

# OHIO's PART C Annual Performance Report (APR) FFY 2008 (July 1, 2008 – June 30, 2009)



February 2010

**Part C State Annual Performance Report (APR) for FFY2008****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. Committees provided a verbal report to the Ohio HMG Advisory Council and a written report to the Bureau, including 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 the Ohio Help Me Grow Advisory Council members. The APR and any updated SPP activities will also be posted on the [ohiohelpmegrow.org](http://ohiohelpmegrow.org) website in the spring of 2010 so that the public and HMG Project Directors and County Family and Children First Council Coordinators can access the documents.

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 [ohiohelpmegrow.org](http://ohiohelpmegrow.org) website in 2010 to align with the release of the state and county determination process.

Ohio Part C was designated as Needs Assistance for a second year in a row. The technical Assistance acquired by Ohio Part C, in fulfillment of the requirement of the NA2 designation was:

- NECTAC
  - Assisted in preparation for the OSEP verification visit
  - Assisted in presenting at the 1<sup>st</sup> Part C review Group meeting
- NCRRC
  - Assisted in preparation for the OSEP verification visit
  - Assisting with the web-based training on Transition
- DAC
  - Assisted in preparation for the OSEP verification visit

It should be noted that at the parent co-chair of the ICC resigned recently. A replacement parent co-chair will be determined at the next HMG Advisory Council meeting. As a result, we are submitting only 1 ICC certification letter with this APR.

Ohio's APR includes information from the Compliance Agreement quarterly reports submitted to OSEP for the months of March, June, October and December 2009.

**Part C State Annual Performance Report (APR) for FFY2008**

**Overview of the Annual Performance Report Development:**

**Monitoring Priority: Early Intervention Services In Natural Environments**

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.

**Actual Target Data for FFY2008:**

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 12/22/2008 to 3/1/2009 timeframe were examined electronically. A sample of records was then verified to ensure accurate reporting. 1,948 of the 1,972 children examined, or 99 percent, were compliant, as a result of occurring within 30 days of the signed IFSP.

The 1,948 records counted as being compliant includes 122 that were non-timely due to documented extraordinary family circumstances. These 122 records are included in the numerator and denominator.

The 24 noncompliant records are deemed as such for the following reasons:

- 38 percent for staff oversight/error
- 33 percent for staff scheduling/availability
- 13 percent for data/documentation errors

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

99 percent indicates progress from the 97 percent compliance reported for FFY2007.

For the 62 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 FFY2007 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.

Improvement Activities for Indicator 1	Timeline	Resources
<p>1. Develop and implement a plan to remove barriers identified by counties on surveys, including: barriers that require a moderate level of intervention.</p> <p><b>Progress</b> One of themes from the barriers identified in the survey was “Limited resources, providers and funding and changes in MRDD services.” ODH in conjunction with the Department of Administrative Services issued a Request for Proposals for a vendor to conduct a cost study for the delivery of Help Me Grow services in the state. A vendor was selected in SFY 2008 and began implementing the study in SFY 2009. Data are still being collected. The Advisory Council continues to review and discuss national evidence based early intervention service delivery models in SFY 2009.</p>	<p>FFY 2008 and 2009 for data collection &amp; plan development</p> <p>FFY 2010 for implementation</p>	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ North Central Regional Resource Center</li> <li>➤ County Project Directors and Family and Children First Coordinators/Councils</li> <li>➤ HMG Advisory Council</li> <li>➤ Service Delivery Committee</li> </ul>
<p>2. Continue to monitor this indicator via ODH’s web-based data system, Early Track, and on site focused monitoring visits.</p> <p><b>Progress</b> 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>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ ODH data and monitoring teams and state partners</li> <li>➤ County staff</li> </ul>
<p>3. Examine service delivery across the state for timeliness and develop a plan that ensures appropriate services to infants and toddlers regardless of local service availability.</p> <p><b>Progress</b> The lead agency began a Part C program review in October 2009 which is examining the IFSP and service delivery processes in the state. This large stakeholder group will provide recommendations about service delivery to the lead agency in Spring 2010.</p>	<p><b>FFY 2009 for examination and plan development</b></p>	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ North Central Regional Resource Center</li> <li>➤ County Project Directors and Family and Children First Coordinators/Councils</li> <li>➤ HMG Advisory Council</li> <li>➤ Part C Review group</li> </ul>
<p>4. ODH will provide technical assistance to counties who are identified with noncompliance in this area.</p>	<p>ongoing</p>	<ul style="list-style-type: none"> <li>➤ ODH HMG TA staff and state</li> </ul>

<p>TA was provided to all counties with noncompliance in TRS. Counties identified as either significant noncompliance or continuing noncompliance received intensive TA</p>		<p>partners</p>
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**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

The Compliance Agreement work plan includes the following improvement activities, timelines & resources for this report.

<p>EIS. 1D.</p>	<p>ODH will report on the:</p> <ul style="list-style-type: none"> <li>(1) Percent (including numbers used in calculation) of infants and toddlers with IFSPs whose Part C IFSP services are initiated in a timely manner.</li> <li>(2) Type(s) of early intervention service(s) (including services to families as well as to infants and toddlers with disabilities) not initiated in a timely manner as well as the reasons why the services were delayed.</li> </ul>	<p>In our April 2009 Compliance Agreement quarterly report, ODH provided OSEP with its baseline SFY08 data for the timely receipt of services timeline with the December 08 report. Attached is Table B, in which ODH is providing an update on the status of the counties, identified with findings. ODH, on a monthly basis, examines Corrective Action Plan (CAP) log data from these counties to determine if they have corrected their non-compliance. As the table indicates, we have not yet received sufficient data to determine if correction has occurred for several counties. There are three counties who appear to have corrected, but ODH has not yet verified the data. ODH will provide an update on the status of these three counties and the others in its next quarterly report.</p> <p><u>This info was updated in the June 2009 report in which ODH reported that</u> on a monthly basis, ODH examines Corrective Action Plan (CAP) log data from these counties to determine if they have corrected their non-compliance. As the table indicates, 5 counties have corrected their noncompliance. Two counties appear to have corrected, but ODH has not yet verified the data. ODH will provide an update on the status of these two counties (i.e., those who appear to have corrected but need to be verified) in its next quarterly report.</p> <p><u>The October 2008 report indicated that all counties</u> except Lucas county has corrected. A visit is scheduled for Lucas for November 2009.</p>
<p>EIS. 1E.</p>	<p>ODH will work with ODMRDD and any other state partners to align ODMRDD policies and any rules on 45-day timeline and EI service provision with ODH policies and procedures related to completion of developmental evaluations and</p>	<p>In October 2009, ODH reported that ODMRDD is still awaiting final regulations for Part C and final decisions about the HMG program activities and requirements before making any changes in their rules. Recommendations for state statute changes and rule changes are currently being reviewed and considered</p>

**APR Template – Part C (4)**

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	assessments within the 45-day timeline.	by ODH legal and legal staff in the Governor’s Office.
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Data Submitted by ODH with its October 2009 Compliance Agreement Quarterly Report  
Timely Receipt of Services Compliance Update  
October 2009 OSEP Quarterly Report

Table B				
Timely Receipt of Services Compliance				
County	Baseline Compliance	Update as of 3/23/09	Update as of 6/26/09	Update as of 9.3.09
Clark	94%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Delaware	72%	No update – need 2 months of CAP log data. Will update with next quarterly report	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Fairfield	67%	ODH recently conducted site visit with county. Issuing report to county in next week.	Correction of noncompliance was verified.	n/a
Holmes	93%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Lucas	89%	No update – need 2 months of CAP log data. Will update with next quarterly report	County was required to complete a written Corrective Action Plan (CAP) due to continued noncompliance.	Corrective Action Plan (CAP) log indicates compliance. Correction of non-compliance was not verified. On site visit scheduled for Nov. 09.
Muskingum	40%	No update – need 2 months of CAP log data. Will update with next quarterly report	Correction of noncompliance was verified.	n/a
Washington	93%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a

Part C State Annual Performance Report (APR) for FFY2008

Overview of the Annual Performance Report Development:

**Monitoring Priority: Early Intervention Services In Natural Environments**

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	80% 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 FFY2008:**

90 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, 2008 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 13,392 children of the total 14,840 received early intervention services in home or in programs for typically developing children.

As the data indicates, for FFY2008, 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:**

90 percent indicates progress from the 88 percent performance reported for FFY2007.

Improvement Activities for Indicator 2	Timeline	Resources
1. Identify providers of specialized and related services and utilize them for ERAP services.	FFY 2009	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ ODODD</li> <li>➤ County Boards of MRDD</li> </ul>
<p><b>Progress</b> ODH is contracting with providers of specialized</p>		<ul style="list-style-type: none"> <li>➤ Bureau for</li> </ul>

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<p>services. We continue to add providers to our EI System of Payment as well.</p>		<p>Children with Medical Handicaps (BCMh) at ODH</p> <ul style="list-style-type: none"> <li>➤ ODE</li> <li>➤ Private providers</li> </ul>
<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><b>Progress</b> 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 will provide a recommendation on service delivery model for the state by Spring 2010.</p>	<p>FFY 2009</p>	<ul style="list-style-type: none"> <li>➤ Data from state cost survey and other state information</li> <li>➤ ODH</li> <li>➤ DODD</li> <li>➤ Part C Review group</li> </ul>
<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><b>Progress</b> 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 will be making recommendations to the lead agency in Spring 2010 regarding utilization of various payment sources including Medicaid.</p>	<p>FFY 2009</p>	<ul style="list-style-type: none"> <li>➤ ODJFS</li> <li>➤ ODH</li> <li>➤ Governor's Office</li> <li>➤ Part C Review group</li> </ul>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

**Part C State Annual Performance Report (APR) for FFY2008**

**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 2008-2009 reporting):**

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

**Measurement for Summary Statement 1:**

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

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	n/a

**Actual Target Data for FFY2008:**

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	124	6.3
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	339	17.4
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	253	13.0
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	536	27.4
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	701	35.9
<b>Total</b>	<b>N=1953</b>	<b>100%</b>

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	117	6.0
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	357	18.3
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	250	12.8
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	552	28.3
e. Percent of infants and toddlers who maintained	677	34.7

functioning at a level comparable to same-aged peers		
<b>Total</b>	<b>N=1953</b>	<b>100%</b>

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	137	7.0
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	337	17.3
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	239	12.2
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	551	28.2
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	689	35.3
<b>Total</b>	<b>N=1953</b>	<b>100%</b>

Summary Statements	% of children
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>	
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	63.0
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	63.3

Summary Statements	% of children
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>	
<b>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</b>	<b>62.9</b>
<b>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</b>	<b>62.9</b>
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>	
<b>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</b>	<b>62.5</b>
<b>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</b>	<b>63.5</b>

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 may only be collected for children whom 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 programs 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 FFY2007 ODH completed its training of the eighty-eight (88) county Part C programs.
- In FFY2008 ODH transitioned its Indicator 3-related data collection to its larger web-based early intervention data system.
- IN FFY2008 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\* after the county has been trained on how to use the COSF to gather child outcomes [date ranges from 4/1/2006 to 9/1/2008].  
\*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. In FFY2008, the Ohio Department of Health completed the transition to its web-based data collection system, Early Track.
- 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 FFY2008:**

<b>Improvement Activities for Indicator 3</b>	<b>Timeline</b>	<b>Resources</b>
1. Move COSF to Early Track Completed. Adding several additional reports for county to use to monitor data at county level	completed	➤ ODH staff, including IT staff
2. Quality assurance on data to ensure accuracy & completeness. Support county administrators in reviewing random samples of COSFs for quality & completeness.	Ongoing	➤ ODH staff ➤ County Administrators ➤ HMG Advisory Council ➤ Evaluation committee
3. Analyze data summaries to look for discrepancies by county, service agency, service coordinator	Ongoing	➤ ODH staff ➤ County administrators

# APR Template – Part C (4)

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4. Create a web-based COSF refresher self-tutorial.	FFY 2009	➤ ODH staff, including IT staff
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**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

Part C State Annual Performance Report (APR) for FFY2008

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
2008-2009	A. 92% of families participating in Part C who report that early intervention services have helped families <b>know their rights</b> . B. 92% of families participating in Part C who report that early intervention services have helped families <b>effectively communicate their children's needs</b> . C. 92% of families participating in Part C who report that early intervention

**Actual Target Data for FFY2008:**

- A. 94 percent Know their rights:** 1,532 respondent families participating in Part C report that early intervention services helped them know their rights divided by 1,634 respondent families participating in Part C times 100. Eight non-responses removed from denominator. We received a total of 1,642 questionnaires; 1,634 responded to question referencing Indicator 4A.
- B. 94 percent Effectively communicate their children's needs:** 1,544 respondent families participating in Part C report that early intervention services helped them effectively communicate their children's needs divided by 1,638 respondent families participating in Part C times 100. Four non-responses removed from denominator. We received a total of 1,642 questionnaires; 1,638 responded to question referencing Indicator 4B.
- C. 92 percent Help their children develop and learn:** 1,502 respondent families participating in Part C report that early intervention services helped family help their children develop and learn divided by 1636 respondent families participating in Part C times 100. Six non-responses removed from denominator. We received a total of 1,642 questionnaires; 1,636 responded to question referencing Indicator 4C.

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 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**

Ohio administered the survey by mailing copies of the questionnaire to Part C families eligible for participation. Additional steps to improve response rate included the following:

- Making "encouragement calls" to a subset of the response pool.
- Making follow-up calls to families who received a survey but had not yet responded.
- Providing multiple methods of responding to the questionnaire (details provided within *Response* section).
- Sending questionnaires returned due to inaccurate or outdated addresses to the local Help Me Grow office and instructing Service Coordinators to hand deliver them.

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.
- Ohio identified other demographic groups that are traditionally under-represented in survey respondents and made pre-emptive "encouragement calls" beginning immediately after the

initial distribution of the questionnaires to families. These calls provided families the opportunity to respond to the survey upon receiving these calls. For families identified as primarily Spanish-speaking in the data system, “encouragement calls” were administered in Spanish.

**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 could answer the questionnaire.
- Call the HMG Helpline and respond to the questions via phone interview.

Families who did not respond to the questionnaire two weeks after distribution began were called by the Helpline staff. Families were given the option of taking the questionnaire over the phone at the time of call if contacted by the Helpline. Table 7 presents the distribution of each response type across all respondents.

Table 7: Distribution of Questionnaire Respondents’ Response Type

<b>Response Method</b>		
Inbound Calls	28	1.71%
Outbound Calls (Includes follow-up and encouragement calls)	50	3.05%
Mailed (Written Questionnaire)	1418	86.36%
Web	146	8.89%
Total	2302	100.00%

5,309 total questionnaires were distributed to families still enrolled in the program on June 30, 2009 with a current Individualized Family Service Plan from the October 1, 2008 child count. The Ohio Department of Health received 1642 surveys for a response rate of 31 percent. Eighty-seven of Ohio’s 88 counties were represented in the responses to the Family Outcomes questionnaire. No completed questionnaires were received from families in Vinton County.

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 1: Race and Ethnic Distribution of Children Represented by Questionnaire Respondents

<b>Race/Ethnicity</b>	<b>Questionnaire Respondents</b>	
American Indian or Alaska Native	2	0.12%
Asian or Pacific Islander	41	2.50%
Black or African American	196	11.94%

## APR Template – Part C (4)

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State

Hispanic	58	3.53%
White	1345	81.91%
Total	1638	100%

Note: Four respondents were identified in the data system as “other” or “unknown” race. These respondents were proportionally distributed among the other categories.

Table 2: Sex Distribution of Children Represented by Questionnaire Respondents

Sex	Questionnaire Respondents	
Female	682	41.53%
Male	960	58.47%
Total	1642	100%

Table 3: Age Distribution of Children Represented by Questionnaire Respondents

Age Range	Questionnaire Respondents	
0-1	8	0.49%
1-2	546	33.25%
2-3	1088	66.26%
Total	1642	100%

### Analysis of Representativeness of Response

For FFY2008, 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 October 1, 2008 and were still in the program and had a current IFSP at the end of the fiscal year, on June 30, 2009. In using Ohio’s most recent 618 data for comparison, Tables Four, Five and Six display representativeness in race/ethnicity, sex and age.

Table 4: Race and Ethnicity Distribution of Questionnaire Respondents and 618 Data

Race/Ethnicity	Questionnaire Respondents		618	
American Indian or Alaska Native	2	0%	53	0%
Asian or Pacific Islander	41	3%	288	2%
Black or African American	196	12%	2890	19%
Hispanic	58	4%	881	6%
White	1345	82%	10728	72%
Total	1638	100%	14840	100%

Table 5: Sex Distribution of Questionnaire Respondents and 618 Data

Sex	Questionnaire Respondents		618	
Female	682	42%	6063	41%
Male	960	58%	8777	59%
Total	1642	100%	14840	100%

Table 6: Child Age Distribution of Questionnaire Respondents and 618 Data

Age Range	Questionnaire Respondents		618	
0-1	8	0.49%	2663	18%
1-2	546	33%	4840	33%
2-3	1088	66%	7337	49%
Total	1642	100%	14840	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 are below the expected distribution in spite of our efforts to encourage the participation of families in the response pool falling into either category, underrepresentation among both categories is not uncommon in survey research.

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 October 1, 2008 and were still in the program on June 30, 2009. Age of the respondents' child was calculated based on the June 30, 2009 date. As a result, any child to falling in to the 0-1 category would had to have become eligible between July 1, 2008 and September 30, 2008 between the ages of zero and three months, which represents a very small cross-section of our families. Ohio chose this 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 FFY2008:**

- A. 94 percent indicates slippage from 96 percent performance reported for FFY2007
- B. 94 percent indicates slippage from 96 percent performance reported for FFY2007
- C. 92 percent indicates slippage from 95 percent performance reported for FFY2007

Although slippage from the previous year's performance is observable for Indicators 4A, B and C, Ohio did meet targets for these indicators. This slippage, in addition to a decline in response rate from the previous year is attributable to a change in questionnaire distribution methodology. In FFY2006 and 2007, Ohio's Service Coordinators delivered questionnaires to families' homes and provided them in person. In FFY2008, Ohio mailed questionnaires directly to families using addresses associated with families in the statewide data system in order to alleviate the resource burden in-person administration may cause due to substantial budget decreases at the time of questionnaire administration. The change in distribution methodology contributed to the decline in response rates in many ways. One major reason for the decline could be that some addresses entered into the data system are either outdated or were never accurately keyed in. By virtue of the Service Coordinators' contact with the family in the home, the Service Coordinators are more likely to be able to locate families, regardless of how the address appears

in the data system. Another major factor may simply be related to the fact that the questionnaire was not distributed in person. In the past, Ohio chose to distribute questionnaires in person specifically because potential respondents are more likely to participate in a survey if asked to in person, specifically someone whose relationship has already been established prior to questionnaire distribution. Further, departure from the hand-delivery method of questionnaire distribution to prospective respondents may also be responsible for slippage in outcomes. Without consistent distribution methodology across administration years, it is difficult to compare results and expect consistent outcomes. During FFY05, for example, Ohio used a similar distribution methodology to that employed in FFY08. The table below shows the differences in methodology across years and how the results vary based upon distribution methodology. Comparing administration years in which the same method of distribution is used shows substantially more consistent results.

Table 7: Comparison of Family Questionnaire Response Rates and Results Across Administration Years, by Method of Administration

<u>Distribution Year (FFY)</u>	<u>Distribution Method</u>	<u>Response Rate</u>	<u>Indicator 4A</u>	<u>Indicator 4B</u>	<u>Indicator 4C</u>
2005	Mailed	24%	91%	91%	91%
2006	Hand delivered	41%	95%	95%	94%
2007	Hand delivered	44%	96%	96%	95%
2008	Mailed	31%	94%	94%	92%

In addressing this slippage for FFY09, Ohio intends to return to the administration methodology used in FFY07 and '06, where Service Coordinators hand-delivered questionnaires to families on their caseloads with the intention of raising response rate and results for indicator 4A, B and C to FFY07 levels, should budgetary constraints loosen to allow for the investment of state and local staff resources required in earlier distribution methodologies.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

<b>Improvement Activities for Indicator 4</b>	<b>Timeline</b>	<b>Resources</b>
1. Creation of an educational seminar 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.	FFY 2009	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ Family Information Network</li> <li>➤ Family Engagement committee of Ohio Family and Children First Council</li> </ul>
2. Review survey data annually & process for distribution to determine areas for continuous improvement a. Decision was made due to budget reasons to mail survey rather than have county staff hand deliver	Annually & ongoing	<ul style="list-style-type: none"> <li>➤ HMG Evaluation committee</li> <li>➤ BEIS staff</li> </ul>
3. Revise Parents Rights brochure		
4. Revise Family Support Policy		
5. Provide further guidance on the use of a birth		

**APR Template – Part C (4)**

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Part C State Annual Performance Report (APR) for FFY2008

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	1.3% of infants and toddlers birth to age one year will have IFSPs.

**Actual Target Data for FFY2008:**

1.8 percent of infants and toddlers birth to age one year had IFSPs for FFY2008. 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, 2009 of 2,663 and the 2008 population estimate of 152,581.

[Source: U.S. Bureau of the Census. Population data for 2008 accessed August 2009 from 'http://www.census.gov/popest/states/asrh/files/SC-EST2008-AGESEX-RES.CSV]

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

Comparing Ohio to Other States`

Ohio ranks 9<sup>th</sup> 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," 2008. Data updated as of August 3, 2009.]

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

1.8 percent indicates progress from the 1.7 percent performance reported for FFY2007.

Improvement Activities for Indicator 5	Timeline	Resources
1. Develop a statewide marketing plan in order to increase referrals to Help Me Grow, targeting but not limited to:  a. Parents and the general public; b. Birthing hospitals; c. Hospitals with NICU and/or PICU, level III hospitals;	FFY 2009	<ul style="list-style-type: none"> <li>➤ Help Me Grow 800-number</li> <li>➤ BEIS Data and Training Staff</li> <li>➤ ODH Public Relations</li> <li>➤ County Help Me Grow Outreach</li> </ul>

**APR Template – Part C (4)**

OHIO  
State

<p>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.</p> <p><b>Slippage</b> A statewide marketing campaign did not occur due to continuing budget issues.</p>		<ul style="list-style-type: none"> <li>➤ Public Policy Committee</li> <li>➤ Part C Review group</li> </ul>
<p>2. Develop a policy utilizing the hospital-to-home plan. a. Provide training on the policy; and b. Monitor compliance with the policy.</p> <p><b>Progress</b> The Child Find/Eligibility committee of the Ohio Help Me Grow Advisory Council developed a policy on Transition from Hospital to Home.</p>	FFY 2009	<ul style="list-style-type: none"> <li>➤ HMG Advisory Council</li> <li>➤ Child Find Committee</li> <li>➤ Hospital-Based Child-Find Program</li> <li>➤ BEIS Training Staff</li> <li>➤ BEIS HMG Monitoring Team</li> </ul>
<p>3. Implement specific training on typical and atypical development of infants and toddlers to Help Me Grow staff to increase the referral of infants less than one year of age.</p> <p><b>Progress</b> Training on typical versus atypical child development is a part of the Infant Growth and Development course. The course is offered regional and was offered regionally six (6) times during FFY 2008. During this same time, we offered six (6) trainings on autism spectrum disorders in response to county personnel's communicated uncertainty regarding the disorders and when to refer.</p>	Ongoing	<ul style="list-style-type: none"> <li>➤ HMG Advisory Council</li> <li>➤ BEIS Training Staff</li> </ul>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

**Part C State Annual Performance Report (APR) for FFY2008**

**Overview of the Annual Performance Report Development:**

**Monitoring Priority: Effective General Supervision Part C / Child Find**

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	2.8% of infants and toddlers birth to age three years will have IFSPs.

**Actual Target Data for FFY2008:**

3.3 percent of infants and toddlers birth to age one year had IFSPs for FFY2008. 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, 2009 of 14,840 and the 2008 population estimate of 451,248.

[Source: U.S. Bureau of the Census. Population data for 2008 accessed August 2009 from 'http://www.census.gov/popest/states/asrh/files/SC-EST2008-AGESEX-RES.CSV]

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

Comparing Ohio to Other States

Ohio ranks 15<sup>th</sup> 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," 2008. Data updated as of August 3, 2009.]

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

3.3 percent indicates progress from the 3.0 percent performance reported for FFY2007.

Improvement Activities for Indicator 6	Timeline	Resources
1. Develop a statewide marketing plan in order to increase referrals to Help Me Grow, targeting but not limited to: <ul style="list-style-type: none"> <li>a. Parents and the general public;</li> <li>b. Birthing hospitals;</li> <li>c. Hospitals with NICU and/or PICU, level III hospitals;</li> <li>d. Physicians, clinics, WIC;</li> <li>e. Job and Family Services (JFS), Child</li> </ul>	FFY 2009	<ul style="list-style-type: none"> <li>➤ Help Me Grow 800-number</li> <li>➤ BEIS Data and Training Staff</li> <li>➤ ODH Public Relations</li> <li>➤ County Help Me Grow Outreach</li> <li>➤ Public Policy Committee</li> </ul>

**APR Template – Part C (4)**

<p>Welfare agencies; f. The Hospital-Based Child-Find Program; g. Childcare providers; h. Childcare resource and referral agencies; and i. Agencies representing homeless families.</p> <p><b>Slippage</b></p> <p>a. A statewide marketing campaign did not occur due to continuing budget issues.</p>		<ul style="list-style-type: none"> <li>➤ Part C Review group</li> </ul>
<p>2. Develop a policy utilizing the hospital-to-home plan. a. Provide training on the policy; and b. Monitor compliance with the policy.</p> <p><b>Progress</b></p> <p>The Child Find/Eligibility committee of the Ohio Help Me Grow Advisory Council developed a policy on Transition from Hospital to Home.</p>	<p>FFY 2009</p>	<ul style="list-style-type: none"> <li>➤ HMG Advisory Council</li> <li>➤ Child Find Committee</li> <li>➤ Hospital-Based Child-Find Program</li> <li>➤ BEIS Training Staff</li> <li>➤ BEIS HMG Monitoring Team</li> </ul>
<p>3. Implement specific training on typical and atypical development of infants and toddlers to Help Me Grow staff to increase the referral of infants less than one year of age.</p> <p><b>Progress</b></p> <p>Training on typical versus atypical child development is a part of the Infant Growth and Development course. The course is offered regional and was offered regionally six (6) times during FFY 2008. During this same time, we offered six (6) trainings on autism spectrum disorders in response to county personnel's communicated uncertainty regarding the disorders and when to refer.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ HMG Advisory Council</li> <li>➤ BEIS Training Staff</li> </ul>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

Part C State Annual Performance Report (APR) for FFY2008

Overview of the Annual Performance Report Development:

**Monitoring Priority: Effective General Supervision Part C / Child Find**

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

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

**Measurement:**

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

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

FFY	Measurable and Rigorous Target
2008-2009	100% 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.

**Actual Target Data for FFY2008:**

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 11/17/2008 to 2/14/2009 timeframe were examined electronically. A sample of records was then verified to ensure accurate reporting. 2,340 of the 2,495 children examined, or 94 percent, were compliant.

The 2,340 records counted as being compliant includes 668 that were non-timely due to documented extraordinary family circumstances. These 668 records are included in the numerator and denominator.

The 155 noncompliant records are deemed as such for the following reasons:

- 36 percent for insufficient evaluation slots
- 35 percent for staff oversight/error
- 26 percent for staff scheduling/availability

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

94 percent indicates maintenance at the 94 percent compliance reported for FFY2007.

For the 64 EIS programs determined to have corrected noncompliance in a timely manner for this meeting 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. 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.

Improvement Activities for Indicator 7	Timeline	Resources
<p>1. Expand and standardize developmental evaluations across Ohio.</p> <p>a. Collaborate with ODE to create a state system to align evaluations for Part C and Part B.</p> <p>b. Create Developmental Evaluation Teams across the state to conduct developmental evaluations.</p> <p><b>Progress</b> Developmental Evaluation and Assessment teams were put in place in eleven (11) counties through a Provider Agreement with the Department and began conducting evaluations and assessments in February 2008. Now in our second year, data are beginning to become available regarding the extent to which the teams are helping with standardization.</p> <p><b>Slippage</b> ODH and ODE had preliminary conversations about creating a state system to coordinate evaluations for Part C and Part B through collaboration with the Education Service Centers (ESCs). However, due to changes in operations for the ESCs progress was not made on this activity. However, with a planned lead agency change to Education in the near future, this collaboration is highly likely.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ Ohio Department of Health and partnering state agencies (ODE, ODODD, OFCF)</li> <li>➤ County Developmental Evaluation providers</li> <li>➤ NECTAC</li> <li>➤ North Central Regional Resource Center</li> </ul>
<p>2. Develop and implement a plan to remove barriers identified by counties on surveys, including: barriers that require a moderate level of intervention</p> <p><b>Progress</b> The Service Delivery Committee developed and recommended statewide use of a developmental evaluation and assessment form containing all required components, and developed a guidance document that explained all components. The committee also developed a Service Coordinator (SC) checklist to assist SC with meeting timelines (45-day timelines) and completing requirements timely. The state also now requires each county to conduct evaluations and assessments using either the Bayley Scales of Infant Development-III or the Battelle Developmental Inventory-2 thus providing more consistency across the state. Moreover, service coordinators and other program staff have been offered training (both beginner and advanced) in order to assure they understand the tools.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ Ohio Department of Health and partnering state agencies (ODE, ODODD, OFCF)</li> <li>➤ County Developmental Evaluation providers</li> <li>➤ NECTAC</li> <li>➤ North Central Regional Resource Center</li> <li>➤ County Project Directors and Family and Children’s First Coordinators/ Councils</li> <li>➤ Help Me Grow Advisory Council</li> <li>➤ Service Delivery Committee</li> <li>➤ Part C Review</li> </ul>

<p>3. Continue to monitor this indicator via ODH's web-based data system, Early Track, and on site focused monitoring visits.</p> <p><b>Progress</b> 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>	<p>Ongoing</p>	<p>group</p> <ul style="list-style-type: none"> <li>➤ ODH data and monitoring teams</li> <li>➤ state partners</li> <li>➤ local partners</li> </ul>
<p>4. ODH will provide technical assistance to counties who are identified with noncompliance in this area.</p> <p>TA was provided to all counties with noncompliance in 45 days. Counties identified as either significant noncompliance or continuing noncompliance received intensive TA</p>	<p>ongoing</p>	<ul style="list-style-type: none"> <li>➤ ODH HMG TA staff and state partners</li> </ul>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

The Compliance Agreement work plan includes the following improvement activities, timelines and resources for this report.

<p>EIS. 1C.</p>	<p>ODH will report on the:</p> <ol style="list-style-type: none"> <li>(1) Percent of infants and toddlers (including numbers used in calculation) with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.</li> <li>(2) Extent of the delay for infants and toddlers not included in the percentage under (1) above to include, by county, the total number of children who exceeded 45-days, the average number of days exceeded, and the maximum number of days exceeded.</li> <li>(3) Reasons for delay in meeting the 45-day timeline requirement for (2) above, including lack of evaluation personnel in either a specific discipline or county, family reasons e.g., family cancelled/rescheduled, child ill/hospitalized, unable to locate family, unable to obtain consent, waiting for medical/provider reports, service coordinator or evaluator unavailability or other reasons.</li> </ol>	<p><u>April 2009</u></p> <p>In April 2009, ODH reported an updated its baseline SFY08 data for the 45 day timeline reported in its December 08 report. Attached is Table A, in which ODH is providing an update on the status of the counties identified with findings. ODH, on a monthly basis, examines Corrective Action Plan (CAP) log data from these counties to determine if they have corrected their non-compliance. As the table indicates, we have not yet received sufficient data to determine if correction has occurred for many counties. There are several counties (4) who appear to have corrected, but ODH has not yet verified the data. ODH will provide an update on the status of these four counties and the others in its next quarterly report.</p> <p>In its June 2009 Quarterly report, ODH provided updated information on the status of the counties identified with findings. ODH, on a monthly basis, examines Corrective Action Plan (CAP) log data from these counties to determine if they have corrected their non-compliance. As the table indicates, 7 counties have corrected their noncompliance. Seven counties appear to have corrected, but ODH has not yet verified the data. Three counties continue to demonstrate noncompliance. ODH TA staff is working with these counties to strategize ways in which to correct their noncompliance. Two of the three counties have been instructed to write CAPS detailing strategies to correct the</p>
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		<p>noncompliance. ODH will provide an update on the status of these 10 counties (i.e., those 7 who appear to have corrected but need to be verified &amp; the 3 whose data continues to demonstrate noncompliance) in its next quarterly report.</p> <p>The October 2009 report indicated that ODH, on a monthly basis, examines Corrective Action Plan (CAP) log data from these counties to determine if they have corrected their non-compliance. As the table indicates, all counties have corrected their noncompliance except:</p> <p>Ashtabula - TA/monitoring call recently held</p> <p>Licking – we are verifying their correction</p> <p>Lucas – on site visit scheduled for November 2009</p> <p>Van Wert – TA/monitoring call recently held</p>
EIS. 2C.	<p>ODH will collect and analyze data related to completion of vision and hearing status as part of the developmental evaluation and assessment process for children referred to Part C.</p>	<p>In ODH’s June 2009 quarterly report, ODH noted that it looks at all components of 45 day timelines (i.e., vision screening, hearing screening, IFSP, evaluation/assessment) for each child record simultaneously. If any of those components was offered beyond the 45 day timeline, then the entire record is considered noncompliant. Consequently, when ODH reports that local programs were issued a finding in 45 day timeline in EIS 1C, it is also reporting on the vision &amp; hearing component. ODH does not separate vision &amp; hearing screening; therefore, does not provide a separate analysis in EIS 2C.</p>
EIS. 3F.	<p>ODH will analyze compliance data identified in EIS. 1C. above in the 10 - 15 additional counties monitored with new revised process to identify root causes of non-compliance and to determine if revised process clearly identifies and helps correct noncompliance.</p>	<p>See GS 3F for progress on this activity.</p>

Data Submitted by ODH with its October 2009 Compliance Agreement Quarterly Report  
45 Days Compliance Update  
October 2009 OSEP Quarterly Report

Table A				
45 Day Compliance				
County	Baseline Compliance	Update as of 3/23/09	Update as of 6/26/09	Update as of 9.3.09
Adams	91%	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Ashtabula	71%	No update – need 2 months of CAP log data. Will update with next quarterly report	87% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	81% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county
Clinton	80%	No update – need 2 months of CAP log data. Will update with next quarterly report	Correction of noncompliance was verified.	n/a
Coshocton	63%	No update – need 2 months of CAP log data. Will update with next quarterly report	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Cuyahoga	92%	87% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Delaware	62%	No update – need 2 months of CAP log data. Will update with next quarterly report	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Fairfield	48%	ODH recently conducted site visit with county. Issuing report to county in next week.	Correction of noncompliance was verified.	n/a
Licking	94%	85% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	County was required to complete a written Corrective Action Plan (CAP) due to continued noncompliance.	CAP approved. CAP log indicates compliance. In process of verifying data.
Lorain	86%	No update – need 2 months of CAP log data. Will update with next quarterly report	Correction of noncompliance was verified.	n/a
Lucas	92%	69% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	County was required to complete a written Corrective Action Plan (CAP) due to continued noncompliance.	Corrective Action Plan has been revised & approved. On site visit scheduled for Nov. 2009
Ottawa	93%	CAP log indicates compliance. In process of	Corrective Action Plan (CAP) log indicates	<b>Correction of noncompliance</b>

**APR Template – Part C (4)**

OHIO  
State

		verifying data. [NOTE: EIS Program failed this verification process]	compliance. In process of verifying data.	<b>was verified.</b>
Ross	93%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Sandusky	78%	No update – need 2 months of CAP log data. Will update with next quarterly report	Correction of noncompliance was verified.	n/a
Scioto	81%	No update – need 2 months of CAP log data. Will update with next quarterly report	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Van Wert	57%	No update – need 2 months of CAP log data. Will update with next quarterly report	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	[NOTE: EIS Program failed previous verification process] 75% CAP log data. Does not meet threshold to correct non-compliance.
Vinton	50%	No update – need 2 months of CAP log data. Will update with next quarterly report	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Wood	93%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a

Part C State Annual Performance Report (APR) for FFY2008

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
2008-2009	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 FFY2008:**

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	820	98
b. Children exiting Part C whom do not have an IFSP with transition steps and services	21	2
TOTAL	841	100

Ohio used monitoring data from its 2009 self assessment to determine its compliance percentage for this indicator. Children who had a Transition Planning Conference between July 1, 2008 and June 30, 2009 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. All of Ohio’s 88 county programs were represented in the analysis. Transition steps and services were included on IFSPs for 820 of the 841 or 98 percent child records examined.

Of the 21 noncompliant cases:

- Thirteen were initially noncompliant per local programs’ self-report
- Eight were determined to be noncompliant due to data/documentation error, as identified during ODH’s verification process

<b>B. Notification to the LEA, if child potentially eligible for Part B</b>	<b>Number of children</b>	<b>percent of children</b>
a. Children exiting Part C and potentially eligible for Part B for whom notification to the LEA occurred	6297	87
b. Children exiting Part C and potentially eligible for Part B for whom notification to the LEA did not occur	948	13
<b>TOTAL</b>	<b>7245</b>	<b>100</b>

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, 2008 and January 31, 2009 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 7,245 children who fit the criteria of being potentially eligible for Part B services, LEAs were notified of 6297 (87 percent).

Of the 948 noncompliant cases:

- Two percent (or 20 records) were not present in one program’s submission and ODH could therefore not verify that those children were reported
- The remaining 98 percent (or 928 records) of noncompliant cases showed evidence that the reports were submitted past the submission deadline

<b>C. Transition Planning Conferences</b>	<b>Number of children</b>	<b>percent of children</b>
a. Children exiting Part C and potentially eligible for Part B for whom a TPC should have occurred	1793	94
b. Children exiting Part C and potentially eligible for Part B for whom a TPC occurred no later than 90 days before their 3 <sup>rd</sup> birthday	107	6
<b>TOTAL</b>	<b>1900</b>	<b>100</b>

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 4/1/2009 to 6/29/2009 timeframe were

examined electronically. A sample of records was then verified to ensure accurate reporting. 1,793 of the 1,900 children examined, or 94 percent, were compliant.

The 1,793 records counted as being compliant includes 274 that were non-timely due to documented extraordinary family circumstances. These 274 records are included in the numerator and denominator.

The 107 noncompliant records are deemed as such for the following reasons:

- 47 percent for LEA scheduling issues
- 35 percent for staff oversight/error
- 19 percent for data/documentation errors

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

A. 98 percent indicates slippage from 99 percent compliance reported for FFY2007.

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 FFY2007 for children who were still in the corresponding EIS program.

B. 87 percent indicates slippage from 90 percent compliance reported for FFY2007.

For the 2 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 the correction of each individual case of noncompliance from FFY2007 for children who were still in the corresponding EIS program.

C. 94 percent indicates progress from 89 percent compliance reported for FFY2007.

For the 24 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 FFY2007 for children who were still in the corresponding EIS program.

**Slippage**

Slippage in compliance for indicator 8A can be attributed to an increase in local EI Programs' self-reported noncompliance (13 records) and in noncompliance due to inadequate documentation that verifies the self-reported data (eight records). Statewide, a total of 12 counties received findings in this area, of which three received Corrective Action Plans. All counties who have received findings in this area will be subject to data and documentation requests to assure correction in the spring of 2010. One county was shown to have not corrected their FFY07 finding in this area and will continue to submit data and documentation to ODH as a condition of their CAP. This county has received a Focused Monitoring visit and intensive technical assistance in the area of Transition and ODH will continue to work with them to improve their compliance in this area.

The decrease in compliance for indicator 8B is primarily due to two counties submitting reports to the LEAs past the deadline. Both counties demonstrated correction when submitting quarterly reports to the LEAs in a compliant manner. One of the above-mentioned EI Programs additionally submitted reports to ODH with portions missing. Children listed on the missing portions of the report are reported above as the 20 records not submitted ODH. ODH will be issuing a memorandum that reminds EI Programs to submit this report in its entirety to all LEAs in a timely manner and will specify documentation must be submitted to ODH. The EI Program that submitted the report with portions missing will be reminded specifically that the entire report must be submitted to all LEAs. There were no applicable cases in which child-specific correction could be made, as children on the report not reported to the LEAs reached the age of three.

Improvement Activities for Indicator 8	Timeline	Resources
<p>1. Establish a mechanism to develop a shared database that documents the transition process across Part C and Part B systems.</p> <p>ODE and ODH continue to work on a plan for implementation of the State School Identifier (SSID). The Information Technology staff of both agencies met with external contractor for ODE that assigns the SSID to determine the required data fields. A contractor has been hired to develop software to code the data back into Early Track once a SSI has been assigned. Test files have been sent to the external contractor for ODE.</p>	FFY 2009	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ ODE, possible contract with external entity</li> </ul>
<p>2. Provide additional information for families that support transition activities.</p> <p>With a newly revised and OSEP approved Transition at Age 3 policy, ODH implemented the Opt-out option. The language is included on the IFSP and county programs were trained on the new requirement in September 2009. Moreover, counties now provide information to local education agencies quarterly instead of once a year.</p>	Ongoing	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ ODE</li> <li>➤ HMG Advisory Council</li> <li>➤ Transition Committee</li> </ul>
<p>3. Establish a web-based tutorial for all HMG service coordinators, and LEA transition representatives as identified by ODE, specific to the IDEA regulations for Part C and Part B, HMG policy, process, and protocols in transitioning children exiting HMG at age three years to Special Ed preschool and other community programs.</p> <p>The training is in its last stages of editing and is due to post to our web-based training portal by March 1, 2010.</p>	FFY 2009 and ongoing	<ul style="list-style-type: none"> <li>➤ ODH</li> <li>➤ ODE, contract with NCRRC</li> <li>➤ HMG Advisory Council</li> <li>➤ Transition Committee</li> </ul>
<p>4. 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 Transition Planning Conference compliance report and TPC Corrective Action Plan (CAP) log found in</p>	Ongoing	<ul style="list-style-type: none"> <li>➤ ODH data and monitoring teams</li> <li>➤ state partners</li> <li>➤ local partners</li> </ul>

Early Track. Reports are designed for counties to monitor their compliance data		
<p>4. ODH will provide technical assistance to counties who are identified with noncompliance in this area.</p> <p>TA was provided to all counties with noncompliance in Transition. Counties identified as either significant noncompliance or continuing noncompliance received intensive TA</p>	ongoing	➤ ODH HMG TA staff and state partners

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

The Compliance Agreement work plan includes the following improvement activities, timelines and resources for this report.

Item	Activity	Progress to Date
TP. 1E.	<p>ODH will collect and analyze the following data from its monitoring system and ET 3.0 for compliance with transition plans on the IFSP and transition planning conferences.</p> <p>Data on children receiving services under Part C and exiting Part C at age three who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including:</p> <ol style="list-style-type: none"> <li>1. The number and percentage with IFSPs with transition steps and services; and</li> <li>2. The number and percentage of children potentially eligible for Part B for whom the transition conference was conducted, with the approval of the family, at least ninety days prior to the child’s third birthday.</li> </ol> <p>Explanations as to why the percentages in 1 and 2 above are less than 100%.</p>	<p>In April 2009, ODH provided OSEP with an update on the status of the counties identified with findings regarding Transition Planning Conferences occurring in a timely manner. ODH, on a monthly basis, examines Corrective Action Plan (CAP) log data from these counties to determine if they have corrected their non-compliance. Twenty-three counties were issued findings in 2008 related to Transition Planning Conferences held in a timely manner. To date, twelve counties have corrected their finding. Seven counties appear to have corrected. ODH is in the process of verifying the correction. ODH will provide an update on the status of these seven counties and the others in its next quarterly report.</p> <p>Attached is Table D, in which ODH is providing an update on the status of the counties, identified with findings regarding IFSPs with transition steps. Four counties were issued findings in this area. All four counties have corrected their findings.</p> <p>The June 2009 report stated that twenty-three counties were issued findings in 2008 related to Transition Planning Conferences held in a timely manner. To date, 18 counties have corrected their finding. The remaining 5 counties appear to have corrected. ODH is in the process of verifying the correction. ODH will provide an update on the status of these 5 counties and in its next quarterly report.</p> <p>ODH also reported that four counties were issued findings regarding IFSPs with transition steps. Four counties were issued findings in this area. All four counties have corrected their findings.</p>

		In its October 2009 report, ODH reported that twenty-three counties were issued findings in 2008 related to Transition Planning Conferences held in a timely manner. All counties have corrected their findings.
TP. 1F.	ODH will stratify counties by critical indicators to identify what counties need technical assistance related to transition.	<p>The April 2009 report indicated that ODH is providing targeted technical assistance to the twenty-six (26) counties who are in CAPs related to transition. The list of counties was submitted in the previous Quarterly Report.</p> <p>In June ODH stated that Since the noncompliance was identified, ODH has provided targeted technical assistance to the twenty-six (26) counties who were issued CAPs related to transition. Any county whose data is not verified will continue to receive targeted technical assistance.</p>
TP. 1G.	ODH will provide technical assistance to identified counties based on priorities and critical indicators as demonstrated by the data collected.	In its 2009 reports, ODH indicated that the report on TA to the 26 counties was submitted in the December 2008 report.
TP. 2C.	ODH will analyze data related to transition process to ensure compliance.	See response to TP. 1E.

Data Submitted by ODH with its October 2009 Compliance Agreement Quarterly Report  
Transition Compliance Update  
October 2009 OSEP Quarterly Report

Table C				
Transition Planning Conference Compliance				
County	Baseline Compliance	Update as of 3/23/09	Update as of 6/26/09	Update as of 9.3.09
Ashtabula	33%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Carroll	50%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Coshocton	71%	CAP log indicates compliance. In process of verifying data.	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Delaware	57%	86% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Erie	75%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Fairfield	86%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Hamilton	88%	89% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Knox	64%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Licking	83%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Lorain	58%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Lucas	81%	89% CAP log data. Does not meet threshold to correct non-compliance. TA staff working with county.	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>
Madison	88%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Medina	88%	Corrective Action Plan completed.	n/a	n/a

**APR Template – Part C (4)**

		Noncompliance corrected.		
Mercer	86%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Monroe	50%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Montgomery	77%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Perry	89%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Richland	86%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Stark	90%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Trumbull	86%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Tuscarawas	73%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Van Wert	71%	CAP log indicates compliance. In process of verifying data.	Correction of noncompliance was verified.	n/a
Vinton	60%	No applicable children to analyze transition data.	Corrective Action Plan (CAP) log indicates compliance. In process of verifying data.	<b>Correction of noncompliance was verified.</b>

Table D				
IFSPs with Transition Steps Compliance				
County	Baseline Compliance	Update as of 3.23.09	Update as of 6/26/09	Update as of 9.3.09
Columbiana	80%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Cuyahoga	90%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Richland	86%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a
Wayne	80%	Corrective Action Plan completed. Noncompliance corrected.	n/a	n/a

**Part C State Annual Performance Report (APR) for FFY2008**

**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
2008-2009	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 FFY2008:**

99 percent of findings of noncompliance identified were corrected within one year, or 150 of 152 total findings of noncompliance issued during FFY07.

Indicator/Indicator Clusters	General Supervision System Components	# of EIS programs issued findings in FFY2007 (7/1/07 – 6/30/08)	(a) # of EIS findings of noncompliance identified in FFY2007 (7/1/07 – 6/30/08)	# 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	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site	63	63	62

**APR Template – Part C (4)**

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State

manner	visits or other			
	Dispute resolution: complaints, hearings	3	3	3
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	65	65	64
	Dispute resolution: complaints, hearings	2	2	2
8. percent of children exiting Part C who received timely transition planning to support the child's transition to preschool & other appropriate	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

**APR Template – Part C (4)**

community services by their 3 <sup>rd</sup> birthday including  A. IFSPs with transition steps & services				
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 <sup>rd</sup> 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 <sup>rd</sup> birthday including  C. Transition Conference, if child potentially eligible for Part B	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	1	1	1
	Dispute resolution: complaints, hearings	0	0	0
Others areas of Noncompliance	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	2	3	3
	Dispute resolution: complaints, hearings	3	15	15

# APR Template – Part C (4)

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At the request of OSEP, ODH is reporting the following information regarding findings that were issued in FFY08 and FFY09.

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
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

**APR Template – Part C (4)**

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 children exiting Part C who received timely transition planning to support the child's transition to preschool & other appropriate community services by their 3 <sup>rd</sup> birthday including  A. IFSPs with transition steps & services	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	4	4	4
	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 <sup>rd</sup> 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 <sup>rd</sup>	Monitoring activities: self-assessment/Local APR, data review, desk audit, on site visits or other	24	24	24
	Dispute resolution: complaints, hearings	0	0	0

# APR Template – Part C (4)

OHIO  
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birthday including  C. Transition Conference, if 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	23
	Dispute resolution: complaints, hearings	6	13	13

### 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)	<b>152</b>
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)	<b>150</b>
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>2</b>

### 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)	<b>2</b>
5. Number of findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	<b>1</b>
6. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	<b>1</b>

For most methods (self-assessment, statewide analysis of information from the data system) of monitoring local programs’ compliance and performance, data from all 88 local programs are analyzed. 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 150 EIS programs determined to have corrected noncompliance 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 FFY2007 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 FFY2007 for children who were still in the corresponding EIS program as appropriate.

For the 2 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. Subsequently, 1 of the EIS programs did have 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 FFY2008:**

Improvement Activities for Indicator 9	Timeline	Resources
<p>1. Determine factors that would be used to implement a performance-based funding formula.</p> <p><b>Progress</b> ODH incorporated compliance with the 45 day timelines and transition planning conferences as incentive based funding in its funding formula to counties.</p>	SFY 2009 & ongoing	<ul style="list-style-type: none"> <li>➤ HMG Advisory Council Funding Workgroup</li> <li>➤ ODH staff</li> </ul>
<p>2. Develop process for progressive sanctioning and/or incentives for non-correctors of non-compliance.</p> <p><b>Progress</b> Counties with continued noncompliance will face various forms of sanctioning such as ODH placing a special condition on the county's Help Me Grow grant which will specify how the grant will be spent in order to address the continuing area of noncompliance.</p>	Ongoing	<ul style="list-style-type: none"> <li>➤ HMG Advisory Council Funding Workgroup</li> <li>➤ ODH staff</li> </ul>
<p>3. Review complaint information (e.g., mediations, due process hearing, investigations) to determine areas of non-compliance and identify trends.</p> <p><b>Progress</b> The state's focused monitoring system now includes complaint information during all of its desk audits before visiting a county program. Moreover, the state now regularly uses complaint information to determine, in part, when an on-site monitoring visit is necessary.</p>	Ongoing	<ul style="list-style-type: none"> <li>➤ ODH staff</li> </ul>
<p>4. Review and monitor county corrective action plans to assure correction of noncompliance areas within one year of identification of complaints.</p>	Within one year of complaint	<ul style="list-style-type: none"> <li>➤ ODH staff</li> </ul>
<p>5. Provide technical assistance or training as needed to assure correction of noncompliance.</p>	As outlined in corrective	<ul style="list-style-type: none"> <li>➤ ODH staff</li> <li>➤ State partners</li> </ul>

	action plan	
6. Notify Director of Health of continued noncompliance, in order to impose sanctions as appropriate.	As needed for Any complaints with noncompliance	➤ ODH staff

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

The Compliance Agreement work plan includes the following improvement activities, timelines and resources for this report.

Item	Activity	Progress to Date
GS. 1B.	Convene the interagency group that shall include a representative from ODE, ODMRDD, and any other Part C State participating agency that will be a party to an Interagency Agreement with ODH.	<p>In its April 2009 report, ODH stated that <u>the</u> Governor’s Office, the Early Childhood Cabinet and the Ohio Family and Children First Cabinet Directors continue to meet on a regular basis to review program recommendations and determine the future direction of the program. The Deputy Directors who represent the child serving state agencies of the Ohio Family and Children First Council are reviewing program recommendations, policy changes and are making recommendations for approval to the Cabinet Directors.</p> <p>Pending Budget Bill language includes the following: “The Department of Health shall enter into an interagency agreement with the Department of Education, Department of Mental Retardation and Developmental Disabilities, Department of Job and Family services, and Department of Mental Health to ensure that all early childhood programs and initiative are coordinated and school linked.” The budget bill is currently going through the legislative process and is supposed to be past by June 30, 2009.</p> <p>This activity and activities GS. 1C., 1D, and 1E will be re-visited after the passage of the Budget Bill.</p> <p>The October 2009 report indicated that the following language was approved in House Bill 1 on July 2009: “The Director of the Center for Early Childhood Development, in partnership with staff from the Department of Education, the Department of Job and Family Services, the Department of Health, and any other state agency as determined necessary by the Governor and the Superintendent, and advised by the Early Childhood Advisory Council, shall submit an implementation plan to the Superintendent and the Governor not later than December 31, 2009. The</p>

		implementation plan shall include research and recommendations regarding all of the following: (1) The identification of programs, services, and funding sources to be transferred from other state agencies to the Department of Education; (2) A new administrative structure within the Department of Education for the purpose of implementing early childhood programs and services; (3) Statutory changes necessary to implement the new administrative structure within the Department of Education; (4) A timeline for the transition from the current administrative structure within other state agencies to the new administrative structure within the Department of Education.” [HB 1: 265.70.10—p. 2836]
GS. 1C.	Submit draft Interagency Agreement(s) to OSEP for review and comments.	April 2009 See above progress on this activity.
GS. 1D.	Revise draft Interagency Agreement(s) to incorporate comments from OSEP.	April 2009 See above progress on this activity.
GS. 1E.	Obtain signatures of parties on Interagency Agreement(s) and; disseminate and implement Interagency Agreement(s).	<u>10/09</u> Attachment 1 provides a copy of the interagency agreements we have with ODMRDD and ODE.
GS. 2E.	ODH will submit recommendations for state statute and administrative rule changes.	In October 2009, the quarterly report indicated that Recommendations for state statute changes and rule changes are currently being reviewed and considered by ODH legal and legal staff in the Governor’s Office. The Ohio Help Me Grow Advisory Council Executive Order language was codified in the state Budget Bill (House Bill 1) in July 2009.
GS. 3F.	ODH will analyze compliance data on 10 - 15 additional counties monitored with revised process to identify root causes of non-compliance and to determine if revised process clearly identifies and helps correct noncompliance.	The April 2009 report stated that ODH submitted its plan for focused monitoring to OSEP in July 2007. In that plan, ODH indicated that we have moved towards a more focused monitoring process and revised self-assessment process. ODH is using its data system, Early Track, to assess county compliance for various federal indicators.  In the December 2008 report submitted to OSEP, five (5) counties did not correct their noncompliance in the 45 day timeline area from 2007. Since the initial identification of noncompliance, three of the counties received on-site monitoring visits and are in a Corrective Action Plan (Ashtabula, Delaware, and Lorain). Three counties also were issued General Supervision CAPs due to non-compliance in multiple areas (Ashtabula, Delaware and Lorain). An additional county received an on-site visit in February (Fairfield) and Coshocton County will be visited before June 30, 2009. The root causes were examined for the continued non-compliance. The counties have submitted revised Corrective Action Plans with the updated

		<p>root cause data and strategies to align with the updated root cause information. The counties are required to submit:</p> <ol style="list-style-type: none"> <li>1. Monthly CAP log data to ODH so that we can monitor their progress;</li> <li>2. ODH will re-examine CAP log data in May 2009. If the finding is not corrected at that time, ODH will special condition the county's SFY 2010 (beginning July 1, 2009) grant and direct the use of the funds to address this area of noncompliance.</li> </ol> <p>According to our previous Quarterly Compliance Agreement report, there were five (5) counties that had not corrected their non-compliance with the TRS requirement during the past year (Delaware, Fairfield, Lucas, Muskingum, &amp; Vinton).</p> <p>The root causes were examined for the continued non-compliance and the counties have submitted revised Corrective Action Plans and strategies to align with the updated root cause data. The counties are required to submit monthly CAP log data to ODH so that we can monitor progress. ODH will also re-examine CAP log data in May 2009. If the finding is not corrected at that time, ODH will special condition the county's SFY 2010 (beginning July 1, 2009) grant and direct the use of the funds to address this area of noncompliance.</p> <p>The June 2009 update is as follows: In the December 2008 report submitted to OSEP, five (5) counties did not correct their noncompliance in the <u>45 day timeline area from 2007</u>. Since the initial identification of noncompliance, all 5 of the counties received on-site monitoring visits and are in a Corrective Action Plan (Ashtabula, Coshocton, Delaware, Fairfield and Lorain). Four of the counties also were issued General Supervision CAPs due to non-compliance in multiple areas (Ashtabula, Coshocton, Delaware and Lorain). The root causes were examined for the continued non-compliance. The counties have submitted revised Corrective Action Plans with the updated root cause data and strategies to align with the updated root cause information. The counties are required to submit:</p> <ol style="list-style-type: none"> <li>3. Monthly CAP log data to ODH so that we can monitor their progress;</li> <li>4. In its March 2008 report, ODH stated that it would look at CAP log data in May 2009. If the finding was not corrected at that time, ODH would special condition the county's SFY 2010 (beginning July 1, 2009) grant and direct the use of the funds to address this area of noncompliance. Two of the five counties (i.e., Fairfield and Lorain) have corrected their 45 Day timeline non-</li> </ol>
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		<p>compliance and 2 others (i.e., Coshocton and Delaware) appear to have corrected; ODH is in the process of verifying their data. Ashtabula continues to be noncompliant. However, due to a difficult fiscal situation, ODH will be delaying the possible Special Condition until the second quarter payment. ODH will update OSEP on this matter with its next quarterly report.</p> <p>According to our previous Quarterly Compliance Agreement report, there were five (5) counties that had not corrected their non-compliance with the <u>TRS requirement</u> during the past year (Delaware, Fairfield, Lucas, Muskingum, &amp; Vinton). However, in January 2009 it was determined that Vinton had corrected its SFY07 TRS noncompliance. That correction should have been noted in the March 2009 report but was not.</p> <p>The root causes were examined for the continued non-compliance and the counties have submitted revised Corrective Action Plans and strategies to align with the updated root cause data. The counties are required to submit monthly CAP log data to ODH so that we can monitor progress. In its March 2008 report, ODH stated that it would look at CAP log data in May 2009. If the finding was not corrected at that time, ODH would special condition the county's SFY 2010 (beginning July 1, 2009) grant and direct the use of the funds to address this area of noncompliance. Two of the counties (i.e., Fairfield and Muskingum) have corrected their TRS timeline non-compliance. Delaware appears to have corrected but ODH is in the process of verifying their data. Lucas continues to be noncompliant. ODH has scheduled an on site visit for Lucas in November 2009.</p> <p><u>Below is the October 2009 update:</u> ODH submitted its plan for focused monitoring to OSEP in July 2007. In that plan, ODH indicated that we have moved towards a more focused monitoring process and revised self-assessment process. ODH is using its data system, Early Track, to assess county compliance for various federal indicators.</p> <p>In the December 2008 report submitted to OSEP, five (5) counties did not correct their noncompliance in the <u>45 day timeline area from 2007</u>. Since the initial identification of noncompliance, all 5 of the counties received on-site monitoring visits and are in a Corrective Action Plan (Ashtabula, Coshocton, Delaware, Fairfield and Lorain). Four of the counties also were issued General Supervision CAPs due to non-compliance in multiple areas (Ashtabula, Coshocton, Delaware and Lorain). The root causes were examined for the continued non-compliance. The counties</p>
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		<p>have submitted revised Corrective Action Plans with the updated root cause data and strategies to align with the updated root cause information. The counties are required to submit:</p> <ol style="list-style-type: none"> <li>5. Monthly CAP log data to ODH so that we can monitor their progress;</li> <li>6. In its March 2008 report, ODH stated that it would look at CAP log data in May 2009. If the finding was not corrected at that time, ODH would special condition the county’s SFY 2010 (beginning July 1, 2009) grant and direct the use of the funds to address this area of noncompliance. Four of the five counties (i.e., Coshocton, Delaware, Fairfield &amp; Lorain) have corrected their 45 Day timeline non-compliance. Ashtabula continues to be noncompliant. Recently ODH staff held a conference call with the county to discuss their continuing noncompliance in which we discussed the reasons for the continuing noncompliance. County has agreed to speed up its data entry process so we can look at current data to determine if they have made correction. County was verbally warned that the 3<sup>rd</sup> quarter payment might be withheld if correction does not occur.</li> <li>7. According to our previous Quarterly Compliance Agreement report, there were five (5) counties that had not corrected their non-compliance with the <u>TRS requirement</u> during the past year (Delaware, Fairfield, Lucas, Muskingum, &amp; Vinton). However, in January 2009 it was determined that Vinton had corrected its SFY07 TRS noncompliance. That correction should have been noted in the March 2009 report but was not.</li> </ol> <p>The root causes were examined for the continued non-compliance and the counties have submitted revised Corrective Action Plans and strategies to align with the updated root cause data. The counties are required to submit monthly CAP log data to ODH so that we can monitor progress. Since the last report, Delaware County has corrected its noncompliance. Lucas County appeared to have corrected but the verification process did not support that correction. ODH has scheduled an on site visit for Lucas in November 2009.</p>
GS. 3H.	Begin implementation of progressive sanctioning and/or incentive process.	In its April 2009 Compliance Agreement report, ODH stated that counties that did not correct their noncompliance identified last fall were required to submit a technical

		<p>assistance plan to ODH as the first step in the progressive sanctioning process. Additionally, these counties were required to:</p> <ol style="list-style-type: none"> <li>1. Re-examine the Corrective Action Plan originally submitted to ODH with the updated root cause data. Revise the CAP to align strategies with the updated root cause information</li> <li>2. Continue to submit monthly CAP log data to ODH so that we can monitor progress</li> </ol> <p>ODH will re-examine CAP log data in May 2009. If the finding is not corrected at that time, ODH will special condition the county's 2010 grant and direct the use of the funds to address this area of noncompliance.</p> <p><u>The October 2009 report indicated that counties that did not correct their noncompliance identified last fall were required to submit a technical assistance plan to ODH as the first step in the progressive sanctioning process. Additionally, these counties were required to:</u></p> <ol style="list-style-type: none"> <li>3. Re-examine the Corrective Action Plan originally submitted to ODH with the updated root cause data. Revise the CAP to align strategies with the updated root cause information</li> <li>4. Continue to submit monthly CAP log data to ODH so that we can monitor progress</li> <li>5. In the March 2009 report to OSEP ODH stated that it would issue special conditions on the county's 2010 grant if the finding was not corrected at that time. As was noted above the special condition process has been delayed until the second quarter of SFY2010.</li> </ol> <p>Almost all counties have corrected. Calls have been made by ODH TA &amp; monitoring staff to Ashtabula &amp; Van Wert counties. The calls were to discuss what the data &amp; documentation appears to indicate are problems areas for the counties. Counties were warned that 3<sup>rd</sup> quarter payments might be withheld if correction is not made. Licking County appears to have corrected; we are in the process of verifying their correction. Lucas County is receiving an on site visit in November.</p>
GS. 3I.	ODH will monitor 20-30 additional counties with the revised process.	See GS 3F for progress on this activity.
EIS. 3F.	ODH will analyze compliance data identified in EIS. 1C. above in the 10 - 15 additional counties monitored with new revised process to identify root causes	See GS 3F for progress on this activity..

	<p>of non-compliance and to determine if revised process clearly identifies and helps correct noncompliance.</p>	
<p>EIS. 3H.</p>	<p>ODH will provide technical assistance to identified counties based on priorities and critical indicators as demonstrated by the data collected.</p>	<p>ODH continues to provide targeted technical assistance to those counties who continue to demonstrate noncompliance.</p>
<p>EIS. 4A.</p>	<p>ODH will conduct a needs assessment to identify available services and gaps in services.</p>	<p>ODH reported in its April 2009 report that ODH in partnership with the Ohio Department of Administrative Services (DAS) developed a proposal for a cost study analysis. The vendor activities related to the cost study analysis are being reviewed and revised.</p> <p>The Service Delivery committee of the Ohio Help Me Grow Advisory Council also presented a plan to the Council on March 11, 2009 moving towards an Evidenced-Based service delivery model for early intervention services. The plan included the use of transdisciplinary teams for evaluation and assessment and service delivery. The group continues to meet to further layout the details for implementation.</p> <p>The Executive Director of the Early Childhood Cabinet plans to convene a workgroup this summer to look at Part C services, funding and Part C eligibility.</p> <p>June 2009 ODH in partnership with the Ohio Department of Administrative Services (DAS) developed a proposal for a cost study analysis. A vendor has been chosen and is working on the following activities:</p> <ul style="list-style-type: none"> <li>• Gathering cost information on Part C services in Ohio using time studies, salaries surveys, &amp; gathering data on administrative costs associated with Part C</li> </ul> <p>The Service Delivery committee of the Ohio Help Me Grow Advisory Council also presented a plan to the Council on March 11, 2009 moving towards an Evidenced-Based service delivery model for early intervention services. The plan included the use of transdisciplinary teams for evaluation and assessment and service delivery. The group continues to meet to further specify details for implementation.</p> <p>The Executive Director of the Early Childhood Cabinet plans to convene a workgroup in summer 2009 to examine Part C services, funding and Part C eligibility.</p> <p>In October 2-009, ODH reported that the Executive Director</p>

		of the Early Childhood Cabinet plans to convene a workgroup in Fall 2009 to examine Part C services, funding and Part C eligibility.
EIS. 4B.	As part of the needs assessment, ODH will obtain and analyze data from its Part C system and ODMRDD on the impact of its system of payments on the availability of EI services in a timely manner and the 45-day timeline.	In 2009 ODH reported that the cost study analysis will help inform ODH about the cost of EI services. The Funding committee of the Ohio Help Me Grow Advisory Council is also reviewing the EI system of payment and will make recommendations through the Council to the Department for changes for improvement in the process.
EIS. 4C.	As part of the needs assessment, ODH will explore its ability to maximize use of all funding sources, including Medicaid, Title V and other potential State sources by coordinating with ODMRDD and Ohio’s Medicaid agency	In 2009 ODH reported that the cost study analysis will help inform ODH about the cost of EI services. Also, ODH is in conversation with the Ohio Department of Job and Family Services Office of Medicaid about coordinating the use of Medicaid for EI services.
EIS. 4D.	ODH will submit draft plan to OSEP for review.	In 2009, ODH stated that it will submit the final results of the cost study when completed, to OSEP in the fall of 2009, with recommendations for next steps.
EIS. 4F.	ODH will continue to recruit new EI service providers.	In 2009, ODH stated that it continues to recruit more specialty providers as well as more Medicaid providers in the state to be a part of the EI System of Payment. The Governor created an Executive Medicaid Management Administration (EMMA) to examine and improve Medicaid administration and policy. ODH has several staff involved in various committees, including provider recruitment. EMMA is exploring unified provider recruitment, processing and payment.

Part C State Annual Performance Report (APR) for FFY2008

Overview of the Annual Performance Report Development:

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

**Indicator 10:** Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

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

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

FFY	Measurable and Rigorous Target
2008-2009	100% 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 FFY2008:**

60% 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. One of the 6 complaints were withdrawn. Five (5) of the signed written complaints resulted in a written report with findings. Three (3) of the 5 complaints was resolved within the 60-day required timeline.

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

**Slippage** is a result of reduced staff and increased job responsibilities has led to failing to meet the target for the second year in a row. The protocol timeline has been adjusted to meet the timeline for report to the family within 60 days of the complaint received in writing. Additionally, new checklists and tools have been created to inform all of the timeline and their response expectations, resulting in an improvement over last year

Improvement Activities for Indicator 10	Timeline	Resources
1. Initiate complaint resolution procedure as outlined in the Procedural Safeguards Policy.	Ongoing - as complaints occur	➤ ODH staff and/or local Family and Children First Council
<b>2. Monitor resolution of complaint within required timelines.</b>  <b>Progress</b> The state revised its internal timelines so that every person involved in reading, editing, and signing off on a complaint report and/or letter is aware of the timeline and how long he/she has to provide comment.	Ongoing - as complaints occur	➤ ODH staff and/or local Family and Children First Council

<p>3. Monitor activities within complaint report.</p> <p><b>Progress</b> 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>➤ ODH staff and/or local Family and Children First Council</p>
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**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

The revised protocol and procedures for an investigation report includes allowing three (3) weeks for approval through ODH approval process.

Part C State Annual Performance Report (APR) for FFY2008

Overview of the Annual Performance Report Development:

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	100% of fully adjudicated due process hearing requests are fully adjudicated within the applicable timeline.

**Actual Target Data for FFY2008:**

ODH received no requests for hearings during this time period.

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

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)	➤ ODH staff
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)	➤ ODH staff
4. Monitor for resolution within required timelines.	Within 30 days of receipt of request for administrative hearing (for activities 1-4)	➤ ODH staff

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**  
*[If applicable]*

**Part C State Annual Performance Report (APR) for FFY2008**

**Overview of the Annual Performance Report Development:**

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	Not applicable - Ohio Part C does not use Part B due process procedures.

**Actual Target Data for FFY2008:**

n/a

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

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

**Part C State Annual Performance Report (APR) for FFY2008**

**Overview of the Annual Performance Report Development:**

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

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

FFY	Measurable and Rigorous Target
2008-2009	86% of mediations held will result in mediation agreements.

**Actual Target Data for FFY2008:**

50% of mediations held resulted in mediation agreements. During this period, ODH received four (4) requests for mediation. Two of the mediations resulted in agreements. None of the mediation agreements were related to a hearing request.

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

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
4. Monitor for implementation of mediation agreement within required timelines.	Within 60 - 90 days following mediation agreement.	➤ ODH staff/other participants

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**  
*[If applicable]*

**Part C State Annual Performance Report (APR) for FFY2008**

**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
2008-2009	100% of State reported data, including 618 data, State performance plan, and annual performance reports, are: <ul style="list-style-type: none"> <li>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</li> <li>b. Accurate (describe mechanisms for ensuring accuracy).</li> </ul>

**Actual Target Data for FFY2008:**

93 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 (7/1/08 – 6/30/09).

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

93 percent indicates slippage from the 100 percent reported for FFY2007.

The slippage is the result of 618 table submissions being sent to Westat in an untimely manner. In the future ODH will work to produce the 618 tables prior to their submission in draft form and circulate internally for review. Once the 618 table are reviewed by internal personnel the final tables will be completed and sent to Westat from a single point of contact at ODH to avoid internal miscommunications.

Improvement Activities for Indicator 14	Timeline	Resources
1. Revise Web Based data system (Early Track).  ODH Data and IT staff continue to implement upgrades in Early Track to capture compliance and performance data for several indicators.	Ongoing	<ul style="list-style-type: none"> <li>➤ BEIS staff</li> <li>➤ OMIS staff and vendor</li> </ul>

# APR Template – Part C (4)

<p>2. Revise Early Track reports.</p> <p>Reports have been developed in ET 3.0 with additional reports continuing to be developed ongoing.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ BEIS staff</li> <li>➤ OMIS staff</li> <li>➤ County program input</li> </ul>
<p>3. Report data to Westat/OSEP by required timelines.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ BEIS staff</li> <li>➤ Early Track</li> </ul>
<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>Training continues to be developed &amp; offered to county staff.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ BEIS staff</li> <li>➤ Early Track</li> </ul>
<p>5. Implement various data verification strategies with counties.</p> <p>Verified data related to compliance (i.e., transition, 45 days, Timely receipt of services as well as some demographic data).</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>➤ BEIS staff</li> </ul>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008:**

*[If applicable]*

## Help Me Grow Family Questionnaire

September 2009

Dear Parent/Caregiver:

Ohio's Help Me Grow Program is interested in your opinion regarding Help Me Grow services. Your family was one selected to help us determine what works with Help Me Grow as well as what improvements you feel could be made through a short questionnaire. Our intent is to assist with program and service improvement efforts at the federal, state, and local levels.

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 back of the last page of the survey to identify yourself.
3. Go online to <http://hmg.cmrinc.com/hmgfs09> and complete the questionnaire. Use the ID# on the back of the last page of the survey to identify yourself.

We have indicated a unique ID# on the survey to assist us in looking at responses at both a state and county level. Also, you will need to refer to this number when using option 2 or 3.

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

All responses are completely confidential. Be assured that at no time will your individual responses be shared with others. All responses will be reported in groupings so that individual responses can not be identified. The 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 2009 will be available to view on Ohio's Help Me Grow website: <http://www.ohiohelpmegrow.org>.

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. 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 you have any questions, please feel free to contact Mary Alice Hamnett at (614) 644-8389.

**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 <b>poor</b> job of helping us know our rights		Help Me Grow has done a <b>fair</b> job of helping us know our rights		Help Me Grow has done a <b>good</b> job of helping us know our rights		Help Me Grow has done an <b>excellent</b> 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 <b>poor</b> job of helping us communicate our child’s needs		Help Me Grow has done a <b>fair</b> job of helping us communicate our child’s needs		Help Me Grow has done a <b>good</b> job of helping us communicate our child’s needs		Help Me Grow has done an <b>excellent</b> 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 <b>poor</b> job of helping us help our child develop and learn		Help Me Grow has done a <b>fair</b> job of helping us help our child develop and learn		Help Me Grow has done a <b>good</b> job of helping us help our child develop and learn		Help Me Grow has done an <b>excellent</b> 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 <b>poor</b> job in helping us to provide an environment in which our child can develop and learn.		Help Me grow has done a <b>fair</b> job in helping us to provide an environment in which our child can develop and learn.		Help Me grow has done a <b>good</b> job in helping us to provide an environment in which our child can develop and learn.		Help Me grow has done a <b>excellent</b> job in helping us to provide an environment in which our child can develop and learn.

**5. Some children have special health needs, a disability, or are delayed in their development. These are often referred to as “special needs.” How knowledgeable is your family with your child’s special needs?**

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

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

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

**7. Help Me Grow provides families procedures that should be taken should the family want to file a complaint. Are you aware of these procedures?**

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

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

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

**9. Have you participated in the development of a plan for your family while participating in the Help Me Grow Program, known within the program as an IFSP?**

5. Yes
6. No
7. I don't understand this question.
8. I don't remember.

10. Part of the purpose of Help Me Grow is to connect your family with the variety of programs and services available in your community that may be suited to your family’s needs. How effective has Help Me Grow been in making your family aware of programs and services that are available?

1	2	3	4	5	6	7
Help Me grow has done a <b>poor</b> job in making our family aware of programs and services that are available.		Help Me grow has done a <b>fair</b> job in making our family aware of programs and services that are available.		Help Me grow has done a <b>good</b> job in making our family aware of programs and services that are available.		Help Me grow has done an <b>excellent</b> 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 <b>poor</b> job of connecting our family with other families in similar situations.		Help Me grow has done a <b>fair</b> job of connecting our family with other families in similar situations.		Help Me grow has done a <b>good</b> job of connecting our family with other families in similar situations.		Help Me grow has done an <b>excellent</b> job of connecting our family with other families in similar situations.

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

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

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 <b>do not</b> have the childcare we want		We have <b>some</b> childcare, but still have a long way to go before it is what we want		We have <b>good</b> childcare for our child		We have <b>excellent</b> 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 <b>seldom</b> have someone we can rely on for help when we need it		We <b>sometimes</b> have someone we can rely on for help when we need it		We <b>usually</b> have someone we can rely on for help when we need it		We <b>almost always</b> 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 <b>seldom</b> have someone to talk with about things when we need it		We <b>sometimes</b> have someone to talk with about things when we need it		We <b>usually</b> have someone to talk with about things when we need it		We <b>almost always</b> have someone to talk with about things when we need it

16. To what extent do Help Me Grow professionals who worked with your family to plan services or activities treat you with respect?

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

**17. Since your family first entered the program, about how often have you received visits from Help Me Grow professionals in your home?**

1. Never or almost never
2. Two or three times a year
3. Once every couple of months
4. Once a month
5. Two or three times a month
6. About once a week
7. More than once a week
8. I don't understand this question.
9. I don't remember

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

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Very unsatisfied	Unsatisfied	Both Satisfied and Unsatisfied	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  
 Help Me Grow  
 Attn: Survey Results  
 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/hmgfs09](http://www.callogistix.com/hmgfs09) and complete the questionnaire. Use the ID# on the back of the last page of the survey to identify yourself.

Adapted from questionnaire Developed by the Early Childhood Outcomes Center with support from the Office of Special Education Programs, U.S. Department of Education. © 2005 SRI International

**Part C Indicator 14 Data Rubric**

<b>Indicator 14 - SPP/APR Data</b>			
<b><u>APR Indicator</u></b>	<b><u>Valid and reliable</u></b>	<b><u>Correct calculation</u></b>	<b><u>Total</u></b>
<b><u>1</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>2</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>3</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>4</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>5</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>6</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>7</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>8A</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>8B</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>8C</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>9</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>10</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>11</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>12</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
<b><u>13</u></b>	<b><u>1</u></b>	<b><u>1</u></b>	<b><u>2</u></b>
		<b><u>Subtotal</u></b>	<b><u>30</u></b>
<b><u>APR Score Calculation</u></b>	<b><u>Timely Submission Points (5 pts for submission of APR/SPP by February 1, 2010)</u></b>		<b><u>5</u></b>
	<b><u>Grand Total</u></b>		<b><u>35</u></b>

<b>Indicator 14 - 618 Data</b>					
<b><u>Table</u></b>	<b><u>Timely</u></b>	<b><u>Complete Data</u></b>	<b><u>Passed Edit Check</u></b>	<b><u>Responded to Date Note Requests</u></b>	<b><u>Total</u></b>
<b><u>Table 1 – Child Count</u></b> <b><u>Due Date: 2/1/</u></b>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>4</u>
<b><u>Table 2 – Settings</u></b> <b><u>Due Date: 2/1/</u></b>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>4</u>
<b><u>Table 3 – Exiting</u></b> <b><u>Due Date: 11/1/</u></b>	<u>0</u>	<u>1</u>	<u>1</u>	<u>NA</u>	<u>2</u>
<b><u>Table 4 – Dispute Resolution</u></b> <b><u>Due Date: 11/1/</u></b>	<u>0</u>	<u>1</u>	<u>1</u>	<u>N/A</u>	<u>2</u>
				<b><u>Subtotal</u></b>	<u>12</u>
			<b><u>Weighted Total (subtotal X 2.5)</u></b>		<u>30</u>
<b>Indicator # 14 Calculation</b>					
			<b><u>A. APR Total</u></b>	<u>35</u>	
			<b><u>B. 618 Total</u></b>	<u>30</u>	
			<b><u>C. Grand Total</u></b>	<u>65</u>	
<b><u>Percent of timely and accurate data = (C divided by 70 times 100)</u></b>			<b><u>(C) / (70) X 100 =</u></b>		<u>93%</u>