; to what extent has Help Me Grow helped your family effectively communicate your child's needs?; and to what extent has Help Me Grow helped your family be able to help your child develop and learn?) were the first questions on the questionnaire rather than the last questions.
- ODH used most of the other questions on the questionnaire to answer HMG Family Outcomes, but some questions were deleted (see attached HMG Family Outcomes Questionnaire).

Administration of the Questionnaire

The questionnaire and instructions were printed. In the instructions, families were given three options to respond to the questionnaire:

- Complete the hard copy questionnaire and return it to The Ohio Department of Health.
- Complete the questionnaire on the Helpline website. They had to enter their child's Early Track Identification (ETID) number and then could answer the questionnaire.
- Call the HMG Helpline and respond to the questions via phone interview.

Families who did not respond to the questionnaire within 10 business days were called by the Helpline staff. This includes families who returned a written questionnaire that did not have an ETID. The script read by the Helpline staff stated that the family may have already responded to the questionnaire but were asked to take a few minutes to respond over the phone. Families whose ETID was printed on the questionnaire and who returned the questionnaire were not contacted via phone by the Helpline staff.

6,482 Family Questionnaires were mailed to Parents/Caregivers who were randomly selected by county for all 88 counties. Families were randomly selected using the following sampling frame. Data was extracted from Early Track which listed primary parents/caregivers for children who were receiving Part C services during the month of June 2006. That is, they had a Part C eligibility date before June 30, 2006 and if they had an Exit Date it was after June 1, 2006. A total of 11,565 different parents/caregivers fit these criteria. (Note: There are 1,393 fewer parents/caregivers than the 12,598 children described below as there are multiple children with parents and caregivers)

The sample included Parents/Caregivers for children with lengths of stay in Part C ranging from less than 1 month to over 36 months. The sampling was done based on Random Samples selected by SPSS

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based on the requested sample size per county determined by calculating the appropriate sample size for a 95% confidence level with a +/- 5% confidence interval.

Of the 6,482 questionnaires, responses were received for 1,543 families for a response rate of 24%. All 88 counties were represented in the responses to the Family Outcomes questionnaire.

Breakdown of Method Used to Respond

Method of responding	Number	Percentage
Written Questionnaire ¹	313	20.3%
Phone Call (both In/Out)	1156	74.9%
Web Site	74	4.8%
Total	1543	100%

¹ All questionnaires were supposed to have an Early Track Identification (ETID) number printed at the bottom of each page of the questionnaire. The ETIDs are numbers uniquely assigned to each child in Help Me Grow and assisted ODH staff and others identify what families needed follow up phone calls as well to determine the demographic characteristics of the sample responding to the questionnaire. One issue that occurred was that not all questionnaires had an ETID printed on the questionnaires. This resulted in ODH receiving 1,004 questionnaires without an ETID returned. These questionnaires are not included in the analysis since there is no demographic information associated with the results of these returned questionnaires.

The questionnaires that were returned were entered into a database and then imported into SPSS for analysis.

Demographic description of families who received the questionnaire and those who responded

The sample was drawn from all 12,958 Part C eligible children who received HMG Part C services during June 2006 (denoted “entire population” in tables below). The following are the demographic characteristics of the sample:

Table 1 Comparison of Population (of Children), Sample & Respondents by Race						
Race	Entire population (Part C)	Entire population (Part C)	Sample	Sample	Respondent	Respondent
	Number	Percentage	Number	Percentage	Number	Percentage
American Indian or Alaska Native	42	0.33%	23	0.35%	9	0.56%
Asian or Other Pacific Islander	238	1.84%	99	1.53%	26	1.69%
Black or African American	2,712	20.93%	911	14.05%	161	10.45%
White	9,966	76.91%	5,435	83.84%	1,345	87.15%
Total	12,958	100.00%	6,482	100.00	1,543	100.00%

Table 2 Comparison of Population (of Children), Sample & Respondents by Sex						
Sex	Entire population (Part C)	Entire population (Part C)	Sample	Sample	Respondent	Respondent
	Number	Percentage	Number	Percentage	Number	Percentage
Male	7,690	59.35%	3,848	59.36%	917	59.43%
Female	5,266	40.64%	2,633	40.62%	626	40.57%
Total	12,958	100.00%	6,482	100.00%	1,543	100.00%

Table 3						
Comparison of Population (of Children), Sample & Respondents by Age at Eligibility						
Age at Eligibility	Entire population (Part C)	Entire population (Part C)	Sample	Sample	Respondent	Respondent
	Number	Percentage	Number	Percentage	Number	Percentage
< 1 years old	7,206	55.61%	3,553	54.81%	857	55.54%
1 to 2 years old	3,714	28.66%	1,853	28.59%	427	27.67%
2 to 3 years old	2,036	15.71%	1,076	16.60%	259	16.79%
Other	2	0.02%	0	0.00%	0	0.00%
Total	12,958	100.00%	6,482	100.00%	1,543	100.00%

Table 4						
Comparison of Population (of Children), Sample & Respondents by Reason for Part C Eligibility						
Reasons for Part C Eligibility	Entire population (Part C)	Entire population (Part C)	Sample	Sample	Respondent	Respondent
	Number	Percentage	Number	Percentage	Number	Percentage
Developmental Delay	7,260	56.0%	3,553	54.8%	834	54.1%
Diagnosed Physical or Mental Condition	3,608	27.8%	1,924	29.7%	468	30.3%
Both a developmental delay & diagnosed Physical or Mental Condition	1,732	13.4%	796	12.3%	199	12.9%
Not Reported	358	2.8%	209	3.2%	42	2.7%
Total	12,958	100.0%	6,482	100.0%	1,543	100.0%

Table 5						
Comparison of Population (of Children), Sample & Respondents by County Size						
County Size	Entire population (Part C)	Entire population (Part C)	Sample	Sample	Respondent	Respondent
	Number	Percentage	Number	Percentage	Number	Percentage
250,000+	6,883	53.1%	2,133	32.9%	460	29.8%
100,000 – 250,000	2,709	20.9%	1,729	26.7%	449	29.1%
50,000 – 100,000	1,575	12.2%	1,185	18.3%	283	18.3%
10,000 – 50,000	1,791	13.8%	1,435	22.1%	351	22.8%
Total	12,958	100.0%	6,482	100.0%	1,543	100.0%

Analysis of Representativeness of Sample

The overall representativeness of the identified respondents correlates to the demographic profile of the sampled parents/caregivers to whom questionnaire responses were solicited. However, there was a noted discrepancy in the race breakdown of the entire population of children from which parents/caregivers were identified for the sampling frame, and the sample itself. It is believed that this discrepancy (most notably the decrease of representativeness of parents/caregivers to ‘Black or African American’ children, and the increase of representativeness of parents/caregivers to ‘White’ children) is a result of the sampling method.

An appropriate sample size was determined for each county based on the number of parents/caregivers which would yield results from the questionnaire that would meet a 95% confidence level (+/- 5%). Using

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this strategy, counties with smaller total populations of children had a higher percentage included in the sample, and intuitively counties with larger total populations of children had a lower percentage.

This led to over 90% of parents/caregivers being sampled in 25 of Ohio’s smaller counties. In these 25 counties, the average percentage of non-White race children was 7%. In comparison, the sampling strategy led to less than 50% of parents/caregivers being sampled in 7 of Ohio’s larger counties. In these 7 counties, the average percentage of non-White race children was 41%. Therefore there was a smaller proportion of parents/caregivers of non-White race children selected due to the difference of their residence in larger counties (which yielded smaller overall sample sizes).

FFY	Measurable and Rigorous Target
2005 (2005-2006)	New indicator; targets will be established once baseline data are available.
2006 (2006-2007)	A. 91% of families participating in Part C who report that early intervention services have helped families know their rights . B. 91% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs . C. 91% of families participating in Part C who report that early intervention services have helped families help their children develop and learn .
2007 (2007-2008)	A. 92% of families participating in Part C who report that early intervention services have helped families know their rights . B. 92% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs . C. 92% of families participating in Part C who report that early intervention services have helped families help their children develop and learn .
2008 (2008-2009)	A. 92% of families participating in Part C who report that early intervention services have helped families know their rights . B. 92% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs . C. 92% of families participating in Part C who report that early intervention services have helped families help their children develop and learn .
2009 (2009-2010)	A. 93% of families participating in Part C who report that early intervention services have helped families know their rights . B. 93% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs . C. 93% of families participating in Part C who report that early intervention services have helped families help their children develop and learn .
2010 (2010-2011)	A. 93% of families participating in Part C who report that early intervention services have helped families know their rights . B. 93% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs . C. 93% of families participating in Part C who report that early intervention services

	have helped families help their children develop and learn.
2011 (2011-2012)	<p>A. 93% of families participating in Part C who report that early intervention services have helped families know their rights.</p> <p>B. 93% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs.</p> <p>C. 93% of families participating in Part C who report that early intervention services have helped families help their children develop and learn.</p>
2012 (2012-2013)	<p>A. 93% of families participating in Part C who report that early intervention services have helped families know their rights.</p> <p>B. 93% of families participating in Part C who report that early intervention services have helped families effectively communicate their children's needs.</p> <p>C. 93% of families participating in Part C who report that early intervention services have helped families help their children develop and learn.</p>

Sampling Plan

The Ohio Department of Health will gather data on the Family Outcomes from all 88 counties in Ohio. A random representative sample will be determined for each county. Families who received Part C services during a specified month will be asked to complete a survey. An appropriate sample size will be determined for each county based on the number of parents/caregivers which would yield results from the questionnaire that would meet a 95% confidence level (+/- 5%). An additional step will be taken to ensure that the sample for each county is representative of the county as well of the State of Ohio. All Part C children will be a part of the sample regardless of the length of stay so the Ohio can examine if differences exist between those with a longer length of stay from those with a shorter length of stay.

Beginning in 2007, The Ohio Department of Health changed the methodology with which family outcomes data was collected. It was determined that a census approach with a length of stay requirement would be used, where a point-in-time extract is selected in accordance with a six- or nine-month lapse between the child count data and administration of the questionnaire. This method was selected in order to limit the respondent pool to those families who have had at least one IFSP review and therefore have a complete perspective on what is provided to families through Help Me Grow. ODH took additional steps to assure the response is representative, where questionnaires have been translated into Spanish and distributed to families where Spanish is identified as the primary language in the data system. Local programs were asked to take any measures to accommodate families whose primary language is neither English nor Spanish. During the 2007, '08 and '09 administration, ODH also conducted a series of calls to families whose demographic profile indicated that they are at risk for being underrepresented in our response pool with the thought of encouraging their participation in the survey. In 2010, that practice was discontinued due to it yielding minimal direct response.

Future Administration of the Family Outcomes Questionnaire

In the Summer of 2006 information was gathered from HMG families (Part C and At Risk) regarding the best way to administer the Family Outcomes Questionnaire. This information gathering process was conducted by staff at Kent State University and the Family Child Learning Center in Tallmadge, Ohio. Families from three counties in Ohio (Columbiana, Summit and Trumbull) received a packet that included the Family Outcome Questionnaire and a fact Finding Questionnaire. The intent of the fact Finding Questionnaire was to understand families' opinions regarding the ECO Family Outcomes Questionnaire. The responses of this inquiry were presented to the HMG Evaluation Committee in October 2006.

Among other questions, families were asked:

- Whom would they like to receive the questionnaire from?
- How would they like to complete the questionnaire?
- How would they like to return the questionnaire in the future?

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- To whom would they like to return the questionnaire in the future?

For future sampling of parents/caregivers to receive the Family Outcomes Questionnaire, Ohio intends to proportionally represent the race of children within each county after the appropriate sample size is determined (using the procedure currently in place).

The HMG Evaluation Committee will further discuss these findings to make recommendations on how this Family Outcomes Questionnaire should be disseminated for future data gathering.

ODH and the HMG Evaluation Committee has since determined that the manner of distribution most effective for yielding a high response rate has involved service coordinators hand-delivering questionnaires to families and providing families multiple options for completion and return of the questionnaire. Options for completion and return include: filling out a paper questionnaire and mailing using a postage-paid envelope included with the questionnaire, calling an 800-number and responding to the questionnaire verbally, receiving a phone call in which the family is asked to complete the questionnaire verbally over the phone, and completing the questionnaire over the Internet. While alternative response methods have been increasing since 2007, the most common method used is the paper questionnaire being mailed directly to ODH.

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 4	Timeline	Resources
1. Creation of an educational seminar series for families which will target parent's rights, parent involvement in decisions for services, and parent advocacy which will be delivered both in person and online.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS ➤ Family Information Network ➤ Family Engagement committee of the Ohio Family and Children First Council
2. Review survey data annually & process for distribution to determine areas for continuous improvement.	Annually & ongoing	<ul style="list-style-type: none"> ➤ HMG Evaluation committee ➤ BEIS staff
3. Revise Parents Rights brochure.	FFY 10	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee ➤ BEIS staff
4. Propose a training plan for the service delivery practices identified to enhance providers understanding of family centered relationships and strength based approaches to early intervention service delivery to include strategies for listening to families and planning interventions based on conversations about what is already being done, parents serve as faculty along with other trainers.	FFY 10 and FFY11	<ul style="list-style-type: none"> ➤ Service Delivery Committee
5. Revise Family Support expectations/Rule/activities and propose ways to implement the Part C review recommendation to assure the availability of family-to-family support statewide in a cost neutral manner.	FFY11	<ul style="list-style-type: none"> ➤ Service Delivery Committee

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

The **Child Find** (August 2009) policy supports the identification of infants and toddlers birth to one year of age through the following statement: “The ODH establishes and maintains a coordinated and comprehensive child find system for children birth to three, to ensure that all infants and toddlers in the state, who are eligible for Help Me Grow, are identified, assessed and receive the services that they need.” Additionally, all local EI programs must “reduce the need for future services by implementing rigorous standards for appropriately identifying infants and toddlers with developmental delay, disabilities or diagnosed medical conditions that could result in significant developmental delays if early intervention services were not provided.” Ohio’s Hospital-Based Child Find program funds nurses and social workers in Children’s Hospitals, level 3 nurseries and tertiary care centers across the state to help identify infants and toddlers early who may be eligible for Help Me Grow Early Intervention services.

Ohio implemented Universal Newborn Hearing Screening (UNHS) in July 2004. All newborns born in a hospital or freestanding birthing center receive a physiologic hearing screening prior to hospital discharge. If the infant does not pass the hearing screening they are referred to the Regional Infant Hearing Program (RIHP) to assist the family with obtaining follow-up diagnostic hearing testing. If the child is diagnosed with a hearing loss, the RIHP refers the family to Help Me Grow and offers specialized habilitative services for the infant or toddler with hearing loss as well as the family. The nine RIHP programs cover all 88 Ohio counties, and are partially funded by federal Part C dollars. The Infant Hearing Program (overseeing UNHS compliance in Ohio), the RIHP and the Help Me Grow program are all housed in the Bureau of Early Intervention Services and are under the supervision of the Part C Coordinator, assuring the connection between the programs.

Baseline Data for FFY 2004 (2004-2005):

Year	2002	2003	2004
# <1 with IFSP	1,079	1,218	1,387
Percentage	0.74%	0.82%	0.94%

Discussion of Baseline Data:

The data for this indicator was captured via the Early Track (ET) data collection system per the 618 child count data report. It should be noted the 2002 – 2004 data reported here was run on August 29, 2005 and may differ from original 618 data submissions because Early Track is a “live” data system.

The percentages were calculated by dividing the number of infants and toddlers birth to one year with IFSPs for that year by the estimated population of infants and toddlers birth to one year (source: Table 8.3, Number, Percentage, and Difference National Baseline of Infants and Toddlers receiving Early Intervention Services, www.IDEAdata.org).

Comparing Ohio to States with Similar Eligibility Definitions:

Ohio’s eligibility definition is considered broad. When comparing Ohio to other states in this category, Ohio ranks 15 out of 27 with the percent served at 0.94%.

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Comparing Ohio to National Data:

When looking at all states and territories regardless of eligibility category, using the number published in Table 8.3a (7,991 or 1.83%), Ohio ranks 25th (out of 56). The Ohio ranking is above the national baseline of 0.92%.

Trend data reflect an increase in the number of children served birth to one with an IFSP.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	1.0% of infants and toddlers birth to age one year will have IFSPs.
2006 (2006-2007)	1.1% of infants and toddlers birth to age one year will have IFSPs.
2007 (2007-2008)	1.2% of infants and toddlers birth to age one year will have IFSPs.
2008 (2008-2009)	1.3% of infants and toddlers birth to age one year will have IFSPs.
2009 (2009-2010)	1.4% of infants and toddlers birth to age one year will have IFSPs.
2010 (2010-2011)	1.5% of infants and toddlers birth to age one year will have IFSPs.
2011 (2011-2012)	1.5% of infants and toddlers birth to age one year will have IFSPs.
2012 (2012-2013)	1.6% of infants and toddlers birth to age one year will have IFSPs.

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicators 5 and 6	Timeline	Resources
<p>1. Develop a statewide marketing plan in order to increase referrals to Help Me Grow; increase collaboration and coordination of the child find initiative; propose strategies to improve public awareness about child development and the need for early intervention and how to make a referral or obtain services, targeting but not limited to:</p> <p style="padding-left: 40px;">a. Parents and the general public;</p>	FFY 10 and FFY 11	<ul style="list-style-type: none"> ➤ Help Me Grow 800-number ➤ BEIS Data and Training Staff ➤ ODH Public Relations ➤ County Help Me Grow Outreach ➤ Public Awareness/Child Find Committee ➤ BEIS Management ➤ County HMG Outreach ➤ ODE, Ohio Head Start Association ➤ Ohio AAP and ODH BCMH

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<ul style="list-style-type: none"> b. Birthing hospitals; c. Hospitals with NICU and/or PICU, level III hospitals; d. Physicians, clinics, WIC; e. Job and Family Services (JFS), Child Welfare agencies; f. The Hospital-Based Child-Find Program; g. Childcare providers; h. Childcare resource and referral agencies; and i. Agencies representing homeless families. j. OFCF k. AAP l. OIMRI m. Childcare n. BCMH o. Early Head Start p. Head Start q. Other child-find agencies 		
<p>2. Implement specific training on typical and atypical development of infants and toddlers to Help Me Grow staff to increase the referral of infants.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ BEIS Training Staff
<p>3. Propose strategies to improve public awareness about child development the need for early intervention how to make a referral or obtain services.</p>	<p>FFY 10</p>	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
<p>4. Propose ways to involve county-level representatives in identifying key messages and communications strategies</p>	<p>FFY 10</p>	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
<p>5. Propose revisions to HMG website for parents section.</p>	<p>FFY 10</p>	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

Help Me Grow is known statewide as Ohio’s birth to three program. Our public awareness efforts through the Help Me Grow website and helpline (1-800-755-GROW) have increased awareness of the program and referrals for information and services.

The **Child Find** (August 2009) policy supports the identification of infants and toddlers birth to three years of age through the following statement: “The Family and Children First Council (FCFC) in each county shall assure: The implementation of a comprehensive local child find system that (1) includes referrals to county central intake and referral sites with timelines for contacting families, service coordinator assignment and referral follow-up status, (2) provides outreach education to encourage participation by physicians and other primary referral sources, (3) analyzes data from early Track and IFSP information, to determine when children and families are receiving services that they need, and (4) evaluates the effectiveness of child find efforts.”

Ohio also has an Interagency Agreement with the Ohio Departments of Education, Job and Family Services and Developmental Disabilities for child find and other program efforts.

Through Help Me Grow, infants and toddlers who are victims of abuse and/or neglect receive both a development and a social-emotional development screening. If a child is identified with a suspected delay through the screening process, he is referred for an evaluation to determine eligibility for early intervention services.

Baseline Data for FFY 2004 (2004-2005):

Year	2002	2003	2004
# <3 with IFSP Target	6,793	7,680	9,324
Percentage	1.46%	1.79%	2.14%

Discussion of Baseline Data:

The data for this indicator were captured via the Early Track (ET) data collection system per the 618 child count data report. It should be noted the 2002 – 2004 data reported here was run on August 29, 2005 and may differ from original 618 data submissions because Early Track is a “live” data system.

The percentages were calculated by dividing the number of infants and toddlers birth to three with IFSPs for that year by the estimated population of infants and toddlers birth to one (source: Table 8.3, Number, Percentage, and Difference National Baseline of Infants and Toddlers receiving Early Intervention Services, www.IDEAdata.org).

Comparing Ohio to States with Similar Eligibility Definitions

Ohio’s eligibility definition is considered broad. When comparing Ohio to other states in this category, Ohio ranks 19 out of 27 using the number reported in Table 8.3a (7,991 or 1.83%). When using the updated number of infants and toddlers with an IFSP in 2004 of 9324, Ohio’s percent served increases to 2.14% which increases Ohio’s ranking to 16th.

Comparing Ohio to National Data

Using the number published in Table 8.3a (7,991 or 1.83%), Ohio ranks 34th (out of 56). When using the updated number for 2004 (9324 or 2.14%), Ohio’s ranking increases to 28th. The Ohio ranking is below the national baseline of 2.30%.

Trend data shows a steady increase in the number of children served, which can be attributed to an increased awareness of counties regarding the importance of serving an appropriate number of Part C eligible children. Additionally, the increase may be due to various child find/public awareness activities such distribution of the HMG Wellness Guide, HMG Child Development Wheels, and continued usage of the HMG Helpline.

Ohio’s revised Early Track 3.0 data collection system includes the ability to capture more child specific demographic data on diagnosed physical and mental conditions as well as the specific areas of delay. This information now informs various child-find and public awareness efforts throughout the state.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	2.2% of infants and toddlers birth to age three years will have IFSPs.
2006 (2006-2007)	2.4% of infants and toddlers birth to age three years will have IFSPs.
2007 (2007-2008)	2.6% of infants and toddlers birth to age three years will have IFSPs.
2008 (2008-2009)	2.8% of infants and toddlers birth to age three years will have IFSPs.
2009 (2009-2010)	2.9% of infants and toddlers birth to age three years will have IFSPs.
2010 (2010-2011)	3.0% of infants and toddlers birth to age three years will have IFSPs.
2011 (2011-2012)	3.0% of infants and toddlers birth to age three years will have IFSPs.
2012 (2012-2013)	3.1% of infants and toddlers birth to age three years will have IFSPs.

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Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicators 5 and 6	Timeline	Resources
<p>1. Develop a statewide marketing plan in order to increase referrals to Help Me Grow; increase collaboration and coordination of the child find initiative; propose strategies to improve public awareness about child development and the need for early intervention and how to make a referral or obtain services, targeting but not limited to:</p> <ul style="list-style-type: none"> a. Parents and the general public; b. Birthing hospitals; c. Hospitals with NICU and/or PICU, level III hospitals; d. Physicians, clinics, WIC; e. Job and Family Services (JFS), Child Welfare agencies; f. The Hospital-Based Child-Find Program; g. Childcare providers; h. Childcare resource and referral agencies; and i. Agencies representing homeless families. j. OFCF k. AAP l. OIMRI m. Childcare n. BCMH o. Early Head Start p. Head Start q. Other child-find agencies 	<p>FFY 10 and FFY 11</p>	<ul style="list-style-type: none"> ➤ Help Me Grow 800-number ➤ BEIS Data and Training Staff ➤ ODH Public Relations ➤ County Help Me Grow Outreach ➤ Public Awareness/Child Find Committee ➤ BEIS Management ➤ County HMG Outreach ➤ ODE, Ohio Head Start Association ➤ Ohio AAP and ODH BCMH
<p>2. Implement specific training on typical and atypical development of infants and toddlers to Help Me Grow staff to increase the referral of infants.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ BEIS Training Staff
<p>3. Propose strategies to improve public awareness about child development the need for early intervention how to make a referral or obtain services.</p>	<p>FFY 10</p>	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee
<p>4. Propose ways to involve county-level representatives in identifying key messages and communications</p>	<p>FFY 10</p>	<ul style="list-style-type: none"> ➤ Public Awareness/Child Find Committee

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State

strategies		
5. Propose revisions to HMG website for parents section.	FFY 10	➤ Public Awareness/Child Find Committee

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

Overview of Issue/Description of System or Process:

A newly revised policy, **Part C Eligibility Determination** (7 - 2010) states that "All procedures (2) through (4) must be completed within 45 calendar days from child find referral." Procedure (2) outlines how to confirm Part C eligibility for children with a diagnosed physical or mental condition which has a high probability of resulting in a developmental delay; Procedure (3) outlines how to confirm Part C eligibility for all infants and toddlers under three years of age with a suspected developmental delay; and Procedure (4) outlines additional criteria for procedures (2) and (3).

The **Help Me Grow Individualized Family Service Plan** (8 – 2009) additionally supports this indicator with the following statement: "Every family that is eligible and provides consent for ongoing Help Me Grow services shall receive services guided by the Individualized Family Service Plan. The IFSP shall be developed and signed by parents and other team members with 45 calendar days of the initial referral."

The current procedure for determining eligibility requires that "All infants and toddlers with a suspected developmental delay under three years of age at the time of child find referral following the completion of an evaluation tool... [that] identifies at least one developmental delay of 1.5 standard deviations below the mean or the individuals who administered the evaluation tool identify a delay and support the need for Help Me Grow Part C services using informed clinical opinion." Every child who is suspected of having a developmental delay must receive a developmental evaluation using either the Battelle Developmental Inventory-2 or the Bayley Scales of Infant Development-III to determine eligibility for Part C. Both tools measure cognitive, communication, social or emotional, adaptive, and physical development.

The developmental evaluation must be conducted by a team of at least two qualified personnel from two different disciplines, with one of these individuals having expertise in the area of suspected delay. The personnel must hold the appropriate state license or certification (**Help Me Grow Personnel Standards** policy, Attachment D (7 – 2010)). Vision, hearing and nutrition screenings must also be completed for all children suspected of having a developmental delay as part of the developmental evaluation process and children who have a diagnosed physical or mental condition. Screenings must be completed by qualified personnel; and if a concern is noted during these screenings, with parental permission, the child must be referred to the medical home (child's primary health care provider) for a referral to the appropriate qualified professional for a vision, hearing or nutrition diagnostic evaluation that will be provided at no cost to the family.

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Baseline Data for FFY 2004 (2004-2005) [revised per OSEP with Compliance Agreement data]:

This indicator was included in the (now completed) Compliance Agreement. Ohio used monitoring data from its web-based data system to determine its percent compliance for this indicator. All children who became Part C eligible during the July 1, 2006 to December 31, 2006 records were examined electronically. Initial evaluations and IFSP meetings were due to be held in FFY06 for 3736 children and of those 2757 or 74% were held within 45 days of referral.

Discussion of Baseline Data:

The 2757 records counted as being within 45 days includes 704 that were late due to documented extraordinary family circumstances.

The 979 records that were more than 45 days from referral were delayed for varying requirements (e.g., screenings, evaluations, IFSP) and reasons. A total of 1644 requirements were delayed for the 979 records for the following reasons:

- data errors = 30%
- insufficient documentation = 17%
- local staff oversight = 27%
- insufficient hearing screening slots = 11%
- insufficient evaluation slots = 4%
- no reason provided = 12%

*The above calculations examined the total number of "non-compliant" requirements, and then calculated the proportion of each Non-Compliance Reason within the "non-compliant" Non-Compliance Reasons submitted by counties

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within the Part C 45-day timeline.
2006 (2006-2007)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.
2007 (2007-2008)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.
2008 (2008-2009)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.
2009 (2009-2010)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.
2010 (2010-2011)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.
2011 (2011-2012)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.
2012 (2012-2013)	100% of eligible infants and toddlers with IFSPs will receive an evaluation and assessment and an initial IFSP meeting within Part C's 45-day timeline.

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Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 7	Timeline	Resources
1. Continue to monitor this indicator via ODH's web-based data system, Early Track, and on site focused monitoring visits.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS data and monitoring teams ➤ State partners ➤ Local partners
2. ODH will provide technical assistance to counties who are identified with noncompliance in this area.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS Technical Assistance team ➤ State partners
3. Examine barriers identified by counties in not meeting developmental evaluations and/or not completing IFSPs within 45 days.	Ongoing	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ Service Delivery Committee ➤ BEIS staff
4. Identify members from the Service Delivery Committee who would participate on a work group (e.g. Help Me Grow Advisory Council committee including family members) that makes recommendations on assessment for program planning process including researching approaches and tools.	FFY 2011 and FFY 2012	<ul style="list-style-type: none"> ➤ Service Delivery Committee

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

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

Measurement:

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

Account for untimely transition conferences, including reasons for delays.

Overview of Issue/Description of System or Process:

The **Help Me Grow Transition at Age Three** policy (8 – 2009) states that “Every family with a child receiving ongoing Help Me Grow (HMG) services will experience support and information specific to the transition of their child at age 3 years.”

The required procedures state that “Every child exiting the HMG system at age three years shall have at least one written transition outcome as a part of the Individualized Family Service Plan. The transition outcome shall identify the goal(s) for the child and family and the steps to be taken to support the transition of the child. The transition outcome(s) and the Transition Checklist shall identify the (1) discussions with, and training of parents regarding future placements, and (2) procedures to prepare the child for changes in the service delivery, including steps to help the child adjust to and function in a new setting.”

Each Family and Children First Council (FCFC) is required to run a report quarterly and provide the names, addresses, birth date parent(s) names and telephone numbers for children with developmental delays or disabilities eligible for Part C services, who have an IFSP, and will be turning three years old within the next twelve months to the local education agency (LEA) within ten calendar days of running the report.

The policy further requires the following transition timelines:

- a. Parents shall be informed at the IFSP meeting closest to when their child is turning eighteen months of age that their information will be shared with the LEA unless they parent(s) indicates on the IFSP signature page that the information should not be shared;
- b. The transition planning conference shall be held at least 90 calendar days, but not more than 9 months prior to the child's 3rd birthday for all children in HMG Part C.
- c. For a child receiving Part C services who is suspected of having a disability as defined by Part B of IDEA, an LEA representative shall be invited to the TPC, with parent consent.

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The **Help Me Grow Transition at Age Three** policy (8 – 2009) policy also requires the development of an Interagency Agreement between each Family and Children First Council, LEA in the county, each Head Start program, and County Board of Developmental Disabilities program in the county for the purpose of outlining responsibilities, processes, and protocols for child find and transitioning children from Part C to the LEA's, other programs or options.

A. IFSPs with transition steps and services	Number of children	% of children
a. Children exiting Part C whom have an IFSP with transition steps and services	788	94%
b. Children exiting Part C whom do not have an IFSP with transition steps and services	50	6%
TOTAL	838	100%

B. Notification to the LEA, if child potentially eligible for Part B	Number of children	% of children
a. Children exiting Part C and potentially eligible for Part B for whom notification to the LEA occurred	4106	97%
b. Children exiting Part C and potentially eligible for Part B for whom notification to the LEA did not occur	106	3%
TOTAL	4212	100%

C. Transition conference, if child potentially eligible for Part B	Number of children	% of children
a. Children exiting Part C and potentially eligible for Part B where the transition conference occurred	1464	89%
b. Children exiting Part C and potentially eligible for Part B where the transition conference did not occur	175	11%
TOTAL	1639	100%

Discussion of Baseline Data:

The data listed above is updated Transition data per the request of OSEP for ODH to update its SPP with the baseline data reported in Compliance Agreement reports last submitted to OSEP.

Data for Indicator 8A (IFSPs with transition steps and services) was gather via a self-assessment submitted by all 88 HMG county programs. Counties had to report children selected by OPDH as to whether or not the child's IFSP included transition steps and services for children who had a Transition Planning Conference between July 1, 2006 and June 30, 2007. ODH verified the data reported by the counties by comparing the child's record with the report by the county to ensure accurate data.

Data for Indicator 8B (Notification to the LEA, if child potentially eligible for Part B) was gather via a self-assessment submitted by all 88 HMG county programs. A list of all Part C children who would be turning three between February 1, 2006 and January 31, 2008 and are therefore potentially eligible for Part B is generated through a report on Early Track, the web-based data system. Local programs reported back to ODH whether all reports were submitted in a timely manner. Documentation to verify that reports were sent to LEAs in a timely manner was requested by ODH.

Data for Indicator 8C (Transition conference, if child potentially eligible for Part B) was gathered via ODH's web-based data system, Early Track to determine percent compliance for this indicator. All children receiving services and Part C eligible who were due to turn three years of age during the

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December 30, 2007 to March 30, 2008 timeframe were examined electronically. Records were then verified to ensure accurate reporting.

FFY	Measurable and Rigorous Target
<p>2005 (2005-2006)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>
<p>2006 (2006-2007)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>
<p>2007 (2007-2008)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>
<p>2008 (2008-2009)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>
<p>2009 (2009-2010)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>
<p>2010 (2010-2011)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>
<p>2011 (2011-2012)</p>	<p>A. 100% of children exiting Part C have an IFSP with transition steps and services</p> <p>B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred</p> <p>C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred</p>

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2012 (2012-2013)	A. 100% of children exiting Part C have an IFSP with transition steps and services B. 100% of children exiting Part C and potentially eligible for Part B in which notification to the LEA occurred C. 100% of children exiting Part C and potentially eligible for Part B in which the transition conference occurred
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Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 8	Timeline	Resources
1. Establish a mechanism to develop a shared database to identify the number of children transitioning from Part C services to Part B services and documents the transition process across systems.	FFY 2011	<ul style="list-style-type: none"> ➤ BEIS staff ➤ ODE, possible contract with external entity
2. Provide information for families that support transition activities.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ ODE ➤ HMG Advisory Council ➤ Transition Committee
3. Continue to monitor this indicator via ODH's web-based data system, Early Track, and on site focused monitoring visits.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS data and monitoring teams ➤ State partners
4. Develop a model framework and guidance for the creation of local and state interagency agreements that address the specifics needed to ensure smooth and timely transitions for eligible children and families moving from Part C to Part B services.	FFY 11	<ul style="list-style-type: none"> ➤ ODH, ODE, ➤ HMG Advisory Council ➤ Transition Committee
5. ODH will provide technical assistance to counties who are identified with noncompliance in this area.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS Technical Assistance staff ➤ State partners
6. Update the <i>Transition—What is It?</i> brochure for parents.	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee
7. Examine the Transition documents available from NECTAC and other states.	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee
8. Provide recommendations for informing and educating service coordinators on writing transition outcome(s) on IFSPs.	FFY 10	<ul style="list-style-type: none"> ➤ Transition Committee
9. Create updated guidance and support on developing local interagency agreements (IAA) using the already developed IAA framework, between HMG, LEA, CBDD, HS, EHS.	FFY 11 and ongoing	<ul style="list-style-type: none"> ➤ Transition Committee
10. Monitor progress on implementation of the student	FFY 10 and ongoing	<ul style="list-style-type: none"> ➤ Transition Committee

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identifier (SSID) between ODH & ODE for opportunities for committee response.		
11. Create a training document which outlines how Family Support Specialists can help families in and through transition.	FFY 10	<ul style="list-style-type: none">➤ Transition Committee➤ Family Information Network

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).

Overview of Issue/Description of System or Process:

In 2007, ODH in conjunction with a group of stakeholders developed a revised model for its General Supervision system. With this revision, ODH developed a multi-pronged approach to its monitoring process which includes using:

- our web-based data system, Early Track, to electronically monitor specific indicators,
- annual self-assessment with which counties report on other monitoring indicators for children specified by ODH,
- focused on site visits for counties who appear to be struggling the greatest with specified areas of concern,
- targeted technical assistance to counties in areas of concern as indicated by the data,
- sanctions that include:
 - a. requiring counties to create corrective action plans that specify what strategies they will implement to make correction, monthly reporting of data until correction has been achieved
 - b. placing special conditions on grants for counties who fail to correct such that ODH will direct the use of funds to address the area of continued noncompliance.

Counties that consistently demonstrate non compliance may lose “flexibility” related to their grant funds. In the ODH grant process “flexibility” is granted to sub-grantee agencies that have consistently followed federal, state and ODH rules and regulations. The Sub-grantee Flexibility Policy reduces some of the administrative burdens associated with project budget revisions. Internally, the policy has allowed program consultants to focus on providing technical assistance and increase monitoring. Special conditions may also be attached to a grant application if the sub-grantee does not indicate an understanding of the expectations for the Part C Request for Proposal (RFP). The sub-grantee has thirty (30) days from receipt of their first payment in which to respond. If they do not respond, the second payment is held until the condition is removed by the program or grants consultant.

The Ohio Administrative Code rule 3701-8-07, states “(F) The director may withhold funds to a county if:

1. The county FCFC receives the director's finding of noncompliance and fails to submit a plan of continuous improvement or fails to come into compliance in accordance with the plan of continuous improvement; or
2. The county FCFC does not cooperate with the director or review team during a review.

The director's finding of non-compliance and decision to withhold funds is final and is not subject to appeal.”

Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.)

Upon receipt of a written complaint, the process for resolution of the complaint begins as outlined in the Ohio Dispute Resolution Protocol. Complaint information is reviewed by assigned Investigative Team leader and ODH Legal counsel. Investigation, mediation or administrative hearing is held, determined by family’s request. If non-compliance is substantiated, a report confirms the findings, and a Corrective Action Plan (CAP) is submitted by the county. Corrective action is supported by technical assistance from ODH staff with assurance of correction within one year of the complaint being identified. Complaint data and findings are further used to identify training and technical assistance needs.

Baseline Data for FFY 2009 (2009-2010):

Indicator 9 baseline data reflects correction of findings issued between July 1, 2008 and June 30, 2009 (due to be corrected between July 1, 2009 and June 30, 2010). The baseline data is reflective of the current fiscal year because Indicator 9 was among those included in Ohio’s compliance agreement with the US Department of Education and as such, these data reflect the first available data for this indicator.

Correction of FFY 2008 Findings of Noncompliance Timely Corrected (corrected within one year from identification of the noncompliance):	
1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2008 through June 30, 2009) (Sum of Column a on the Indicator C 9 Worksheet)	105
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	99
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	6

Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):	
1. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	6
2. Number of findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	3
3. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	3

Discussion of Baseline Data:

For most methods (statewide analysis of information from the data system) of monitoring local programs’ compliance and performance, data from all 88 local programs are analyzed. For Indicator 8A, 45 of Ohio’s 88 counties were analyzed via self-assessment. For focused monitoring, Ohio selects counties based on whether counties are experiencing continuing noncompliance (or whether they fail to meet targets for two consecutive years or longer).

For the 101 EIS findings determined to have been corrected in a timely manner, ODH verified that each program was correctly implementing the specific regulatory requirements for this Indicator as a

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result of completing the required actions placed upon them. These verification processes were in response to more recent data indicating compliance and the correction of each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program, or the completion of any/all required actions, albeit late, for each individual case of noncompliance from FFY2008 for children who were still in the corresponding EIS program as appropriate.

For the 6 findings for which EIS programs did not demonstrate timely correction of noncompliance, Ohio will monitor in a manner consistent with OSEP Memorandum 09-02, and will similarly verify correction of noncompliance. Subsequently, 1 of the EIS programs had more recent data indicate the program was correctly implementing the specific regulatory requirements for the Indicator.

FFY	Measurable and Rigorous Target
<p>2005 (2005-2006)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>
<p>2006 (2006-2007)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>
<p>2007 (2007-2008)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>
<p>2008 (2008-2009)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>
<p>2009 (2009-2010)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>

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<p>2010 (2010-2011)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>
<p>2011 (2011-2012)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>
<p>2012 (2012-2013)</p>	<p>A. 100% of noncompliance related to monitoring priority areas and indicators corrected within one year of identification</p> <p>B. 100% of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification</p> <p>C. 100%of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification</p>

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 9	Timeline	Resources
1. Develop process for progressive sanctioning and/or incentives for non-correctors of non-compliance.	Ongoing	<ul style="list-style-type: none"> ➤ HMG Advisory Council ➤ BEIS staff
2. Review complaint information (e.g., mediations, due process hearing, investigations) to determine areas of non-compliance and identify trends.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff
3. Review and monitor county corrective action plans to assure correction of noncompliance areas within one year of identification of complaints.	Within one year of complaint	<ul style="list-style-type: none"> ➤ BEIS staff
4. Provide technical assistance or training as needed to assure correction of noncompliance.	As outlined in corrective action plan	<ul style="list-style-type: none"> ➤ BEIS staff ➤ State partners
5. Notify Director of Health of continued noncompliance, in order to impose sanctions as appropriate.	As needed for any complaints with noncompliance	<ul style="list-style-type: none"> ➤ BEIS staff
6. Assist ODH in its efforts to develop the monitoring process for Part C service delivery.	FFY 12	<ul style="list-style-type: none"> ➤ Service Delivery Committee ➤ Evaluation Committee

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.

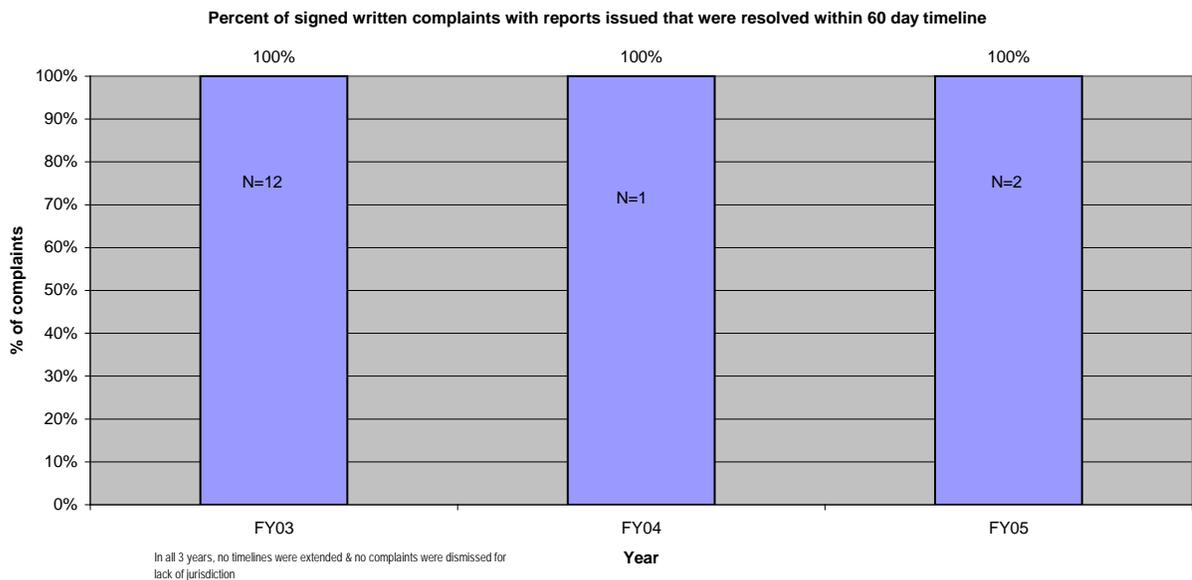
Overview of Issue/Description of System or Process:

Upon receipt of a written complaint, the process for resolution of the complaint begins as outlined in the Ohio Dispute Resolution Protocol. Complaint information is reviewed by assigned Investigative Team leader and ODH Legal counsel. Investigation, mediation or administrative hearing is held, determined by family’s request. If non-compliance is substantiated, a report confirms the findings, and a Corrective Action Plan (CAP) is submitted by the county. Corrective action is supported by technical assistance from ODH staff with assurance of correction within one year of the complaint being identified.

ODH, in partnership with state and local partners, has developed a Parent’s Rights brochure that is given to each family upon enrollment in the Help Me Grow program. Families are asked to sign and date the IFSP assurance statement that they have received and understand their rights. Training for parents on their rights is also provided from the Ohio Family Information Network consultants. ODH also developed model forms for use by the counties in 2004 on prior written notice, parent consents and other forms. The **Procedural Safeguards** (8 – 2004) policy provides guidance to the counties on the procedures for assuring that parents are informed of their rights.

Given the struggles to meet required timelines, Ohio has spent time in the past fiscal year examining its internal protocols for parent complaints. With the help of ODH legal counsel, and input from state partners, ODH has revised protocols and timelines for all processes around parent complaints and resulting investigations, administrative hearings and mediations.

Baseline Data for FFY 2004 (2004-2005):



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Discussion of Baseline Data:

Ohio's Part C program had two written complaints with reports issued that were resolved within the 60 day timeline. No written complaints with reports were resolved beyond the 60 day timeline.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2006 (2006-2007)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2007 (2007-2008)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2008 (2008-2009)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2009 (2009-2010)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2010 (2010-2011)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2011 (2011-2012)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2012 (2012-2013)	100% of signed written complaints with reports issued are resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 10	Timeline	Resources
1. Initiate complaint resolution procedure as outlined in the Procedural Safeguards Policy.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ Local Family and Children First Council
2. Re-evaluate complaint timelines and protocols to identify areas of improvement needed and lost time in the process.	FFY10	
3. Monitor activities within complaint report.	Ongoing	

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.

Overview of Issue/Description of System or Process:

Upon receipt of complaint requesting an administrative hearing, ODH legal counsel is notified and procedures following Ohio Procedural Safeguards and Ohio Complaint Resolution Process are initiated. Date, time and location of hearing are chosen and hearing officer is identified.

Baseline Data for FFY 2004 (2004-2005):

	FY03	FY04	FY05
# of hearing requests	0	0	0
# withdrawn or settled	0	0	0
# within relevant timeline	0	0	0

FY03 = (7/1/02-6/30/03)

FY04 = (7/1/03-6/30/04)

FY05 = (7/1/04-6/30/05)

Discussion of Baseline Data:

Ohio has not received any requests for Administrative Hearings

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.
2006 (2006-2007)	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.
2007 (2007-2008)	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.
2008 (2008-2009)	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.
2009 (2009-2010)	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.
2010 (2010-2011)	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.

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<p>2011 (2011-2012)</p>	<p>100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.</p>
<p>2012 (2012-2013)</p>	<p>100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.</p>

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 11	Timeline	Resources
<p>1. Initiate administrative hearing procedure as outlined in the Procedural Safeguards Policy.</p>	<p>Within 30 days of receipt of request for administrative hearing (for activities 1-4)</p>	<p>➤ BEIS staff</p>
<p>2. Assign Hearing Officer and conduct administrative hearing at date, time and location based on reasonable convenience of the family.</p>	<p>Within 30 days of receipt of request for administrative hearing (for activities 1-4)</p>	
<p>3. Assure that family is notified of their rights in the administrative hearing process. The decision of the hearing officer is binding.</p>	<p>Within 30 days of receipt of request for administrative hearing (for activities 1-4)</p>	
<p>4. Monitor for resolution within required timelines.</p>	<p>Within 30 days of receipt of request for administrative hearing (for activities 1-4)</p>	

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.

Overview of Issue/Description of System or Process:

Not applicable - Ohio Part C does not use Part B due process procedures.

Baseline Data for FFY 2004 (2004-2005): N/A

Discussion of Baseline Data: N/A

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Not applicable - Ohio Part C does not use Part B due process procedures.
2006 (2006-2007)	Not applicable - Ohio Part C does not use Part B due process procedures.
2007 (2007-2008)	Not applicable - Ohio Part C does not use Part B due process procedures.
2008 (2008-2009)	Not applicable - Ohio Part C does not use Part B due process procedures.
2009 (2009-2010)	Not applicable - Ohio Part C does not use Part B due process procedures.
2010 (2010-2011)	Not applicable - Ohio Part C does not use Part B due process procedures.
2011 (2011-2012)	Not applicable - Ohio Part C does not use Part B due process procedures.
2012 (2012-2013)	Not applicable - Ohio Part C does not use Part B due process procedures.

Improvement Activities/Timelines/Resources (through FFY 2012): Not Applicable

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.

Overview of Issue/Description of System or Process:

Upon receipt of written complaint from a parent requesting mediation, a qualified, impartial mediator is assigned, and mediation meeting is held. If agreement is reached as a result of the mediation, an agreement is signed by parents and parties involved. Follow-up by Investigative Team Leader within 60 – 90 days confirms the agreed result of the mediation.

Baseline Data for FFY 2004 (2004-2005):

	FY03	FY04	FY05
# mediations	0	0	1
# mediations resulting in mediation agreement	0	0	1
% mediations resulting in mediation agreement	N/A	N/A	100%

FY03 = (7/1/02-6/30/03)

FY04 = (7/1/03-6/30/04)

FY05 = (7/1/04-6/30/05)

Discussion of Baseline Data:

Ohio's Part C program has only had one complaint that resulted in a mediation agreement with resolution within the required timelines and a resulting mediation agreement.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	80% of mediations held will result in mediation agreements.
2006 (2006-2007)	82% of mediations held will result in mediation agreements.
2007 (2007-2008)	84% of mediations held will result in mediation agreements.
2008 (2008-2009)	86% of mediations held will result in mediation agreements.

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2009 (2009-2010)	88% of mediations held will result in mediation agreements.
2010 (2010-2011)	90% of mediations held will result in mediation agreements.
2011 (2011-2012)	92% of mediations held will result in mediation agreements.
2012 (2012-2013)	93% of mediations held will result in mediation agreements.

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 13	Timeline	Resources
1. Continue use of protocol for dispute resolution process specific to mediation activities and timelines.	Within 30 days of receipt of request for administrative hearing (for activities 1-3).	➤ BEIS staff
2. Assign Mediation Officer and conduct mediation at date, time and location based on reasonable convenience of the family.	Within 30 days of receipt of request for administrative hearing (for activities 1-3).	➤ BEIS staff
3. Assure that mediation process and agreement is kept confidential.	Within 30 days of receipt of request for administrative hearing (for activities 1-3).	➤ BEIS staff/family/other participants
4. Monitor for implementation of mediation agreement within required timelines.	Within 60 - 90 days following mediation agreement.	➤ BEIS staff/other participants

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).

Overview of Issue/Description of System or Process:

The source of the data for the Part C tables is the web-based Early Track data management system. All 88 counties enter data regarding the Help Me grow participants into this system. Early Track is a “live” data system, meaning the data is constantly being updated. The ODH had used Oracle reports as the basis of the 618 data reported to Weststat. Several problems existed with those reports: (1) data verification was impossible as only aggregate numbers were generated and (2) program staff were unable to assure that the procedures written into the reports were accurate. During January 2005 to March 2005, the 618 reports were re-written by program and IT staff in SQL. Program staff provided in-depth specifications for the reports. Additionally, program staff tested and validated each report. This change has significantly increased the accuracy of the 618 data reported by the ODH.

The State Performance Plan and Annual Performance Report are developed with input from many ODH staff and assistance from the Help Me Grow Advisory Council and committees. Many of the activities in the SPP continue to be the responsibility of Council committees, in partnership with ODH staff. The activity reports are synthesized including analysis of data from the monitoring processes and 618 data, as wells as other ET data. Both the SPP and the APR are developed and written by various BEIS staff, such as the Council Coordinator, Part C Coordinator, and Acting Bureau Chief. The report is then reviewed the Division Chief, Assistant Director of Health and then the Director of Health for approval and before submission to OSEP.

Baseline Data for FFY 2004 (2004-2005):

	FY03	FY04	FY05
Part C Tables Feb. submission	1	1	0
Part C Tables Nov. submission	1	1	1
APR	1	1	1
Total	3	3	2
%	100%	100%	67%

FY03 = (7/1/02-6/30/03)

FY04 = (7/1/03-6/30/04)

FY05 = (7/1/04-6/30/05)

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Discussion of Baseline Data:

The February 2005 submission of the child count data was late because we were re-writing the 618 reports for the current version of Early Track (ET 2.1). Since collection of this data, Early Track 3.0 was implemented (January 2006). Given that the re-written ET 2.1 618 reports are written in SQL and the new ET 3.0 618 reports will need to be written in SQL, the transition was minimal. As predicted, submitting the 618 tables in a timely fashion has occurred since the transition to Early Track 3.0.

FFY	Measurable and Rigorous Target
<p>2005 (2005-2006)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <ul style="list-style-type: none"> a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).
<p>2006 (2006-2007)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <ul style="list-style-type: none"> a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).
<p>2007 (2007-2008)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <ul style="list-style-type: none"> a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).
<p>2008 (2008-2009)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <ul style="list-style-type: none"> a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).
<p>2009 (2009-2010)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <ul style="list-style-type: none"> a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).
<p>2010 (2010-2011)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <ul style="list-style-type: none"> a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and b. Accurate (describe mechanisms for ensuring accuracy).

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<p>2011 (2011-2012)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <p>a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and</p> <p>b. Accurate (describe mechanisms for ensuring accuracy).</p>
<p>2012 (2012-2013)</p>	<p>100% of State reported data, including 618 data, State performance plan, and annual performance reports, are:</p> <p>a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and</p> <p>b. Accurate (describe mechanisms for ensuring accuracy).</p>

Improvement Activities/Timelines/Resources (through FFY 2012):

Improvement Activities for Indicator 14	Timeline	Resources
1. Revise Web Based data system (Early Track).	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ OMIS staff and vendor
2. Revise Early Track reports.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ OMIS staff ➤ County program input
3. Report data to Westat/OSEP by required timelines.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ Early Track
4. Conduct trainings for county staff who manage data in ET 3.0 to focus on various reporting functions that can be used to help local staff monitor their data entry into our system (i.e., accuracy and timelines).	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff ➤ Early Track
5. Implement various data verification strategies with counties.	Ongoing	<ul style="list-style-type: none"> ➤ BEIS staff



DUE PROCESS COMPLAINT AND REQUEST FOR A DUE PROCESS HEARING Instructions

Please provide information requested in all of the fields.

1. *Name and birthdate* of the child.
2. *Address* of the residence of the child; or in the case of a homeless child or youth, available contact information.
3. *County* in which child receives Help Me Grow services.
4. *Name, address and phone number of parent* if address is different from child's; or in the case of a homeless child or youth, *available contact information* for the child.
5. *Interpreter Required*: If a bilingual or sign language interpreter is required, please check the applicable box.
6. *Project Director*: Name of Help Me Grow Project Director.
7. *Mediation*: Mediation is a free service provided by the State to resolve disputes. Participation in mediation is completely voluntary and must be agreed to by both parties. A mediator will arrange dates for the parties to discuss remedies to resolve the dispute. Mediation is concurrent with due process, but the mediation meeting will usually be scheduled before the due process hearing takes place. If you are interested in mediation, please check the applicable box.
8. *Description of the Complaint*: Provide a description of the nature of the complaint which is the basis of your request for a due process hearing and include the relevant Part C requirements. **Example of Complaint**: The Help Me Grow Program in my county has not assisted me in finding physical therapy for my child.
9. *Facts Relating to the Complaint*: Provide facts relating to the complaint. **Example of Facts**: My child was referred to HMG 10 weeks ago and hasn't received therapy. The service coordinator has not provided any assistance in helping me locate a therapy provider.
10. *Description of the Proposed Resolution*: State the resolution you are proposing. **Example of Proposed Resolution**: I am proposing that the service coordinator assist me in arranging for physical therapy services as identified in her Individualized Family Service Plan.
11. *Attorney or Representative*: If this section is completed by the parent, all due process correspondence and information will be sent to the attorney or representative and not to the parent.
12. *Signature*: Party requesting the hearing is required to print, sign and date the complaint notice/due process hearing request.
13. *Submission of Request*: Send the original completed request to Help Me Grow, Ohio Department of Health, Bureau of Early Intervention Services, 246 N. High Street, Columbus, Ohio 43215. **Note**: The use of this form is not required. Instead of using this form, you may submit your own due process request, but your request must include all information included in this form.

DUE PROCESS COMPLAINT AND REQUEST FOR A DUE PROCESS HEARING

NAME OF CHILD ON WHOSE BEHALF THE HEARING IS REQUESTED	CHILD'S BIRTHDATE <i>(Month/Day/Year)</i>
ADDRESS OF THE RESIDENCE OF THE CHILD; OR IN THE CASE OF A HOMELESS CHILD, AVAILABLE CONTACT INFORMATION	
COUNTY IN WHICH CHILD RECEIVES HELP ME GROW (HMG) SERVICES	
NAME OF PARENT AND ADDRESS IF ADDRESS IS DIFFERENT FROM CHILD'S. IN THE CASE OF A HOMELESS CHILD OR YOUTH, AVAILABLE CONTACT INFORMATION FOR THE CHILD	TELEPHONE NUMBER ()
	DAYTIME TELEPHONE NUMBER ()
A BILINGUAL OR SIGN LANGUAGE INTERPRETER IS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES , specify language/mode of communication	
NAME OF HMG COUNTY PROJECT DIRECTOR	
MEDIATION <input type="checkbox"/> YES <input type="checkbox"/> NO I am interested in mediation.	
A DESCRIPTION OF THE COMPLAINT <i>(Describe the nature of the complaint relating to a Part C services for the child.)</i> (Attach additional pages if necessary).	

DESCRIPTION OF COMPLAINT (continued)

FACTS (*Provide facts relating to the complaint described above*) (Attach additional pages if necessary).

A DESCRIPTION OF THE PROPOSED RESOLUTION YOU ARE SEEKING (*Provide the proposed resolution of the complaint.*) (Attach additional pages if necessary).

NAME AND ADDRESS OF THE ATTORNEY OR REPRESENTATIVE FOR THE PARENT/GUARDIAN. <i>If this section is completed, all information and correspondence regarding the due process request will be sent to the attorney or representative and not to the parent.</i>	TELEPHONE NUMBER ()
	FAX NUMBER ()

 Name (printed) of Party Requesting Hearing

 Signature of Party Requesting Hearing

 Date of Signature

Submission of Request: Send the original completed request to Help Me Grow, Ohio Department of Health, Bureau of Early Intervention Services, 246 N. High Street, Columbus, Ohio 43215. ***Note:*** The use of this form is not required. Instead of using this form, you may submit your own due process request, but your request must include all information included in this form. **See page one for instructions.**

I. First Notification of a Complaint

Regardless of who first receives it, if a complaint is received via telephone, complainant is requested to submit complaint in writing by e-mail or post mail.

- A. A brief overview of the complaint sent to Due Process Supervisor, who confirms with Part C Coordinator which team leader (TL) the complaint will be assigned to.
- B. Once team leader is assigned, he/she:
 - A. Contacts family via phone
 - a) to determine the nature of complaint and discuss the options available for complaint process,
 - b) to inform family that County HMG Project Director and County FCF Coordinator will be informed of complaint within one business day after receipt of written complaint
 - B. Informs ODH Legal, Bureau Chief, Part C Coordinator, and TA Team Supervisor of complaint via email within one business day after receipt of first notification of complaint (not, written complaint).

Note: Date of receipt of written complaint begins timeline.

- C. Once written complaint is received, TL adds the required information into the database on L drive.
- D. TL requests the child's record and other documentation specific to the complaint be sent to TL from the county personnel within 48 hours of receiving the notice of complaint .
- E. TL sends a letter (template) & copy of Complaint Options letter to County FCFC Coordinator and County HMG Project Director confirming receipt of written

complaint.

- F. TL sends Complaint Options letter (using letter template) via overnight mail (and e-mail at family's request) acknowledging receipt of complaint and outlining options of Investigation, Mediation, Administrative Hearing within 2 business days of phone conversation with family.
- G. TL contacts family via phone to (a) confirm receipt of Complaint Options letter, (b) discuss options and (c) determines family's choice of option(s).
- H. TL informs Bureau Chief, ODH Legal, Part C Coordinator and TA Team Supervisor (Who informs the county's TA consultant that the complaint exists) of family's choice.
 - a) If family chooses investigation, Part C Coordinator makes request through ODMRDD and OFCF supervisors to identify investigative team (ODMR/DD, OFCF) to assist assigned TL.

II. Investigation

From the written complaint to Final Report to the family =

No Longer than 60 calendar days

- A. TL reviews documentation specific to the allegation and develops questions for family interview and interview of the county personnel involved in services for the child.
- B. TL coordinates a date with family, county personnel and state team for onsite visit to conduct interviews.
- C. Investigative Team conducts a county visit
 - 1. Investigative Team interviews family.
 - 2. Investigative Team interviews relevant providers and county personnel.

Note: In the case that personnel are not available on the date of the interview, a conference call interview may be conducted with those specific personnel.

- D. Investigative Team conducts a debriefing via conference call or in person to review all relevant documentation and information obtained through interviews and documents the findings that may/may not substantiate complaint.
- E. TL constructs report (using report template) based on investigative team's findings and submits the report to ODH Legal, Bureau Chief, and Part C Coordinator for edits. Edits are to be provided as soon as possible, but no later than 48 hours after received.
- F. The report is attached to an agency cover memo (using cover letter template) for ODH Director's signature.
- G. After the report returns with ODH Director's signature, TL sends
 - A. Cover letter and report to family by overnight mail and add date sent to database on L drive.
 - B. Copy of the cover letter with report to the county FCFC Coordinator HMG Project Director.
 - C. Copy of the cover letter with report via email to ODH Legal, Bureau Chief, Part C Coordinator, Due Process Supervisor and TA Supervisor.
 - D. Hard copies to other state partners, including OFCF director, MRDD, and TA consultant for the county.
- H. If complaint is substantiated and violations are found, a Corrective Action Plan (CAP), outlining specific activities and timeline related to the correction, as identified in the report, must be sent from the county FCF coordinator to the TL within 30 days from receipt of the report.
 - A. Once received, TL sends email to agency acknowledging receipt of CAP

within 5 business days of receipt of CAP.

B. Place a copy of the CAP in the BEIS complaint file.

C. TL reviews CAP submitted by the county.

a) *TL notifies county FCF coordinator (with a cc to the HMG project director) via e-mail of approval or rejection of CAP within 10 calendar days of receipt.*

b) *If rejected, a contact is made by TL and county TA program consultant within 15 calendar days following review of report.*

c) *Following the completion of a contact with the county, the county personnel will make revisions to the CAP and submit revised CAP to the TL within 15 calendar days of the initial CAP rejection.*

d) *TA Program Consultant monitors timelines of the follow-up and corrective action and alerts the county FCF coordinator when the county has successfully completed their corrective action*

e) *TA program consultant will follow along with each county that has had a substantiated complaint and will monitor for activities that were corrected in their CAP at 6 months and one year after successfully completing their corrective action plan.*

III. Mediation

From written complaint to End = No longer than 30 calendar days

- A. Within 5 calendar days after family requests mediation, the TL:
 - 1. Notifies ODH Legal of request for mediation and ODH Legal contacts a mediator that meets the criteria outlined in Ohio Procedural Safeguards to schedule mediation.
 - 2. TL proposes possible date and location as determined by family and mediator availability for mediation meeting.
- B. Within 30 calendar days of receiving the complaint, the TL:
 - 1. TL sends appropriate documents to mediator for review, if requested;
 - 2. County visit is made by Mediator, ODH legal, and TL who attends for clarification of law/policies and may also include other ODH/BEIS staff as determined by PartC Coordinator.
 - 3. If mediation results in resolution of the complaint, an agreement is written by the mediator and signed by family and appropriate county personnel. A copy of the agreement is given to the family, to the mediator and filed in the complaint record at BEIS.
 - 4. If agreement is not reached, family may choose additional mediation meeting, investigation, or administrative hearing, which starts that clock over again.

IV. Administrative Hearing

From written complaint to End = No longer than 30 calendar days

- A. TL notifies ODH Legal of family request for Administrative Hearing.
- B. ODH Legal follows the protocol for Administrative Hearing as outlined in Ohio Procedural Safeguards policy.
- C. TL assists ODH legal, as determined necessary by Part C Coordinator in facilitating the scheduling of the administrative hearing.

Part C Complaint Team Leader Checklist

Mediation

- Complaint received in writing (post or e-mail)
- Determine by phone call with family the process chosen (Investigation, Mediation, Administrative Hearing)
- Record required information into the database on the L drive
- Notify ODH Legal, Bureau Chief, Part C Coordinator, & TA Team Supervisor of brief nature of complaint

ODH Legal makes contact with a mediator

- Prepare and post mail the letter of options to the family; include copy of federal regs (34 CFR 303.419-303.425); retain a copy in TL file
- Prepare and post mail letter to county FCF Coordinator and county PD (attach copy of parent letter); retain a copy in TL file
- Contact PD by phone informing him/her of complaint; request that copy of child's complete record be sent to TL within 24 hours
- Collaborate with ODH Legal to determine availability of mediator (date and time)
- Negotiate date(s) with family, county staff, ODH Legal, and BEIS staff to attend mediation; ask PD to secure location for the mediation on the identified date and time
- Confirm details of the mediation date, time, & location with ODH Legal
- Confirm details with family, PD, and OFCF
- Send child's record and any other needed documentation to mediator if requested
- County visit for mediation is conducted
- Result of mediation is shared with ODH Legal, Bureau Chief, Part C Coordinator, & TA Team Supervisor within 2 business days of the mediation via email

Part C Complaint Team Leader Checklist

Investigation

- Complaint received in writing (post or e-mail)
- Determine by phone call with family the process chosen (Investigation, Mediation, Administrative Hearing)
- Notify ODH Legal, Bureau Chief, Part C coordinator, and TA Team Supervisor of brief nature of complaint (within **1 business day** of receiving written complaint)
- Prepare and post mail the letter of options to the family; include copy of federal regs (34 CFR 303.419-303.425); retain a copy in TL file
- Prepare and post mail letter to county FCF Coordinator and county PD (attach copy of parent letter); retain a copy in TL file
- Contact PD by phone informing him/her of complaint ; request that copy of child's complete record be sent to TL within 24 hours
- Add required information to the database on L drive

Part C coordinator requests team partners from OFCF & DODD

- Once partners are identified, contact by phone to share brief overview of complaint issue
- Negotiate date(s) with family, county staff, and state team partners to conduct fact-finding interviews; ask PD to secure location for the interviews on identified date and time
- Send e-mail confirmation (with read request) to all
- Review child's record and all related documentation & draft interview questions
 - If state team schedules permit prior to interview date, meet to brief the complaint and develop interview questions
 - If state team meeting is not an option, TL will develop interview questions and share with state partners by e-mail for feedback/edits
- Conduct interviews with family and identified county personnel; each state team member takes notes during the interviews; copy to TL for complaint file and reference in writing findings report
- State team meets to de-brief and finalize thoughts regarding substantiating/not substantiating the complaint
- TL constructs report
- Draft report to ODH Legal , Bureau Chief, & Part C Coordinator for edits

ODH Legal , Bureau Chief, & Part C Coordinator return Report draft to TL within 48 hours of receipt

- Attach agency cover memo for Director's signature & give to Georgia for ADTS #
- After reports is returned to program, create cover letter to family & send report and cover letter via overnight mail to family, copying FCFC & PD; email copy to ODH Legal, Bureau chief, Part c Coordinator, and TA Team Supervisor; Hard copies to state partners & TA consultant
- Confirm receipt of CAP from county within 30 days of Report



Help Me Grow Family Questionnaire

August 2010

Dear Parent/Caregiver:

Ohio's Help Me Grow Program is interested in your opinion regarding Help Me Grow services to assist with program and service improvement efforts.

Please take a few minutes and respond to the following questions. After you are done, choose any one (1) of the following methods to let us know your responses.

1. Send Help Me Grow the completed questionnaire in the enclosed self-addressed, stamped envelope.
2. Call Help Me Grow directly at 1-800-755-GROW (4769), press zero (0) to request the survey from the operator and provide your responses. Use the ID# on the upper right corner of the survey to identify yourself.
3. Go online to <http://hmg.cmrinc.com/hmgfs10> and complete the questionnaire. Use the ID# in the upper right hand corner of the questionnaire.

All responses are completely confidential. Be assured that at no time will your individual responses be shared with others. Responses will only be reported in groupings so that individual responses can not be identified.

A report generated by the responses to this questionnaire will be sent to the Office of Special Education Programs at the U.S. Department of Education, other Help Me Grow stakeholders, and at some point in the near future will be available to view on Ohio's Help Me Grow website: <http://www.ohiohelpmegrow.org>.

Please remember that your participation is voluntary, and your response is greatly appreciated as you will be helping to improve Ohio's Help Me Grow system. If Help Me Grow does not receive a response from you in a few weeks, we will make an effort to call you to see if you would like any assistance in completing the questionnaire.

If you have any questions, please feel free to contact the state office at (614) 644-8389.



INSTRUCTION ON HOW TO COMPLETE THE HELP ME GROW FAMILY SURVEY

This survey should be filled out by the person in your family who has the most interaction with Help Me Grow.

To mark your response, circle the number above the statement that is most similar to your family's experience.

All of the responses include the word "we" or "our." This refers to your family. Usually this means parents and others who support and care for your child. But every family is different, so think of what "family" means to you when answering.

On every page, you will be asked to answer questions like the example below:

How much does your family know about dinosaurs?

1	2	3	4	5	6	7
We know a little about dinosaurs		We know some about dinosaurs		We know a good amount about dinosaurs		We know a great deal about dinosaurs

- Read each question and circle the number that best describes your family right now.
- If a statement almost describes your family, but not quite, circle the number to the left or the right. For example, if you feel that the statement "5," "We know a **good amount** about dinosaurs" almost describes your family, but not quite, circle the "4."
- If you do not know how to answer a question, or if you are not comfortable answering the question, skip it and go to the next question.



1. To what extent has Help Me Grow helped your family know and understand your rights? For example, your rights include the right to complain if you are dissatisfied with your services or the right to accept some services and decline others.

1	2	3	4	5	6	7
Help Me Grow has done a poor job of helping us know our rights		Help Me Grow has done a fair job of helping us know our rights		Help Me Grow has done a good job of helping us know our rights		Help Me Grow has done an excellent job of helping us know our rights

2. To what extent has Help Me Grow helped your family effectively communicate your child's needs?

1	2	3	4	5	6	7
Help Me Grow has done a poor job of helping us communicate our child's needs		Help Me Grow has done a fair job of helping us communicate our child's needs		Help Me Grow has done a good job of helping us communicate our child's needs		Help Me Grow has done an excellent job of helping us communicate our child's needs

3. To what extent has Help Me Grow helped your family be able to help your child develop and learn?

1	2	3	4	5	6	7
Help Me Grow has done a poor job of helping us help our child develop and learn		Help Me Grow has done a fair job of helping us help our child develop and learn		Help Me Grow has done a good job of helping us help our child develop and learn		Help Me Grow has done a excellent job of helping us help our child develop and learn

4. Families help their children develop and learn. To what extent has Help Me Grow helped you provide an environment in which your child can develop and learn?

1	2	3	4	5	6	7
Help Me grow has done a poor job in helping us to provide an environment in which our child can develop and learn.		Help Me grow has done a fair job in helping us to provide an environment in which our child can develop and learn.		Help Me grow has done a good job in helping us to provide an environment in which our child can develop and learn.		Help Me grow has done an excellent job in helping us to provide an environment in which our child can develop and learn.



5. How knowledgeable is your family with your child’s special needs (for example, needs required because of your child’s health or a disability or a delay in their development)?

1	2	3	4	5	6	7
We understand a little about our child’s special needs		We understand some about our child’s special needs		We understand a good amount about our child’s special needs		We understand a great deal about our child’s special needs

6. Help Me Grow professionals want to know if the things they do with your family are working. How often is your family able to tell if your child is making progress?

1	2	3	4	5	6	7
We seldom can tell if our child is making progress		We sometimes can tell if our child is making progress		We usually can tell if our child is making progress		We almost always can tell if our child is making progress

7. Are you aware of the procedures that should be taken if your family wants to file a complaint?

1. Yes
2. No
3. I don’t understand this question.
4. I don’t remember.

8. How comfortable is your family participating in meetings with Help Me Grow professionals to plan services or activities?

1	2	3	4	5	6	7
We are not very comfortable participating in meetings		We are somewhat comfortable participating in meetings		We are generally comfortable participating in meetings		We are very comfortable participating in meetings

9. Have you participated in the development of an individualized family service plan (IFSP) for your family while participating in the Help Me Grow program?

1. Yes
2. No
3. I don’t understand this question.
4. I don’t remember.



10. One of the purposes of Help Me Grow is to connect your family with programs and services available in your community. How effective has Help Me Grow been in making your family aware of programs and services?

1	2	3	4	5	6	7
Help Me grow has done a poor job in making our family aware of programs and services that are available.		Help Me grow has done a fair job in making our family aware of programs and services that are available.		Help Me grow has done a good job in making our family aware of programs and services that are available.		Help Me grow has done an excellent job in making our family aware of programs and services that are available.

11. Families of children with special needs often find it helpful to connect with other families in similar situations. To what extent has Help Me Grow helped you find opportunities to meet and interact with families who have had experiences and concerns similar to yours?

1	2	3	4	5	6	7
Help Me grow has done a poor job of connecting our family with other families in similar situations.		Help Me grow has done a fair job of connecting our family with other families in similar situations.		Help Me grow has done a good job of connecting our family with other families in similar situations.		Help Me grow has done an excellent job of connecting our family with other families in similar situations.

12. All children need medical care. How would you describe the level medical care you have available for your child right now?

1	2	3	4	5	6	7
We do not have the medical care we need for our child		We have some medical care, but still have a long way to go before it is what we need for our child		We have good medical care for our child's needs		We have excellent medical care for our child's needs



13. Many families have a need for quality childcare. By this, we do not mean occasional babysitting, but regular childcare, either part-day or full-day. How would you describe the childcare you have for your child right now?

Check here if this question does not apply because your family is not interested in child care at this time

1	2	3	4	5	6	7
We do not have the childcare we want for our child		We have some childcare, but still have a long way to go before it is what we want for our child		We have good childcare for our child		We have excellent childcare for our child

14. Families sometimes must rely on other people for help when they need it, for example to provide a ride, run an errand, or watch their child for a short period of time. How often does your family have someone you can rely on for help when your family needs it?

1	2	3	4	5	6	7
We seldom have someone we can rely on for help when we need it		We sometimes have someone we can rely on for help when we need it		We usually have someone we can rely on for help when we need it		We almost always have someone we can rely on for help when we need it

15. Many people feel that talking with another person helps them deal with problems or celebrate when good things happen. How often does your family have someone your family trusts to listen and talk with when they need it?

1	2	3	4	5	6	7
We seldom have someone to talk with about things when we need it		We sometimes have someone to talk with about things when we need it		We usually have someone to talk with about things when we need it		We almost always have someone to talk with about things when we need it

16. To what extent have Help Me Grow professionals treated you with respect?

1	2	3	4	5	6	7
We are generally treated with little or no respect		We are generally treated with some respect		We are generally treated with a good amount of respect		We are generally treated with a great deal of respect



17. Over all, how satisfied are you with the Help Me Grow Program?

1	2	3	4	5
Very Dissatisfied	Dissatisfied	Both Satisfied and Dissatisfied	Satisfied	Very Satisfied

Thank you for completing this questionnaire.

Please send questionnaire to Help Me Grow by one (1) of the following methods:

1. Send the Help Me Grow completed questionnaire in the enclosed self-addressed stamped envelope to:

Ohio Department of Health
Bureau of Early Intervention Services
246 North High Street
Columbus, OH 43215

2. Call Help Me Grow directly at 1-800-755-GROW (4769), press zero (0) to request the survey from the operator and provide your responses.

3. Go online to www.callogistix.com/hmgfs10 and complete the questionnaire. Use the ID# in the upper right hand corner of the questionnaire to identify yourself.

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