

Part C State Performance Plan (SPP) Revisions for 2007-2010

This plan was revised as of February 1, 2008 based on clarifications provided by the Office of Special Education Programs (OSEP) that this is an impact document. A stakeholders' meeting was held on December 10, 2007 to review the proposed changes. The updated SPP was then sent to all early intervention programs and input was gathered at three statewide provider meetings during December, 2007. In December, the draft revised SPP was posted on Birth23.org.

Substantial Changes:

The stakeholders in Connecticut are very involved in reviewing the Annual Performance Report each year and making suggestions for improvement strategies as needed throughout the year. OSEP clarified that states were to propose the new or modified improvement strategies in the SPP. In addition it was made clear that the indicators should have improvement strategies that span the length of the time covered by the SPP. Finally, since the SPP was last revised in 2006, public reporting of data and determinations have been added as improvement strategies under each applicable indicator. It was not clear until after the SPP was revised that public reporting of data meant only the APR data. Therefore the Program Profiles, which were updated every six months no longer met that requirement. As a result, every indicator has been affected.

Indicator 3: Child progress data was added to this indicator.

Indicator 4: In response to the FFY05 APR letter from OSEP, clarification of the representativeness of Connecticut's results is now described in greater detail. New targets and strategies were proposed.

Indicator 7: This is Connecticut's priority indicator. Many new strategies have been proposed.

Minor Changes

The lead agency name was changed on 10/1/07 from the Department of Mental Retardation to The Department of Developmental Services. This change was made throughout the document whenever needed. In addition, the organization of the Birth to Three division in the lead agency has changed and these subtle wording differences were made for present day meaningfulness.

As the requirements for the SPP/APR/Public Reporting/Determinations/tracking of the correction of non-compliance and deeper analysis of child and family outcomes data have increased, the projected number of focused monitoring visits per year has declined. This was supported by NCSEAM staff who also pointed out that most Focused Monitoring visits would also result in increased requests for Technical Assistance.

The Biennial Performance Report groups were changed from three groups whose reporting was staggered so that one group was reporting every six months to two cohorts one of which files its reports each year.

A number of new strategies had been listed with timelines for when the ongoing activity would begin. These timelines have been changed to "ongoing."

For reference, this updated SPP is posted on Connecticut's Birth23.org website along with the original SPP dated December 1, 2005 and the SPP revised in 2006.

SPP Template – Part C (3)

Connecticut
State

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Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This six-year plan was developed with broad stakeholder input. Data for each indicator was first reviewed in August of 2005 for completeness and accuracy. As needed, clarification letters and exception reports were sent to each of the [then](#) 33 comprehensive early intervention programs to ensure that any data errors were corrected. A combined State Interagency Coordinating Council (ICC) and Focused Monitoring (FM) stakeholders meeting was held on October 17, 2005. In addition, local meetings were held within each region for all Birth to Three programs on September 27, October 12, and October 21. At each meeting, an overview of the plan was presented along with summary data for each indicator. Those present proposed targets, improvement activities, timelines and resources for each indicator as well as modifications to definitions and collection methods as well as the plans for collecting data on new indicators.

Lead agency staff and one Local ICC reviewed a late draft of the plan in early November 2005. A final draft was posted on the Birth to Three website, www.birth23.org and a request for comments was sent to parent advocacy and support programs (Connecticut Parent Advocacy Center, AG Bell, African-Caribbean-American Parents of Children with Disabilities, Family Support Network, Padres Abriendo Puertas, Parents Available to Help, Autism Resource Center, CT Families for Effective Autism Treatment, CT Down Syndrome Congress, Infant Mental Health Association, Early Hearing Detection and Intervention Task Force, Commission on Children) and all 33 Birth to Three programs. This same draft was mailed to the State ICC and a conference call was held to review suggested edits. The Commissioner and Deputy Commissioner of the [Department of Developmental Services \(formerly the Department of Mental Retardation\)](#), the lead agency for IDEA Part C in Connecticut, also reviewed the plan.

The ICC approved the final edits with the understanding that the plan can be modified as needed in future years. This plan fulfills the obligations of the State Interagency Coordinating Council to report to the U.S. Department of Education in the current fiscal year.

A hard copy of this version of the SPP was distributed to all Birth to Three programs, the Connecticut Parent Advocacy Center and the entire stakeholders' group, including the Interagency Coordinating Council. It has been posted on the Birth to Three website at www.birth23.org. The lead agency works closely with the Department of Education on jointly issuing an annual press release to the general media about the Part B and Part C plans.

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.

Overview of Issue/Description of System or Process:

“Timely” is defined in Connecticut as when ALL services begin within 45 days of the family’s signature on the initial IFSP and when any additional service on subsequent IFSPs begins within 45 days of the family’s signature.

Available data: The Connecticut Birth to Three data system contains IFSP service information. The system also captures the dates on which services are delivered each month.

According to Connecticut Statute 17a-248e(c) the IFSP must be developed in consultation with the child’s pediatrician or primary care physician. In order to ensure, at a minimum, that the child’s physician is aware that the child is eligible for Part C and what types of outcomes and services have been designed, Birth to Three procedures require that services may not begin until after the child’s primary physician signs the initial IFSP. This may delay the start of services in some cases.

Service delivery: Connecticut procedures encourage use of a primary interventionist. While each IFSP is unique, a review of data indicates that in implementing transdisciplinary service delivery, most children receive a weekly visit from their primary interventionist with less frequent visits or joint visits from other disciplines.

Connecticut analyzes the data for this indicator based on a point in time. For all IFSPs that are in effect on the date selected, the number of days from the IFSP signature to the first occurrence of each newly planned service is calculated. If the plan that is in effect is an initial IFSP, then the system calculates the number of days for ALL the services listed on the plan. If the plan that is in effect is a periodic review, the system calculates the number of days for those services that were new on that IFSP. If ANY service with a projected start date within 45 days from the IFSP signature date is started more than 45 days from the IFSP signature date, the entire record is determined to not be timely.

Baseline Data for FFY 2004 (2004-2005):

The baseline data for FFY 2004 is no longer accurate based on the current guidance from OSEP with regard to how to measure the data for this indicator.

Discussion of Baseline Data:

FFY 2005 data reflected below is the NEW baseline data.

Using a point in time, on 6/30/06, 1636 children had IFSPs that were either initial IFSPs or periodic reviews with a new service. 1486 of those 1636 had all initial or new services begin within 45 days of the IFSP meeting when the parent signed the IFSP.

In 107 instances, services were untimely due to documented extraordinary family circumstances. This was verified by emails to each program regarding every late service.

$(1486+107) / 1636 = 97\%$ of all new services were timely.

Since the measurement of this indicator was changed mid-year, the point in time used was at the very end of FFY05, therefore a more thorough analysis will be presented in the APR due Feb 1, 2008.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Focused Monitoring

This indicator has recently been chosen by the focused monitoring stakeholders group as the new selection measure for the [Service Delivery](#) priority area: “All children and families receive quality early intervention services.” The next round of program rankings will use this selection measure and low-performing programs will be selected for on-site visits. Based on the data described above, more large programs may be selected than small programs. However, all low performing programs will participate in data verification.

Timeline: [Ongoing](#) *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team ([Accountability and Monitoring](#) Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System / Performance Dashboard

The Birth to Three Data system was modified for FFY06/SFY07 to more easily identify services listed on IFSP reviews as “New” (since all services on initial IFSPs are considered new). During SFY07, this measure will be added to the performance dashboard (a data display of each program’s performance) and the Biennial Performance Report (BPR) system. SFY06 was a critical year for clarifying how this indicator should be measured. As with transition conferences and IFSPs, the number of delays due to program error is expected to drop significantly.

Timeline: July 2007 *Resources:* System Developer, Local EI Programs.

Currently, each program has a module in the real-time data system called the “Performance Dashboard” which displays data being monitored by the lead agency. Each program will be given real-time access to the data for this indicator. Programs view their performance for a three-month period and update it as often as needed. To help them identify any problems, they’ll be able to see the list of records used for that sample. Stakeholders that are provided

ready access to this information will be able to assist in quickly identifying barriers to compliance. [This data will be added to the performance dashboard as of July 2008.](#)

Timeline: July 2008 *Resources:* Accountability and Monitoring Team, Data System Programmer, Data Users Group

A reminder for the programs will be developed in the Birth to Three data system that will notify staff whenever a new service is recorded as beginning more than 45 days from the IFSP meeting. Also, a report will be developed that will list all currently eligible children for whom more than 30 days have passed since the IFSP meeting without new services being delivered.

Timeline: January 2009 *Resources:* System Developer

Data Verification

This will continue throughout the term of the SPP. The automated reporting will increase in accuracy as will providers' understanding of the correct way to code services as "New". Data Verification will then move on to verifying at the program level that the data that is entered is valid. On-site visits will continue to confirm documentation of extraordinary family circumstances. Programs will continue to receive bi-weekly updates from the [Accountability and Monitoring](#) team about ways to improve data accuracy. The data users group will continue to meet to provide input.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Data System Programmer, Data Users Group

A data verification/exception report will be sent to programs for any new services that start more than 45 days from the IFSP meeting after each point-in-time collection.

Timeline: Annually *Resources:* Accountability and Monitoring Team

The accuracy with which a program enters IFSP and service utilization data clearly impacts the measurement of this indicator. As the data is made public in program profiles and in focused monitoring ranking tables, the system will work to assure a common understanding about the most correct way to enter services planned and delivered.

Timeline: July 2008 *Resources:* Part C Director, Accountability and Monitoring Team, Data System Programmer

Complaints

[Complaint data will be monitored to measure the extent to which timely services is a problem and NOT identified through monitoring or the data system.](#)

Timeline: Ongoing *Resources:* Lead Agency Staff

Biennial Performance Report (BPR)

The measurement of timely services will be added to the statewide self-assessment and improvement tracking system for the next cycle of self assessments. Any programs found to be out of compliance on this measure will correct the non-compliance as soon as possible but in no case more than 12 months from identification.

Timeline: September 2007 – 2011 *Resources:* Accountability and Monitoring Team, Data System Programmer

Public Reporting of APR Data

[The data by program for this indicator will be posted every Spring on Birth23.org and shared with the ICC through the year.](#)

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Determinations

Determinations will be made every Spring and this will continue to be an indicator used in that process.

Timeline: Annually

Resources: Accountability and Monitoring Team

Program Profiles

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These include a variety of demographics and performance data for each program, both for the size grouping into which the program falls and for the state as a whole. Since this is a new measure, the data will be added to the program profile. This measure was chosen as a selection measure for focused monitoring; therefore the program's rank within their size grouping will also be included.

Timeline: The profiles are updated on the website periodically. This measure was added to the profile in January 2006 and then removed in 2008 since the public reporting tables were published.

Resources: Accountability and Monitoring Team, Child Find/Public Awareness Coordinator, Child Development Infoline (the statewide intake office contractor for the Birth to Three System).

Department of Developmental Services Business Plan

This measure was added to the lead agency's business plan for SFY06. Data was reported out each quarter. Note: as of July 2006 the three regional offices were centralized. This measure was replaced in 2007 with three measures related to Indicator 7

Timeline: Ongoing

Resources: Accountability and Monitoring Team, Part C Director

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.¹

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

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Overview of Issue/Description of System or Process:

From the re-design of its system and change of lead agency in 1996, Connecticut has put tremendous emphasis on serving children in natural environments. Serving children in natural settings has been a part of our Mission Statement since that time. Connecticut published Service Guidelines on providing services in Natural Environments in 1997.

Each year, the lead agency completes data verification to ensure that IFSPs include a justification for services that cannot be provided in a natural environment. This is completed by selecting records based on two measures:

- 1) The primary service is not Home or a Setting Designed for Typically Developing Children
- 2) The program has indicated in the data system that there is a service that cannot be provided in a natural setting.

The [Accountability and Monitoring](#) Team contacts each program and requests copies of the justifications.

618 data indicated (for the primary service setting only):

Year	Number Served in Natural Environments (NE)	Number of Children Served	Percent of Children Served in NE
12/1/03	3687	3701	99.62%
12/1/02	4019	4033	99.65%
12/1/01	3869	3879	99.74%
12/1/00	3777	3794	99.55%

Baseline Data for FFY 2004 (2004-2005):

618 data indicated (for the primary service setting only):

Year	Number Served in Natural Environments (NE)	Number of Children Served	Percent of Children Served in NE
12/1/04	3935	3948	99.67%

¹ At the time of the release of this package, revised forms for collection of 618 State reported data had not yet been approved. Indicators will be revised as needed to align with language in the 2005-2006 State reported data collections.

Discussion of Baseline Data:

Connecticut places great value on the importance of working with families during typical daily routines in a variety of settings that are natural for the child and family. This drives many procedures, documents, and training activities and is an integral part of the observation checklist that is used in our process of credentialing direct service providers.

Since 12/1/01 the number of children receiving services in a setting other than Home or a Setting Designed for Typically Developing Children has never been below 95%. As there will always be a few children for whom early intervention cannot be achieved in a natural environment a target of 100% would actually indicate non-compliance.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	95%
2006 (2006-2007)	95%
2007 (2007-2008)	95%
2008 (2008-2009)	95%
2009 (2009-2010)	95%
2010 (2010-2011)	95%

Improvement Activities/Timelines/Resources:

The targets were changed to 95% based on direction from OSEP. This indicator has been a strength of Connecticut's for a number of years. The lead agency will continue to monitor that 100% of IFSPs include justifications for any service in a setting other than home or a setting designed for typical children.

Timeline: Annually *Resources:* Part C Director, [Accountability and Monitoring Team](#)

Connecticut will be working with programs to support the use of the Routines Based Interview process (McWilliam, R. A. Vanderbilt University.) This should shift the focus from where services are provided to how supports are offered to the family which cannot be reflected in settings data.

Timeline: July 2008 *Resources:* [Lead agency Staff](#)

The new autism-specific programs may required close monitoring early on regarding the location of services provided since it is desirable to have children with difficulty in social interaction in inclusive group settings.

Timeline: July 2009 *Resources:* [Accountability and Monitoring Team](#)

The Natural Environments Guideline will be updated as needed to stay current with best practices.

Timeline: Ongoing *Resources:* [Accountability and Monitoring Team](#)

Focused Monitoring

This will continue to be included in the protocols used for focused monitoring but the analysis is more complex as the protocols explore not just the setting but the extent to which services are integrated into the child's and family's daily routines.

Timeline: Ongoing *Resources:* *Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team (Accountability and Monitoring Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff*

Data Verification

A report is run each year to monitor whether justifications are included in IFSPs for any service not provided in the home or a setting designed for typically developing children. Programs are asked to submit copies of the justifications to the lead agency.

Timeline: Annually *Resources:* *Accountability and Monitoring Team*

This data will be verified during both focused monitoring visits and verification visits each year.

Timeline: Annually *Resources:* *Accountability and Monitoring Team*

Biennial Performance Report (BPR)

A measure was added so that programs will review their evaluation reports for a description of the child and families daily routines. Actual IFSP settings and justifications continue to be measures in the revised BPR.

Timeline: Annually *Resources:* *Accountability and Monitoring Team, EI Programs*

Public Reporting of APR Data

The data by program for this indicator will be posted each Spring on Birth23.org and shared with the ICC through the year.

Timeline: Ongoing *Resources:* *Accountability and Monitoring Team, Child Development Infoline*

Determinations

This will be considered during the determinations made each Spring if identified non-compliance is not corrected within 12 months.

Timeline: Annually *Resources:* *Accountability and Monitoring Team*

Program Profiles - Since February 2005, the lead agency has posted program profiles on birth23.org. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls and for the state as a whole. The data about this indicator will be added to the program profile.

Timeline: June 2006 *Resources:* *Accountability and Monitoring Manager*

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

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

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

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

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

IFSPs assessed)] times 100.

- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

C. Use of appropriate behaviors to meet their needs:

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

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

Overview of Issue/Description of System or Process:

Since 7/1/2001, Connecticut has been collecting data from programs based on the “scores” from curriculum embedded assessments. The scores represent the number of items achieved (“+” = 1 point, “+/-” = ½ point and “-” = 0 points). Over the years, the data has been analyzed and numerous adjustments have been made to the data collection process to ensure accuracy while attempting to decrease the data entry burden placed on providers. 75% of programs use the *Hawaii Early Learning Profile* or *HELP* and the other 25% use the *Carolina Curriculum for Infants and Toddlers with Special Needs* and the *Carolina Curriculum for Preschoolers with Special Needs*. Both of these instruments have been described as “authentic” or “curriculum-embedded” assessments in the early intervention research literature. Until recently the Carolina data could not be easily analyzed because there were two different scoring booklets required to span the 0-36 month age range. The third edition of the *Carolina*, published in 2005, created one scoring booklet from 0-36 months.

Programs were originally informed that this data would only be aggregated on a statewide basis. Since reporting to the public by Early Intervention Program is a requirement of the

SPP/APRs, in August 2005, programs were informed that the data would eventually be added to the program profiles that are posted on birth23.org.

For all children that enter Birth to Three after 1/1/06, data related to each of the three measures in Indicator 3 will be reported using the framework of the Child Outcomes Summary Form developed by the Early Childhood Outcomes (ECO) Center. Using initial assessment data, programs will record a “score” from a 7-point rating scale in the data system. A rating of seven describes a child that shows behaviors and skills expected for his or her age in all or almost all everyday situations that are part of the child’s life. These children will be reported as “at age level”. The rating scale then includes six other ratings that describe children that are not yet at age level.

Programs will continue to be required to update curriculum-embedded assessments so that families can better understand their children’s progress as compared to typical development.

If at least six months of services have been received at the time of exit, the program will again record a rating from the 7-point rating scale in the data system. The ECO analytic tools will be used to report progress.

With parent consent, this data may be passed on to each child’s LEA for possible use in the 619 Child Outcome data collection process.

This new assessment reporting procedure will be issued to all Birth to Three programs as of 1/1/2006. In addition to the HELP and Carolina, providers will also be allowed to use the Assessment, Evaluation and Programming System for Infants and Children (AEPS), second edition, authored by Diane Bricker or any other authentic, curriculum-embedded assessment instrument.

Programs are given the *HELP, Carolina, and AEPS* crosswalks provided by the ECO Center for IFSP teams to use with the Child Outcome Summary Form (COSF).

CHILD Progress Data for FFY 2006 (2006-2007):

This is NOT baseline data. CHILD progress data reported in 2010 will be considered baseline data. The first year of CHILD progress data for children exiting in 2006-2007 is presented in the tables below.

Out of 4381 children who exited in FFY06/SFY07, 1164 entered Birth to Three after 1/1/06 and had two sets of scores. 883 of those had at least six months between their first service and exit dates. Those 883 children are represented below.

Outcome A (Positive social-emotional skills)	Number	Percentage
a: Children who did not improve functioning	9	1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	39	4%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	352	40%
d: Children who improved functioning to reach a level comparable to same-aged peers	376	43%
e: Children who maintained functioning at a level comparable to same-aged peers	107	12%
	total	883
		100%

Outcome B (Acquisition and use of knowledge and skills)	Number	Percentage
a: Children who did not improve functioning	7	1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	30	3%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	339	38%
d: Children who improved functioning to reach a level comparable to same-aged peers	437	49%
e: Children who maintained functioning at a level comparable to same-aged peers	70	8%
total	883	100%

Outcome C (Use of appropriate behaviors to meet their needs.)	Number	Percentage
a: Children who did not improve functioning	6	1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	41	5%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	311	35%
d: Children who improved functioning to reach a level comparable to same-aged peers	476	54%
e: Children who maintained functioning at a level comparable to same-aged peers	49	6%
total	883	100%

Discussion of CHILD Progress Data:

Based on the current measurement table, CHILD progress data reported in 2010 will be considered baseline data.

NOTE: Even though Connecticut started collecting this data earlier than many states (Jan. 1, 2006), there will not be a full three-year cohort until January 1, 2009 which is only half of FFY08/SFY09.

According to the current measurement table, targets for this indicator will be set in the FFY08/SFY09 APR due by February 1, 2010. That will only include six months of children who were referred at birth and who exited at age three. *It will be much more accurate for states to set targets based on data that includes a full year of children who entered at birth and exited at age three.* For Connecticut this will not be possible until the FFY09/SFY10 APR which is due 2/1/2011.

The Accountability and Monitoring manager attended a small meeting with staff from the ECO center and eight other states to begin a preliminary analysis of the COSF data. It was identified that entry data histograms are similar from state to state and age group to age group. There was a slight variation in Connecticut's data as it appeared that the entry data was on average lower than the other states at the meeting and the ECO data. The analysis of which children show the best or worst outcomes is very complex.

Connecticut’s PRELIMINARY exit data was also presented on ECO calls and at the ECO preconference in December 2007. An analysis of change as compared to the age at exit and reasons for exit was explored. It was clear that the FFY06/SFY07 results were skewed by the fact that the children in this preliminary cohort were primarily over 18 months old at entry since the data was not collected until January 1, 2006. (6/30/07-1/1/06=18 months)

We know that children under three do not generalize well nor do they respond to massed trials. Since “early intervention is what happens between visits” it is expected that environmental variables that put young families at risk will also impact child outcome data.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	NA
2006 (2006-2007)	NA
2007 (2007-2008)	NA
2008 (2008-2009)	NA
2009 (2009-2010)	NA
2010 (2010-2011)	TBD

Improvement Activities/Timelines/Resources:

Based on the current measurement table, targets will be set in the APR due 2/1/2010. A more thorough analysis will be conducted with the records that reflect developmental changes from entry to exit including age at referral, referral concern, how eligibility was determined, ICD-9 codes, length of enrollment in Birth to Three at exit and exit reasons.

Timeline: February 2010 *Resources:* Accountability and Monitoring Team

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

Both the National Center for Special Education Accountability and Monitoring and the Early Childhood Outcomes Center have developed a family survey instrument. Both instruments were shared with stakeholders at the meetings described on page 1. There was a high level of interest regarding the literacy levels and overall burden on families in completing a long survey. The ECO survey was judged to involve too much reading, which also made it unsuitable for telephone interviews. Based on this input, the lead agency decided that it would use a customized version of the NCSEAM survey. During January of 2006, the lead agency will convene a meeting with programs and parents to review the item bank developed for that survey and customize it by exchanging some items for other items of similar calibration. The format may also be redesigned to be more family friendly while still being "scantronable." The method of delivery (via mail or by the service coordinator), the population to survey (currently eligible or recently exited) and a contractor for analyzing the results will also be determined. All decisions will be finalized by March 31, 2006.

In response to the FFY05 APR letter from OSEP, clarification of the representativeness of Connecticut's results is now described in greater detail. The state distributes surveys to ALL ELIGIBLE families at a point in time (early spring). This is understood to be a census model for *distribution*. The detailed demographics about the children to whose families survey's were given are then available for comparison to the surveys that are returned completed

and the children reported in that year's 618 child count data. It is not expected, that the representativeness of the response pool will match the census (those to whom surveys were distributed) nor those reported in the target group (618 child count.)

The next step each year is to select random, representative, groups from the response pool. These are selected to match the demographics of the children in the target group. Data from the random representative groups are reported each year. For the purpose of reporting progress and setting targets on this indicator, only the results from the group that matches the target group based on a cross tabulation of Race/Ethnicity X Gender were used.

Baseline Data for FFY 2005 (2005-2006):

4a) 73.2% 4b) 71.1% 4c) 84.4%

Discussion of Baseline Data:

The baseline data for this new indicator is from a version of the NCSEAM Family Survey. Using guidelines provided by NCSEAM for item-swapping, 44 questions were selected by stakeholders and the survey was distributed in Spring 2006 in both English and Spanish. 2622 were distributed; 1561 were hand delivered and 1145 were mailed to families whose children had exited the Birth to Three System in the previous six months. Families that had questions were given the phone number of the Connecticut PTI (Connecticut Parent Advocacy Center) and service coordinators for any family that spoke a language other than English or Spanish were asked to call the lead agency so that a telephone interpreting service could be provided. All families were given the option of responding to the survey online in English or Spanish.

There were 712 surveys completed with return rates based on those distributed as follows: 28% from those that had been hand delivered (441 including 37 that were completed online) 19% from those that had been mailed (218 including 16 that were completed online). 699 were usable for purposes of this analysis.

Group	Indicator 4-A	Indicator 4-B	Indicator 4-C
All Individuals:			
N = 699*			
White = 78%	74.1%	71.2%	84.3%
Black = 6%	95% CI:	95% CI:	95% CI:
Hispanic = 12%	70.7% - 77.2%	67.7% - 74.4%	81.4% - 86.8%
Other = 4%			
Hand Delivered:			
N = 441			
White = 76%	74.8%	71.8%	86.1%
Black = 6%	95% CI:	95% CI:	95% CI:
Hispanic = 15%	70.5% - 78.6%	67.4% - 75.8%	82.6% - 89.0%
Other = 4%			
Mail Delivered:			
N = 218			
White = 83%	70.6%	67.3%	79.4%
Black = 6%	95% CI:	95% CI:	95% CI:
Hispanic = 6%	64.2% - 76.2%	60.8% - 73.2%	73.5% - 84.2%
Other = 4%			

A statistically significant but representative sample of 384 records was randomly selected from the 712 completed surveys to match the race/ethnicity percentages of Part C enrollment as of 12/1/05.

618 Sample	Indicator 4-A	Indicator 4-B	Indicator 4-C
N = 384			
White = 65%	73.2%	71.1%	84.4%
Black = 11%	95% CI:	95% CI:	95% CI:
Hispanic = 20%	68.6% - 77.4%	66.4% - 75.4%	80.4% - 87.7%
Other = 4%			

*CL: Confidence Level, followed by the range

618 Sample By Race/Ethnicity

White/Caucasian (N = 247)	72.1% 95% CI: 66.2% - 77.3%	70.5% 95% CI: 64.5% - 75.8%	84.2% 95% CI: 79.1% - 88.2%
Black or African American (N = 41)	65.9% 95% CI: 50.6% - 78.5%	63.4% 95% CI: 48.1% - 76.4%	80.5% 95% CI: 66.0% - 89.8%
Hispanic or Latino (N = 74)	82.4% 95% CI: 72.2% - 89.4%	78.4% 95% CI: 67.7% - 86.2%	90.5% 95% CI: 81.7% - 95.3%
Asian or Pacific Islander (N = 12)	66.7% 95% CI: 39.1% - 86.2%	66.7% 95% CI: 39.1% - 86.2%	66.7% 95% CI: 39.1% - 86.2%
Unknown (N = 3)	66.7% 95% CI: 20.7% - 93.9%	66.7% 95% CI: 20.7% - 93.9%	66.7% 95% CI: 20.7% - 93.9%

(*Note not all completed surveys could be used due to insufficient responses on all items.)

The baseline reported in this SPP is the percent of the 384 representative records with a measure that met or exceeded the standards provided by NCSEAM (539 for 4a, 556 for 4b, and 516 for 4c).

Connecticut contracted with Randall Penfield, Ph.D. at the University of Miami to use the Rasch method to analyze the percent of families that agreed with the questions related to the three indicators. This method resulted in percentages that were lower than calculating straight percentages from the raw data but the Rasch method produces percentages that factor in a measure of confidence for each response and as a result the percentages reported are more accurate.

In FY07, Alice Ridgway, Accountability and Monitoring Manager, worked with Dr. Penfield to complete the analysis to build capacity in the state instead of contracting out every year.

The targets have to be set each year in part based on the current year's data to assure that at least the change is a statistically significant increase. Using the 2007 survey results, two analyses were completed. First, the confidence intervals were calculated for each sample with a confidence level of 95%. (See FFY06 APR for more detail.) Then, each Estimated Person Measure in the race/ethnicity crosstab sample was increased by 22.3 points. This was based on the standard deviation of the measures divided by the square root of the

SPP Template – Part C (3)

Connecticut
State

sample size (604). That value, 7.9 was multiplied by 2.82 for 22.3 points. The percentages that met the standard for each sub-indicator were then calculated. Finally, stakeholder input was sought. Given the results of all three processes, the proposed targets are below.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	NA - Baseline reported in FFY05 (2005-2006)
2006 (2006-2007)	4a) 77% 4b) 75% 4c) 88%
2007 (2007-2008)	4a) 83%, 4b) 80% 4c) 91%
2008 (2008-2009)	4a) 83%, 4b) 80% 4c) 91%
2009 (2009-2010)	4a) 83%, 4b) 80% 4c) 91%
2010 (2010-2011)	4a) 83%, 4b) 80% 4c) 91%

Improvement Activities/Timelines/Resources:

The survey will be repeated **each Spring** and new targets will be set based on that sample size and results.

Timeline: **Ongoing** *Resources:* **Accountability and Monitoring** team, support staff.

An analysis will be completed to determine whether a statistically significant, and representative sample could have been random selected from only the completed surveys that were hand delivered. If so, the survey may only go to eligible families and the resources from the mailing would be used to send out reminder notices.

Timeline: June 2007 *Resources:* Contracted Statistician, **Accountability and Monitoring** team

An analysis of the return rate by EI program will be completed and the results will be sent to each program along with any comments families wrote on the surveys.

Timeline: February 2007 *Resources:* **Accountability and Monitoring** team

Software will be purchased and staff will be trained to allow the lead agency to complete the RASCH analysis without contracting with an outside statistician.

Timeline: June 2009 *Resources:* **Accountability and Monitoring** team

A flyer about Connecticut's federally-funded Parent Training and Information Center (PTI), Connecticut Parent Advocacy Center or CPAC was included with each survey as an attempt to increase sub-indicator 4b.

Timeline: **Ongoing** *Resources:* **Accountability and Monitoring** team, support staff.

Connecticut will explore ways to increase a representative return rate each year.

Two methods for returning the surveys will be used in Spring 2008; one group of programs will have their families continue to mail them back and the other group will have the families hand them in a sealed envelope to their service coordinators. Some programs expressed that the latter method would be preferable and would result in a higher return rate; other programs expressed disinterest in managing both the distribution and the returns.

Timeline: Ongoing *Resources:* Accountability and Monitoring team, support staff.

Connecticut will be working with programs to support the use of the Routines Based Interview process. It is expected that if this approach is used, sub-indicator 4c) will increase. However, it is important to note that as results improve, the upper limit for statistically significant improvement decreases. Connecticut already has one target at 91%.

Timeline: Ongoing *Resources:* Lead Agency Staff

Family Support Network coordinators will be included as service coordination training faculty and parents will be the bulk of the focused monitoring team. All these efforts are ways to help staff and families understand the importance of parents as leaders which is related to sub-indicator 4b.

Timeline: Ongoing *Resources:* Lead Agency Staff, Family Support Network coordinators.

Focused Monitoring

Family Outcome data will be reviewed during desk audits. Also families and staff are asked whether they have information about the PTI (CPAC) in all three protocols.

Timeline: Ongoing *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team (Accountability and Monitoring Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System

The data system will be modified as of 1/1/08 to begin capturing the new ethnicity and race categories. This may impact the calculations of representativeness now that “more than one” is a reporting option.

Timeline: January 2008 *Resources:* System Developer, Accountability and Monitoring Team, Data Users Group

Data Verification

If any surveys are received with all negative responses and no comments or all positive responses and all very negative comments, a call will be made to the family to verify the responses.

Each program will be given its raw data de-identified along with the average for each measure (families that strongly agreed or very strongly agreed) and the statewide averages. De-identified comments will also be given to programs.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team

Public Reporting of APR Data

The data by program for this indicator is posted each Spring on Birth23.org. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Program Profiles

Family Outcomes will be added to the program profiles.

Timeline: July 2008 *Resources:* Accountability and Monitoring Manager
(A sample of the survey used is attached as Appendix 1)

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

Connecticut has a single point of entry for referrals. The lead agency employs a full time Child Find/Public Awareness Coordinator. All public awareness is the responsibility of the lead agency, not individual early intervention programs. Until recently, Connecticut had been grouped with states using moderate eligibility criteria. That changed in October, 2005 when OSEP placed Connecticut in the narrow eligibility cohort.

Table 8-6 (www.federalresourcecenter.org/frc/sppc.htm), details infants under 1 year of age (excluding infants at risk) receiving early intervention services under IDEA, Part C, by state (in descending order of percent change): 2000 through 2004

	Birth to 1 <u>Child Count</u>	<u>CT 0-1 Pop</u>	<u>CT%</u>	Other States% <u>Mod. Eligibility</u>	<u>CT Rank</u>	<u>National %</u>	<u>CT Rank</u>
12/1/03	419	41,690	.93%	.85%	4	.91%	23
12/1/02	476	43,147	1.14%	.84%	3	.95%	18
12/1/01	442	42,719	1.05%	.83%	6	.90%	19
12/1/00	408	43,604	0.95%	.64%	5	.93%	22

Baseline Data for FFY 2004 (2004-2005):

Table 8-6, details infants under 1 year of age (excluding infants at risk) receiving early intervention services under IDEA, Part C, by state (in descending order of percent change): 2000 through 2004:

	Birth to 1 <u>Child Count</u>	<u>CT 0-1 Pop</u>	<u>CT %</u>	Other States % <u>Moderate Eligibility</u>	<u>CT Rank</u>
12/1/04	441	42,876	1.03%	.87%	5 (out of 16)
	Birth to 1 <u>Child Count</u>	<u>CT 0-1 Pop</u>	<u>CT %</u>	Other States % <u>Narrow Eligibility</u>	<u>CT Rank</u>
12/1/04	441	42,876	1.03%	.75%	5 (out of 16)

SPP Template – Part C (3)

Connecticut
State

	<u>Birth to 1 Child Count</u>	<u>CT 0-1 Pop</u>	<u>CT %</u>	<u>National %</u>	<u>CT Rank</u>
12/1/04	441	42,876	1.03%	.92%	24 (out of 56)

Discussion of Baseline Data:

When grouped with states with narrow eligibility criteria, Connecticut ranks highest for the percent of children served 0-2 (excluding children at-risk). However, Connecticut ranks 5th for the percent of children served under the age of 1. In order for Connecticut to rank highest in the Narrow group, the percent of children served under the age of 1 would need to be over 1.72% therefore it appears that there is room for improvement, if the state is able to support that improvement fiscally. Part C federal funds pay for only 7% of direct services, therefore the majority of the cost of serving additional children is borne by other funding sources.

After the Governor’s SFY04 budget proposed withdrawing Connecticut from Part C of IDEA due to significant growth in the number of children served each year from 1996 - 2003, the lead agency made minor changes to eligibility determinations. The state budget office had directed the lead agency to contain growth, yet there was widespread determination to maintain an entitlement to early intervention services.

Changes that affected eligibility for children under 12 months of age included:

1) changing the definition of “very low birth weight” (a diagnosed condition) from 1000g to 750g; 2) working with our medical advisory committee to make other modifications to the list of diagnosed conditions and 3) eliminating a secondary list of conditions that did not have a high probability of resulting in developmental delay but which, when combined with a moderate delay in one area, could make a child eligible (that secondary list formerly included torticollis). As of 7/1/03, newly referred children with those conditions were not eligible unless they were found to have a developmental delay of 2 SD in one area or a delay of 1.5 in two areas (unlikely for children in this age group). This resulted in a drop in the percent of children served under the age of 1 from 12/1/02 to 12/1/03 as well as a drop in ranking among states with moderate eligibility criteria. The percent and rank have rebounded somewhat, but stakeholders felt that both could still be higher if eligibility for preemies under 1000g were restored or if eligibility were expanded to include other diagnoses.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	1.05%
2006 (2006-2007)	1.1%
2007 (2007-2008)	1.2%
2008 (2008-2009)	1.2%
2009 (2009-2010)	1.3%
2010 (2010-2011)	1.4%

Improvement Activities/Timelines/Resources:

The state will conduct a thorough analysis of the variables related to early diagnosis and referral to form hypotheses about how to best support earlier referrals. Some of variables will include referral sources (specifically birth hospitals), race/ethnicity, language, insurance/income, town of residence, eligibility, diagnoses, and re-referral rates. The state will also explore evaluation instruments best suited for infants in order to determine developmental delay or to help inform clinical opinion of developmental delay.

Timeline: Spring 2006

Resources: Part C Director, [Accountability and Monitoring](#) Team, Child Find/Public Awareness Coordinator,

State Profile

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls and for the state as a whole. Data about this indicator will NOT be added to the program profiles since child find is the sole responsibility of the lead agency. The sub-unit for this indicator will be the county not each Birth to Three program.

Timeline: The state profile will be created by June 2009 and updated every year.

Resources: Part C Director, [Accountability and Monitoring](#) Team, ICC, Lead Agency Staff, Child Find/Public Awareness Coordinator, Child Development Infoline

In order to increase the percent of children served under the age of one, the lead agency, with the consent of the state budget office, would need to reverse some of the modifications made in July 2003 and/or add other categories of diagnosed conditions. Primarily, stakeholders and the Birth to Three Medical Advisory group expressed an interest in raising the birth weight for eligible low birth weight babies from 750 grams to 1000 grams. Other groups such as the newly created Governor's Early Childhood Cabinet are interested in expanding eligibility for Birth to Three in general or adding other groups of children with diagnosed conditions such as those with lead levels of 15 or higher. The [Early Hearing Detection and Intervention](#) Task Force and the Department of Public Health have actively advocated for children with mild or unilateral hearing loss to be eligible. Advocacy groups with an interest in early detection such as lead levels, newborn hearing screening and infant mental health may have an impact on increasing the number of children found eligible for Birth to Three before age one. This will have a fiscal impact on the system and will require an infusion of additional state or federal dollars. It is unlikely that this will occur in the next state fiscal year, but may be possible in SFY2008 when a new biennial budget cycle begins.

Timelines: Reversal of July 2003 modifications – July 2007

Resources: Lead agency Commissioner, ICC, CT Office of Policy and Management, Part C Director

Completed: Birth to Three was the only program to include child and family outcome data as part of a Results Based Accountability process required by the Connecticut General Assembly. This may have impacted the decision to authorize funding for restoring the eligibility changes developed in response to a fiscal crisis in July 2003.

Regardless of changes in the eligibility determination process, child find and public awareness (CF/PA) activities will continue to focus on building connections with newborn screening, Neonatal Intensive Care Units, groups concerned about lead levels, and infant mental health as well as birthing hospitals.

Timeline: Ongoing *Resources:* CF/PA coordinator

Public awareness activities will target primary physicians and hospital discharge planners about how eligibility for Birth to Three is determined and more specifically about the list of diagnosed conditions. This may change significantly based on the outcome of the first two improvement activities listed above

Timeline: Ongoing *Resources:* CF/PA coordinator

Because of the changes in the eligibility determination process for July 2007, child find and public awareness (CF/PA) activities will widely disseminate new products explaining the new information to referral sources, targeting pediatricians and hospitals.

Timeline: Ongoing *Resources:* CF/PA coordinator

The State Early Childhood Cabinet included expansion of Birth to Three eligibility in its top 10 recommendations to the Governor. It has also been adopted as one of the priorities of the State's Children's Poverty and Prevention Council. The recommendation is that Birth to Three be expanded to serve children with mild delays and children at environmental risk of delay. If the recommendation is accepted and funded, the lead agency will respond as directed.

Timelines: Unknown *Resources:* Lead agency Commissioner, ICC, CT Office of Policy and Management, Part C Director

Focused Monitoring

Child Find continues to be a priority area. The protocol focuses on activities at the program level once a referral is sent to a program.

Timeline: Ongoing *Resources:* Focused Monitoring Stakeholders' Group, Part C Director, Focused Monitoring Team (Accountability and Monitoring Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System

The system will be modified to return to the eligibility process used before July 2003. "Follow-Along" services for low birth weight babies will be eliminated since these children will once again be eligible.

Timeline: July 2007 *Resources:* Data System Developer

Public Reporting of APR Data

The data by program for this indicator was posted in each Spring on Birth23.org. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

Connecticut has a single point of entry for referrals. The lead agency employs a full time Child Find/Public Awareness Coordinator. All public awareness is the responsibility of the lead agency, not individual early intervention programs. Until recently Connecticut has been grouped with states using moderate eligibility criteria. As of October, 2005 OSEP has classified Connecticut with states in the narrow eligibility cohort.

Table 8-5 (www.federalresourcecenter.org/frc/sppc.htm), lists infants and toddlers ages birth through 2 (excluding children at risk) receiving early intervention services under IDEA, Part C, by state (in descending order of percentage change): 2000 through 2004

	Birth to 3			Other States%			
	Child Count	CT 0-3 Pop*	CT%	Mod. Eligibility	CT Rank	National %	CT Rank
12/1/03	3701	125,072	2.92%	2.20%	3	2.24%	9
12/1/02	4033	131,661	3.19%	2.20%	3	2.16%	8
12/1/01	3879	130,813	3.02%	2.10%	2	2.00%	6
12/1/00	3794	130,813	2.90%	1.94%	2	1.80%	6

*The population figures are estimates for those used by WESTAT based on the source file at www.census.gov/popest/states/asrh/files/sc_est2004_6race_AL_MO.csv

The data note from the 12/1/03 618 child count data submission reads as follows:
 Due to fiscal exigency, in 2003 Connecticut modified its eligibility criteria for its Birth to Three program. The list of diagnosed conditions was reduced (specifically, Torticollis was removed from the list and the very low birth weight eligibility criteria was redefined.) In addition, children with delays in expressive language only but not a significant delay in the overall communication domain were no longer eligible. These changes resulted in a reduction of the state's Part C eligibility rate from 73% to 65%. In addition, in September of 2003, Connecticut introduced parent fees. This resulted in a high number of families (over 400) withdrawing from the Birth to Three System. Together, these two changes resulted in a lower total child count for 2003. The lower child count for children under the age of 12 months is a direct result of changes to the eligibility criteria.

SPP Template – Part C (3)

Connecticut
State

Baseline Data for FFY 2004 (2004-2005):

Table 8-3 (www.federalresourcecenter.org/frc/sppc.htm), lists infants and toddlers ages birth through 2 (excluding children at risk) receiving early intervention services under IDEA, Part C, by eligibility criteria, age, and state (in descending order of percent of population): 2004

A.	Birth to 3 Child Count	CT 0-3 Pop	CT %	Other States % Mod. Eligibility	CT Rank
12/1/04	3948	127,491	3.10%	2.20%	3 (out of 16)

Table 8-3c (www.federalresourcecenter.org/frc/sppc.htm), lists infants and toddlers ages birth through 2 (excluding children at risk) receiving early intervention services under IDEA, Part C, by eligibility criteria (new), age, and state (in descending order of percent of population): 2004

A.	Birth to 3 Child Count	CT 0-3 Pop	CT %	Other States % Narrow Eligibility	CT Rank
12/1/04	3948	127,491	3.10%	1.73%	1 (out of 16)

B.	Birth to 3 Child Count	CT 0-3 Pop	CT %	National %	CT Rank
12/1/04	3948	127,491	3.10%	2.3%	9 (out of 56)

Discussion of Baseline Data:

When compared to other states with a moderate eligibility definition, Connecticut has ranked among the top three states each year. When compared to other states with a narrow eligibility definition, Connecticut ranks at the top. Nationally, Connecticut has been in the top 10 for this indicator for the past five years.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	3.10%
2006 (2006-2007)	3.10%
2007 (2007-2008)	3.15%
2008 (2008-2009)	3.15%
2009 (2009-2010)	3.15%
2010 (2010-2011)	3.19%

Improvement Activities/Timelines/Resources:

Stakeholders expressed an interest in returning to a process whereby children with expressive language/speech as the only area of a significant delay combined with certain biological factors would be eligible. This would add an estimated 110 children (typically in the 24-36 mo. age range) to the monthly enrollment.

In order to increase the percent of children served under the age of three, the lead agency, with the consent of the state budget office, would need to reverse some of the eligibility modifications made in July 2003 and/or add other categories of diagnosed conditions. Primarily, stakeholders and the Birth to Three Medical Advisory group expressed an interest in raising the birth weight for eligible low birth weight babies from 750 grams to 1000 grams. Other groups such as the newly created Governor's Early Childhood Cabinet are interested in expanding eligibility for Birth to Three in general or adding other groups of children with diagnosed conditions such as those with lead levels of 15 or higher. The [Early Hearing Detection and Intervention](#) Task Force has actively advocated for children with mild or unilateral hearing loss to be eligible.

Since federal Part C funding covers only 7% of direct services, this will have a fiscal impact on the system and will require an infusion of additional state or federal dollars. It is unlikely that this will occur in the next state fiscal year, but may be possible in SFY2008 when a new biennial budget cycle begins.

Timelines: Reversal of July 2003 modifications – July 2007

Resources: Lead agency Commissioner, ICC, CT Office of Policy and Management, Part C Director

State Profile

Since February 2005, the lead agency has posted program profiles on the [birth23.org](#) website. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls, and for the state as a whole.

Child find is the responsibility of the lead agency through a central intake office. Each town in Connecticut is served by at least two and as many as seven local EI programs. A profile will be developed to publicly report this data by county since the sub-unit for child find cannot be the EI program.

Timeline: The state profile will be created by June 2009 and updated every year.

Resources: Part C Director, [Accountability and Monitoring](#) Team, ICC, Lead Agency Staff, Child Find/Public Awareness Coordinator, Child Development Infoline

[Because of the of changes in the eligibility determination process for July 2007, child find and public awareness \(CF/PA\) activities will widely disseminate new products explaining the new information to referral sources and target pediatricians and hospitals.](#)

Timeline: Ongoing *Resources:* CF/PA coordinator

[The State Early Childhood Cabinet included expansion of Birth to Three eligibility in its top 10 recommendations to the Governor. It has also been adopted as one of the priorities of the State's Children's Poverty and Prevention Council. The recommendation is that Birth to Three be expanded to serve children with mild delays and children at environmental risk of delay. If the recommendation is accepted and funded, the lead agency will respond as directed.](#)

Timelines: Unknown *Resources:* Lead agency Commissioner, ICC, CT Office of Policy and Management, Part C Director

Focused Monitoring

Child Find continues to be a priority area. The protocol focuses on activities at the program level once a referral is sent to a program.

Timeline: Ongoing *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team (Accountability and Monitoring Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System

The system will be modified to return to the eligibility process used before July 2003. “Follow-Along” services for children with speech as the only concern will be eliminated since these children will once again be eligible.

Timeline: July 2007 *Resources:* Data System Developer

Determinations

Determinations will be made in every Spring and this will continue to be an indicator used in that process if related identified non-compliance is not corrected within 12 months.

Timeline: Annually *Resources:* Accountability and Monitoring Team

Public Reporting of APR Data

The data by program for this indicator is posted each Spring on Birth23.org. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Account for untimely evaluations.

Overview of Issue/Description of System or Process:

	IFSPs <u>On time</u>	Total <u>IFSPs</u>	Simple <u>Percent</u>	Delay due to <u>Family Request</u>	Family Centered <u>Percent</u>
FFY03/SFY04	3142	3845	82%	5	82%
FFY02/SFY03	3274	4175	78%	NA	78%
FFY01/SFY02	3131	3890	80%	NA	80%

Simple Percent on time = Initial IFSP meetings on time / Total

Family Centered Percent on time = Initial IFSP meetings on time / (Total less Family Requests)

Baseline Data for FFY 2004 (2004-2005):

IFSPs <u>On time</u>	Total <u>IFSPs</u>	Simple <u>Percent</u>	Delay due to <u>Family Request</u>	Family Centered <u>Percent</u>
3395	4035	84%	407	94%

Discussion of Baseline Data:

When this indicator was chosen as a selection measure for focused monitoring, stakeholders were very clear that the lead agency needed a method for identifying delays that were due to a request by the family (vacations, holidays, and illness.) As a result this information was added to the data system.

Analysis of the data for the 233 records where the initial IFSP meeting was longer than 45 days from referral and the family did not request a delay yielded the following:

- Stakeholders hypothesized that since the parent fee system began, many parents were taking more time to decide about consenting to services. Of the 233 children described above, 112 or 48% were eligible for Medicaid and as such not included in the parent fee system. Of the 121 children not covered by Medicaid, 95 children in 90 families were

required to pay fees based on their income. (This included five sets of twins.) 90 represents 2.3% of the 3877 *families* with initial IFSPs due in FFY04.

- Given the scheduling challenges presented by the winter climate in Connecticut, especially during the last fiscal year, an analysis was run by month to see whether this may have been a factor. The winter months were not found to have more late IFSPs. In fact, of the 233 IFSP meetings held late, 83 or 35% were held during the months of June-August and only 49 or 21% were held during December – February.
- Another factor in planning the IFSP meeting is determining the child's legal status if the child is living apart from the biological parents. This is an interagency effort between the service providers and local child protective service offices. Twenty six or 11% of the 233 children lived with someone other than their parent.
- To determine whether finding an interpreter was a challenge, an analysis by language spoken in the home was completed. The percentages were found to match statewide averages.
- Two of the three Birth to Three regions in Connecticut have experienced some intermittent delays in finding available programs for new referrals. This shortened the time available for programs to complete evaluations and IFSPs. The delays were usually very short as 199 or 85.4% of the 233 experienced only a 0-3 day delay; 17 or 7.3% experienced 4-7 day delay and only 17 others or 7.3% experienced a delay of over 1 week.
- The one region (South) that did not have any delays in finding available programs had the highest percent of IFSPs over 45 days.

<u>Region</u>	<u># Late</u>	<u>Percent of 233</u>	<u># IFSPs</u>	<u>Late IFSPs as a Percent of Regional IFSPs</u>
North	62	26.6%	1331	4.7%
South	100	42.9%	1188	8.4%
West	71	30.5%	1516	4.7%

The 100 children in the South Region were served by 8 different programs out of a total of 12 that cover the region. Three of the 4 without late IFSPs were 100% on time. For the 8 programs with late IFSP meetings, the number per program ranged from 1 to 40 but late IFSPs, as a percentage of all IFSPs, ranged from 1% to 27%.

Programs have been ranked twice on this indicator since December 2004. The tables are available on the Connecticut Birth to Three website www.birth23.org. During FFY2005, one program (the program with 27% of IFSPs held late) received an on-site inquiry visit based on their ranking as the lowest among programs of a similar size. A desk audit was completed on a second program. Both programs developed improvement plans to track compliance as soon as possible but no later than 12 months from identification.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

The Birth to Three state regulations will be modified to permit foster parents to be considered as parents as defined in the IDEA 2004 pending final Part C regulations. This would eliminate any delay in determining a child’s legal status prior to initial evaluation.

Timelines: Spring 2006

Resources: Part C Director, DMR Office of Governmental and Legal Affairs

As needed, new programs will be added to increase capacity.

Timelines: As needed

Resources: Birth to Three Lead Agency Staff

Focused Monitoring:

This indicator will continue to be a selection measure for the Child Find priority area [until the stakeholders’ group chooses another](#).

Timelines: [Ongoing](#) Resources: Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team ([Accountability and Monitoring](#) Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System / Performance Dashboard

Currently, each program has a module in the real-time data system called the “Performance Dashboard” which displays data being monitored by the lead agency. Each program will be given real-time access to the data for this indicator. Programs view their performance for a six-month period and update it as often as needed. To help them identify any problems, they’ll be able to see the list of records used for that sample. Stakeholders that are provided ready access to this information will be able to assist in quickly identifying barriers to compliance.

Timeline: July 2005 Resources: [Accountability and Monitoring](#) Team, Data System Programmer, Data Users Group

Data Verification

Verification emails are sent to each program about every late meeting before the 618 data is completed.

Timeline: Ongoing *Resources:* Accountability and Monitoring Manager

Biennial Performance Report (BPR)

Non-compliance is identified in the electronic self-assessment and improvement tracking system called the Biennial Performance Report (BPR). Programs complete this process every two years. For more information please view the Connecticut's QA manual online at Birth23.org

Timeline: Annually *Resources:* Accountability and Monitoring Team, EI Programs

Public Reporting of APR Data

The data by program for this indicator is posted each Spring on Birth23.org. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Determinations

Determinations will be made in every Spring and this will continue to be an indicator used in that process.

Timeline: Annually *Resources:* Accountability and Monitoring Team

Program Profiles

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These program profiles used to include the percent of IFSP meeting held on time for each program, for the group into which the program falls, and for the state as a whole. The program's rank within their group is also included. Parents requested that the average number of days from referral to IFSP be displayed since it was more meaningful than a percent within 45 days. Since the public reporting of APR data, this is how the information will be presented on the profile.

Timeline: The profiles are updated on the website at least annually.

Resources: Accountability and Monitoring Team, Child Find/Public Awareness Coordinator, Child Development Infoline

Department of Developmental Services Business Plan

This indicator was added to the lead agency's business plan for SFY06. Data was reported each quarter. In July 2007 the three measures included in the business plan were changed to the number of children served with a suspected autism spectrum disorder, the number of children pending assignment to a program and the number of staff pursuing the Early Intervention Specialist credential. All three of these measures directly relate to this indicator as described below.

Timeline: July 2005 – June 2006 *Resources:* Accountability and Monitoring Team, Part C Director

Connecticut has heard from stakeholders that a major impact on their staffing resources is the hours of service needed to appropriately support families with children who have an autism spectrum disorder. The lead agency will issue an RFP to select several autism specific early intervention programs.

Timeline: January 2008 *Resources:* Part C Director

SPP Template – Part C (3)

Connecticut
State

A new category of Early Intervention Specialist will be added to the personnel standards to allow someone with a related BA degree, infant/toddler coursework, experience, and a B-3 credential to work as a "professional" in early intervention which means they can do evaluations and work totally independently. Although it will take programs a few months to a year to get some of their staff qualified for this position, this will ultimately will help programs increase their capacity.

Timeline: July 2007 *Resources:* Lead Agency Staff

The lead agency has allowed programs to establish sub-regions to control the flow of referrals from the central intake office. For families in some hard to reach towns, this has resulted in delays. With provider and family input, the Lead Agency will develop a workgroup to develop rules about the use of sub-regions and taking new referrals from the "rotation" (vs. parent choice) and the Fiscal Unit will monitor this from a contract management perspective. Programs suggested a report of referrals by program by town to evaluate whether changing their catchment areas as a group decision might help.

Timeline: July 2008 *Resources:* Lead Agency Staff, EI Programs

The lead agency will screen 100 children to see if it would be cost-effective to screen statewide or not when the proposed IDEA regulations are finalized. Because children are referred when someone is concerned about their development, a majority may not pass the screening. If that turns out to be true, screening referrals may not help with Timely IFSPs.

Timeline: July 2009 *Resources:* Child Find / Public Awareness Coordinator / Child Development Infoline

As needed Requests For Proposals (RFPs) will be issued for more programs however the resources needed to bring a new program up to full, independent, functioning as a quality early intervention program are many. The five new programs require training and technical assistance on every aspect of Part C and Connecticut's procedures. This involves all the lead agency staff.

Timeline: Ongoing *Resources:* Part C Director

According to stakeholders, issuing more RFPs doesn't always seem to be the solution. They think that the real issue is being able to recruit and retain qualified staff, especially OT, PT, and SLPs. One agency has hired a full time recruiter just for its Birth to Three program. Part C will continue to do whatever possible to work with the institutions of higher education, but they seem to have problems finding qualified faculty to teach in these areas. This is a national problem affecting Part C and Part B of IDEA. A provider reported that the biggest hurdle faced at Univ. of Conn. when trying to increase the number of students in their SLP program is finding practicum placements. The lead agency will work with the Institutions of higher education and programs to make practicum sites available in Birth to Three.

Timeline: Ongoing *Resources:* Lead Agency Staff

A statewide provider meeting will be held to generate ideas from programs regarding personnel shortages and how to increase capacity for evaluations.

Timeline: January 2008 *Resources:* Lead Agency Staff, EI Programs, NERRC, NECTAS, Emerald Consulting, LLC and Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

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
(20 USC 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = # of children exiting Part C who have an IFSP with transition steps and services divided by # of children exiting Part C times 100.

Overview of Issue/Description of System or Process:

In July 2003, the statewide IFSP form was modified to include a section documenting development of a transition plan for every child, regardless of age.

Smooth Transitions is a priority area for Part C focused monitoring in Connecticut. The on-site visit protocol includes reviewing transition plans for clear steps to help the child and family adjust to the next setting at age three.

Baseline Data for FFY 2004 (2004-2005):

	<u>Total Exiting at</u> <u>Age Three with IFSP</u>	<u>Transition Plan</u> <u>included in IFSP</u>	<u>Percent</u>
FFY04	2509	2509	100%

Discussion of Baseline Data:

When reviewing the contents of an IFSP in the IDEA regulations, the lead agency determined that the transition plan was a required component. The data system was modified to measure compliance with the law, which is what this data reflects.

The quality of the plans is evaluated as part of focused monitoring and the electronic self-assessment and improvement tracking system called the Biennial Performance Report (BPR).

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

In order to maintain compliance, the lead agency will continue with the following practices:

The quality of the plans will continue to be monitored through the Biennial Performance Report (BPR) and as part of Focused Monitoring on-site visits.

Timeline: Ongoing *Resources:* [Accountability and Monitoring](#) Team and EI Programs

Focused Monitoring

This indicator will continue to be measured in the transition protocol for focused monitoring. Since the statewide IFSP form includes a transition plan section, all children have a transition plan that includes steps and services. Focused monitoring reviews the quality of the plans.

Timelines: [Ongoing](#) *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team ([Accountability and Monitoring](#) Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System / Performance Dashboard

Currently, each program has a module in the real-time data system called the “Performance Dashboard” which displays data being monitored by the lead agency. Each program will be given real-time access to the data for this indicator. Programs view their performance for a six-month period and update it as often as needed. To help them identify any problems, they’ll be able to see the list of records used for that sample. Stakeholders that are provided ready access to this information will be able to assist in quickly identifying barriers to compliance.

Timeline: July 2007 *Resources:* Data System Programmer

[Data Verification](#)

The data system will be modified so that an IFSP cannot be committed into the data system unless a transition plan is present. This will be added to the Performance Dashboard and monitored with verification visits.

Timeline: [July 2008](#) *Resources:* [Accountability and Monitoring](#) Team and EI Programs

Verification emails are sent to each program about every missing plan before the APR is completed.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team and EI Programs

Biennial Performance Report (BPR)

Non-compliance is identified in the electronic self-assessment and improvement tracking system called the Biennial Performance Report (BPR). Programs are being phased in to this process from the previous cyclical monitoring and continuous improvement plan process based on when they last received a full monitoring visit.

Timeline: Every program every two years *Resources:* Accountability and Monitoring Team, EI Programs, Data System Programmer

Public Reporting of APR Data

The data by program for this indicator is posted each Spring on Birth23.org. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Determinations

Determinations will be made every Spring and this will continue to be an indicator used in that process.

Timeline: Annually *Resources:* Accountability and Monitoring Team

Program Profiles

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These profiles include demographic and performance data for each program, for the group into which the program falls and for the state as a whole. This indicator was added to the program profile in July 2006 until Public Reporting of APR data began. It will be removed in the next revision by July 2008.

Timeline: Profiles are posted on Birth23.org at least annually.

Resources: Accountability and Monitoring Team, Child Find/Public Awareness Coordinator, Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

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:

- B. Notification to LEA, if child potentially eligible for Part B
(20 USC 1416(a)(3)(B) and 1442

Measurement:

- 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.

Overview of Issue/Description of System or Process:

LEAs are notified by the lead agency three times per year of all children enrolled in Birth to Three by program. If the parents have given consent to release information, the child’s name, birth date, service coordinator, and diagnostic code appear. If there is no consent, only the child’s date of birth appears. State law 17a-248d(e) requires LEA notification by January 1 of each year.

Each family gives or declines consent to refer their child to the LEA. A referral form is sent to each LEA for every child for whom the family is seeking Part B services and the date the referral form is sent is recorded in the Birth to Three data system.

Baseline Data for FFY 2004 (2004-2005):

During FFY04 the families of 2674 children consented to a referral to their LEA regardless of age or potential eligibility for Part B services. The LEAs were notified about 100% of those children.

Number of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred	Number of children exiting Part C who were potentially eligible for Part B	Percent
2424	2424	100%

Discussion of Baseline Data:

This format for early notification was developed in collaboration with LEAs and has been in place for more than five years.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

In response to OSEP’s SPP letter of March 2, 2006, Connecticut has modified the notification of LEAs about children who are within 90 days of age three and may be eligible for Part B. As previously described, lists are sent to each district three times per year that include information about all children in the district enrolled in Birth to Three. The family’s contact information (a.k.a. “directory information”) was only shared if parents had consented to a referral to their LEA by signing YES on the Part C LEA referral/consent to release information form. If a family “opted out” by signing NO or not signing the referral/consent form or revoking previous consent, only de-identified information was included on the list.

As of May 2006, if a child is within 90 days of age three and the LEA referral/consent form has NOT YET been signed or the data regarding that signature has NOT YET been entered into the data system, a separate report is sent to each district (if needed) with “directory information” about these children residing in their district.

The reports sent to the LEA will be updated as needed, based on feedback from providers and LEAs.

Timelines: LEA reports to be mailed out each year during August, December and May.
Resources: Lead Agency Staff, Data System Programmer, Data Users Group, LEAs, 619 Coordinator, Part C Director

Focused Monitoring:

Whether service coordinators secure a decision about referral to the school district is monitored as part of the transition protocol.

Timelines: Ongoing *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team (Accountability and Monitoring Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System

Birth to Three will assign a CT State Department of Education State Assigned Student Identifier number (SASID) to each new data record. This SASID will be included in the reports sent to each district.

Timeline: Beginning 1/1/07 and then ongoing *Resources:* Data System Developer, Lead Agency Staff

Data Verification

All of the data related to this indicator will be verified as part of data system edits, Focused Monitoring and Verification Visits, and verification e-mails sent to programs before submitting the APR.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, EI Programs

Biennial Performance Reports

Programs report whether service coordinators secure a decision about referral of a child to the school district by 150 days before age three when possible.

Timeline: Every program every two years *Resources:* Accountability and Monitoring Team, EI Programs

Public Reporting of APR Data

The data by county for this indicator is posted each Spring on Birth23.org, since the notification is done centrally and EI programs overlap school districts. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Program Profiles

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These program profiles included the percent of families that decide to refer their child to their LEA at least 150 days before age three. This percent is displayed for each program, for the group into which the program falls, and for the state as a whole until the public reporting of APR data began. As of 2008, this measure will be removed from the program profile.

Timeline: The profiles are updated on the website at least annually.

Resources: Accountability and Monitoring Team, Child Find/Public Awareness Coordinator, Child Development Infoline

State Profile

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls and for the state as a whole. The data about this indicator will NOT be added to the program profiles since the sub-unit for this indicator is the school district not each Birth to Three program. District data will be posted in a separate profile for the state as a whole in the same location as the program profiles on birth23.org (Accountability).

Timeline: The state profile will be created by January 2009 and updated every year.

Resources: Part C Director, Accountability and Monitoring Team, ICC, Lead Agency Staff, Child Find/Public Awareness Coordinator, Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

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:

- C. Transition conference, if child potentially eligible for Part B.
(20 USC 1416(a)(3)(B) and 1442)

Measurement:

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.

Overview of Issue/Description of System or Process:

Connecticut was identified as being out of compliance on this indicator in the December 24, 2002 letter approving the State Improvement Plan, as well as in the APR letters from OSEP dated February 13, 2004, January 5, 2005 and October 14, 2005.

Connecticut has been monitoring this item closely for four years and has made significant improvement (beginning at 69% in SFY2001). The Part C focused monitoring stakeholders’ group chose “Smooth Transitions” as a priority area. This indicator is the selection measure for that priority. Once the indicator was included on program profiles and tables showing program rankings on this indicator were posted on the Birth to Three website, stakeholders felt strongly that the lead agency needed a way to know when the reason for the delay was due to a request by the family (vacations, holidays, and illness.) As a result, this information was added to the data system.

Baseline Data for FFY 2004 (2004-2005):

Region	Conference <u>On time</u>	Total <u>Conferences</u>	Simple <u>Percent</u>	Delay due to <u>Family Request</u>	Family Centered Percent
North	567	626	91%	32	96%
South	458	523	88%	34	94%
West	565	633	89%	35	95%
Statewide	1590	1782	89%	101	95%

Simple Percent on time = Trans. Conferences on time/Total Conferences held
 Family Centered Percent on time = Conferences on time/(Total less Family Request)

Discussion of Baseline Data:

Programs have been ranked twice on this since December 2004. The tables are available on the Connecticut Birth to Three website www.birth23.org. During FFY2005, two programs received an on-site inquiry visit based on being ranked the lowest among programs of a similar size. Both programs developed improvement plans to track compliance as soon as possible but no later than 12 months from identification.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Since IDEA Section 637(a)(9)(A)(ii) requires the lead agency to convene a transition conference “among the lead agency, the family, and the local educational agency” it was Connecticut’s opinion that only those transition conferences that included all three participants could be considered “convened.” This definition was the basis of all data previously submitted to OSEP. At the beginning of November, 2005, service coordinators were instructed that if they’ve made every effort to accommodate the LEA’s schedule but the LEA did not participate in the transition conference, even by conference call, they may hold the transition conference without the LEA representative, as long as they document the invitation to the LEA and their attempts to have the LEA representative participate. Both Birth to Three programs and LEAs have been notified and the procedure will be revised by 1/1/06. In addition, the revised procedure for referral to the LEA will encourage referral at age two, rather than waiting until age 2 ½. This reflects the earlier transition conference date of up to nine months prior to age three in IDEA 2004. *Timeline:* July 2006 *Resources:* Part C Director, Lead Agency Staff

Focused Monitoring

This indicator will continue to be a selection measure for focused monitoring **until changed by the stakeholders group / ICC**. Updated ranking tables will be posted on the Connecticut Birth to Three website **at least annually**.

Timelines: **Ongoing** *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team (**Accountability and Monitoring** Manager plus three parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System / Performance Dashboard

Currently, each program has a module in the real-time data system called the “Performance Dashboard” which displays data being monitored by the lead agency. Each program will be given real-time access to the data for this indicator. Programs view their performance for a six-month period and update it as often as needed. To help them identify any problems, they’ll be able to see the list of records used for that sample. Stakeholders that are provided ready access to this information will be able to assist in quickly identifying barriers to compliance.

Timeline: July 2005

Resources: Accountability and Monitoring Team, Data System Programmer, Data Users Group

Birth to Three will assign a CT State Department of Education State Assigned Student Identifier number (SASID) to each new data record.

Timeline: Beginning 1/1/07 and then ongoing *Resources:* Data System Developer

Data Verification

All of the data related to this indicator will be verified as part of data system edits as well as Focused Monitoring and Verification Visits. Verification e-mails are sent to each program about every late conference before the APR is completed.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, EI Programs

Biennial Performance Report (BPR)

Non-compliance is identified in the electronic self-assessment and improvement tracking system called the Biennial Performance Report (BPR). Programs are being phased into this process from the previous cyclical monitoring and continuous improvement plan process based on when they last received a full monitoring visit.

Timeline: Every program every two years *Resources:* Accountability and Monitoring Team, EI Programs

Resources: Birth to Three Program staff, Lead Agency Staff, Accountability and Monitoring Team, Data System Programmer, Part C Director

Public Reporting of APR Data

The data by program for this indicator is posted each Spring on Birth23.org. In addition, data reports will routinely be shared with the ICC.

Timeline: Ongoing *Resources:* Accountability and Monitoring Team, Child Development Infoline

Determinations

Determinations will be made every Spring and this will continue to be an indicator used in that process.

Timeline: Annually *Resources:* Accountability and Monitoring Team

Program Profiles

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These program profiles include the percent of transition conferences convened on time for each program, for the group into which the program falls and for the state as a whole. Since this is a selection measure for focused monitoring, the program's rank within their group is also included.

Timeline: The profiles are updated on the website [at least annually](#)

Resources: [Accountability and Monitoring](#) Team, Child Find/Public Awareness Coordinator, Child Development Infoline

Department of [Development Services](#) Business Plan

This measure had been added to the lead agency's business plan for SFY06. Data was reported each quarter by region. This was removed in 2007.

Timeline: July 2005 – June 2006

Resources: [Accountability and Monitoring](#) Team, Part C Director

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:
Percent of noncompliance corrected within one year of identification:
a. # of findings of noncompliance.
b. # of corrections completed as soon as possible but in no case later than one year from identification.
Percent = [(b) divided by (a)] times 100.
For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

Overview of Issue/Description of System or Process:

As of 9/30/05, 38 programs had received full on-site monitoring visits as part of a three-year cycle. The last three cyclical visits were completed between 7/1/04 and 9/30/04. The quality assurance system was then redesigned to include Focused Monitoring (FM) and a new electronic Biennial Performance Reporting and Improvement Planning system (BPR).

Focused Monitoring

Based on previous monitoring results and data analyses, the Part C Focused Monitoring Stakeholders selected three priority areas: Child Find, Service Delivery and Transition. They then developed specific selection indicators for each. Programs were grouped by size based on the number of children with IFSPs on 12/1/04, then ranked within each grouping for each selection indicator. The lowest performing programs were selected for on-site inquiry visits or data verification. Four programs received on-site inquiry visits in the Spring of 2005.

Biennial Performance Report and Improvement Planning (BPR)

A committee that included parents, providers and Part C staff developed an electronic performance reporting system. This system requires programs to complete a self-assessment biennially and develop an improvement plan as needed. The system includes compliance and quality measures and data is gathered from record reviews, family interviews, staff interviews and staff observations. Whenever possible, measures are linked to the data in the Connecticut Birth to Three data system.

Programs were grouped to allow for staggered completion of each BPR. Programs that received a full on-site monitoring visit before SFY 2003 were assigned a due date of 7/1/05. Programs that received a full on-site monitoring visit during SFY 2003 were assigned a due date of 1/15/06. Programs that received a full on-site monitoring visit after SFY 2003 were assigned a due date of 7/15/06. After submitting the self-assessment data, an electronic improvement plan template is generated based on the results. The Part C Director mails notification to programs with findings of non-compliance. Child specific non-compliance must be corrected within 45 days and systemic non-compliance must be corrected as soon as possible but in no case later than 12 months from identification. Programs work with their lead agency staff to finalize their improvement plan targets, timelines, and strategies within 1 month of completing the self-assessment. Overall progress updates are required to be submitted electronically every six months. Electronic reminder notices are sent to both the regional manager and the program in advance. (Due to delays in refining the definitions of and criteria for the BPR measures as well as the data system, the first group of programs was given the option to extend their submission due date from 7/1/05 to 9/15/05).

Determinations

Section 616 of the IDEA requires that the Part C lead agency review performance of each Early Intervention (EI) Program each year. In Connecticut, based on the information provided in the EI program's Biennial Performance Report (BPR), information obtained through monitoring visits, information obtained through data analysis for the APR and any other public information, the lead agency will determine if the EI program:

- Meets Requirements;
- Needs Assistance;
- Needs Intervention; or
- Needs Substantial Intervention.

In making these determinations and in deciding upon appropriate enforcement actions, the lead agency will consider all information available to the lead agency at the time of the determination, including the history, nature and length of time of any reported noncompliance, and any evidence of correction. If the EI program also provides quantitative and qualitative data demonstrating that, in a timely manner, the EI program corrected identified noncompliance, the lead agency will consider the EI program to be in substantial compliance regarding that indicator.

EI programs that do not meet one or more of the program's targets identified in their BPR Improvement Plan (IP) should closely examine the strategies identified in the IP and consider whether the program needs to change those strategies. Failure to meet performance targets may result in focused monitoring, requests for additional data or information regarding related requirements, or other actions by the lead agency.

Connecticut's four determinations are as follows:

Meets Requirements

Factors the lead agency will consider in determining whether an EI program meets the requirements and the purposes of IDEA, include the following:

- The EI program demonstrates substantial compliance on ALL compliance measures.
- All measures have valid and reliable data (actual baseline data, progress data, etc.).
- The EI program demonstrates that it corrects noncompliance timely manner.

Needs Assistance

Factors the lead agency will consider in determining whether an EI program needs assistance in implementing the requirements of IDEA include the following:

- The EI program does not demonstrate substantial compliance on one or more of the compliance measures.
- One or more measures do not have valid and reliable data (actual baseline data, progress data, etc.).
- The EI program demonstrates that it corrects noncompliance in a timely manner.
- The EI program makes substantial progress in correcting noncompliance.

If the lead agency determines that the EI program needs assistance, the lead agency shall take one or more of the following enforcement actions:

- ~ Develop a compliance agreement.
- ~ Advise the EI program of available sources of technical assistance.
- ~ Provide the EI program with technical assistance.
- ~ Update Policies / Procedures / Advisories / Training
- ~ Modify the Birth to Three Data System

Needs Intervention

Factors the lead agency will consider in determining whether an EI program needs intervention in implementing the requirements of IDEA include the following:

- The EI program has needed assistance for at least 12 months.
- The EI program does not demonstrate substantial compliance on one or more of the compliance measures.
- One or more measures do not have valid and reliable data (actual baseline data, progress data, etc.) and the EI program has not made significant progress in correcting previously identified data problems.
- The EI program has not demonstrated that it corrected noncompliance in a timely manner.
- The EI program has not made substantial progress in correcting noncompliance.

If the lead agency determines for two consecutive years that the EI program needs intervention, the lead agency may take any of the actions described under needs assistance and may take one or more of the following enforcement actions:

- ~ Require the EI program to use the program's funds for required technical assistance.
- ~ Require the EI program to prepare a corrective action plan with the lead agency.
- ~ Require the EI program to use the program's funds to hire an external monitor.
- ~ Withhold referrals to the EI program.
- ~ Amend the contract to shorten the term of the contract.
- ~ Seek to recover funds as related to the specific noncompliance.

Needs Substantial Intervention

If the lead agency determines, at any time, that an EI program needs substantial intervention in implementing the requirements of Part C or that there is a substantial failure to comply with a corrective action plan, the lead agency will designate the EI program as in need of substantial intervention. Among the factors that the lead agency will consider are:

- The EI program fails to demonstrate substantial compliance on one or more of the compliance measures or other measures which significantly affect the core requirements of the program, such as the delivery of services to children with disabilities.
- One or more measures do not have valid and reliable data (actual baseline data, progress data, etc.) and the EI program has not made significant progress in correcting previously identified data problems.
- The EI program does not demonstrate that in a timely manner it corrects noncompliance.
- The EI program does not make substantial progress in correcting noncompliance.
- The EI program has informed the lead agency that it is unwilling to comply.

If the lead agency determines, at any time, that the EI program needs substantial intervention, the lead agency may take any of the actions described under needs intervention and may take one or more of the following enforcement actions and provide an opportunity for a hearing:

- ~ Seek to recover funds as related to failure to meet the requirements of the contract.
- ~ Withhold any further payments to the EI program.
- ~ Initiate the process to not renew or terminate the contract.

Baseline Data for FFY 2004 (2004-2005):

The baseline data for FFY 2004 no longer applies since this indicator was changed.

Discussion of Baseline Data:

The data reported for the three FFY2004 sub-indicators were added together to create new baseline data.

The 33 (14+13+6) findings of non-compliance identified in FFY2003 were all corrected during FFY2004.

This represented 17 out of 35 programs.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

The lead agency hired a new staff member who spends 50% of her time assisting the Accountability and Monitoring Manager with tracking the correction of non-compliance. She also participated fully in making the Determinations and in supporting programs with Biennial Performance Report (BPR) improvement plans.

Priority Area non-compliance will be monitored by the focused monitoring system, the electronic self-assessment and improvement tracking system called the Biennial Performance Report (BPR) and by complaints. Non-compliance will be identified in writing to programs as a result of the Biennial Performance Report system, Focused Monitoring, complaints, and dispute resolution.

Focused Monitoring:

As needed, programs will receive on-site inquiry visits. Any non-compliance identified during the visit will result in an update to the program’s improvement plan. The electronic improvement plan tracks progress updates to assist in assuring that any non-compliance is corrected as soon as possible but in no case later than 12 months from identification. For focused monitoring, identification occurs on the last day of the on-site visit when the preliminary written report is provided to the program.

Timelines: Ongoing *Resources:* Focused Monitoring Stakeholder Group, Part C Director, Focused Monitoring Team (Accountability and Monitoring Manager plus parent members and a Birth to Three program director as a peer member), Lead Agency Staff

Birth to Three Data System / Performance Dashboard

Currently, each program has a module in the real-time data system called the “Performance Dashboard” which displays data being monitored by the lead agency. Programs view their performance on compliance measures for a six-month period and update it as often as needed. To help them identify any problems, they’ll be able to see the

list of records used for that sample. Stakeholders reported that having ready access to this information assists in quickly identifying barriers to compliance.

Timeline: July 2007

Resources: Accountability and Monitoring Team, Data System Programmer, Data Users Group

A statewide provider meeting will be held to gather input on redesigning a web-based data system that assists programs in meeting the requirements of IDEA.

Timeline: January 2008

Resources: Lead Agency Staff, Emerald Consulting, LLC, EI Programs, NERRC

Data Verification

Every Corrective Action Plan or Compliance Agreement will include a statement about required data verification activities that will be conducted by the lead agency.

Timeline: Ongoing *Resources:* Birth to Three Program staff, Lead Agency Staff, Accountability and Monitoring Team, Data System Programmer, Part C Director

Biennial Performance Report (BPR)

Non-compliance is identified in the electronic self-assessment and improvement tracking system called the Biennial Performance Report (BPR). Programs are being phased into this process from the previous cyclical monitoring and continuous improvement plan process based on when they last received a full monitoring visit.

Timelines: Cohort I will complete a new BPR self-assessment by 9/15/07; and Cohort II by 9/15/08. This process will repeat every two years.

Resources: Birth to Three Program staff, Lead Agency Staff, Accountability and Monitoring Team, Data System Programmer, Part C Director

Program Profiles

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls and for the state as a whole.

Timelines: The profiles are updated on the website at least once every year.

Resources: Accountability and Monitoring Team, Child Find/Public Awareness Coordinator, Child Development Infoline

Determinations

Timelines: Determinations will be made as soon as possible each year after the APR data disaggregated to the program level in preparation for public reporting. The determinations will not be included in the public reporting.

Resources: Accountability and Monitoring Team, Child Development Infoline

The Procedural Safeguards section of IDEA will be reviewed and any necessary changes will be made to the Birth to Three procedures and related forms to better align the requirements for compliance with the IDEA.

Timeline: January, 2006 *Resources:* Part C Director, Policy and Practice Office.

The Quality Assurance Manual will be updated by April 1, 2007 to align with the new method of measuring Timely Services as well as creating a more comprehensive Verification Visit process. Other changes as directed by OSEP in the Verification letter dated December 20, 2006 will be made. Stakeholder meetings will be held to gather input and review the proposed changes.

Timeline: April 1, 2007 *Resources:* Accountability and Monitoring team, Stakeholder Groups

Measures that track Part C requirements will align with their Part C requirements and correction will be required within one year of identification which begins when the program is notified in writing by the lead agency.

Timeline: April 1, 2007 *Resources:* [Accountability and Monitoring](#) team

For all Part C requirements, any individual records found to be out of compliance will be corrected even when systemic noncompliance is not identified.

Timeline: April 1, 2007 *Resources:* [Accountability and Monitoring](#) team, EI Programs

Tracking the timely correction of non-compliance was originally planned to be the responsibility of the regional managers. The Birth to Three System was reorganized 7/1/06 and an educational projects coordinator will be hired to manage this aspect of the [Accountability and Monitoring](#) system for the entire state. A research analyst will also be hired to free up the [Accountability and Monitoring](#) manager to focus more attention on this component of the overall [Accountability and Monitoring](#) system. *As of 2008, this was changed to be an Information Technology Analyst 2 position funded 50% by Part C since the research analyst position did not work out as hoped.*

Timeline: June 2007 *Resources:* Part C Funds, [Accountability and Monitoring](#) team

The Biennial Performance Report (BPR) system will be restructured to enhance the identification and correction of non-compliance. Instead of three groups whose report filings were separated by six months, the programs will begin the second cycle in September 2007 as two groups with a year between due dates.

Timeline: June 2007 *Resources:* [Accountability and Monitoring](#) team, EI Programs

As described in the revised State Performance Plan, determinations will be made about each EI program as soon as possible after the APR is submitted and they will be notified in writing.

Timeline: June 2007 *Resources:* Part C Director, [Accountability and Monitoring](#) team, Stakeholder Groups

Since the lead agency is developing contracts with new programs to increase the capacity of Birth to Three, a system for monitoring these new programs on ALL IDEA compliance measures will be developed.

Timeline: December 2008 *Resources:* Part C Director, [Accountability and Monitoring](#) team, Policy and Practice Office

Periodically, the lead agency will monitor programs for continued compliance with those Part C requirements that most closely relate to improving results for Infants and toddlers with disabilities and their families consistent with IDEA section 616(a)(2)

Timeline: July 31, 2011 *Resources:* [Accountability and Monitoring](#) team, Stakeholder Groups

[A statewide provider meeting will be held to generate ideas from programs about how to improve Connecticut's Part C general supervision systems.](#)

Timeline: January 2008 *Resources:* Lead Agency Staff, EI Programs, NERRC, NECTAS, Emerald Consulting, LLC and Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Overview of Issue/Description of System or Process:

Each signed, written complaint is investigated by a Part C staff member who reports her or his findings to the Part C Director. The Part C Director issues a written complaint response to the complainant within 60 days as well as a response to the program that is the subject of the complaint. If there were findings of IDEA non-compliance in the complaint response, the program is instructed to remediate the issue within 45 days (if it applies to a particular child or family) and within 12 months if it is a systemic issue.

Baseline Data for FFY 2004 (2004-2005):

Two signed written complaints were received; both were responded to within 60 days. Therefore, the baseline data indicates 100%

	<u>Complaint Received</u>	<u>Report issued</u>	<u># of Days</u>
Complaint #1	April 21, 2005	June 16, 2005	56
Complaint #2	April 28, 2005	May 19, 2005	21

Discussion of Baseline Data:

Typically, two to six signed written complaints are received each year. The Part C lead agency staff and Part C Director have been able to ensure an investigation is completed and a report is issued within 60 days.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

The Connecticut Part C lead agency is currently functioning at 100% in terms of issuing responses to signed written complaints within 60 days. Maintenance activities will continue, including management of the process by the Part C Director, investigations by the Part C lead agency staff, and reports issued within 60 days. In addition to the written response to the complainant, a letter is sent to the program that is involved in the complaint, along with a copy of the response, specifying any steps to be taken in regard to remediation of noncompliance.

Resources: Part C Director, Lead Agency Staff, [Accountability and Monitoring Team](#)

In order to track compliance, the lead agency will develop the following:

State Profile

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls and for the state as a whole. The data about this indicator will NOT be added to the program profiles since the sub-unit for this indicator is the region not the program. Regional data will be posted in a separate profile for the state as a whole in the same location as the program profiles on birth23.org (Accountability).

Timeline: This will not be included since Table 4 is posted and in the APR

Resources: Part C Director, [Accountability and Monitoring Team](#), ICC, Lead Agency Staff, Child Find/Public Awareness Coordinator, Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Overview of Issue/Description of System or Process:

Families are informed of their right to request a due process hearing or mediation or to file a written complaint in all printed parent materials which service coordinators review with families at least annually.

As soon as a family requests a due process hearing, the hearing is assigned to one of three available hearing officers. The lead agency is represented by the Connecticut Attorney General's office. The hearing officer schedules the pre-hearing conference call with both parties as well as the hearing itself. The Part C Director handles arrangements for the hearing location and court reporter.

Baseline Data for FFY 2004 (2004-2005):

Two hearing requests were received during this period. Neither was fully adjudicated and both resulted in a settlement of compensatory services. In one case the first day of a multiple-day hearing was held and the hearing officer issued a hearing decision that incorporated the terms of the settlement. In both cases, the hearing request was made within three days of the children's third birthdays. In both cases "stay put" was requested, and in both cases the families had also filed a request for a due process hearing with their LEA. The "stay put" requests were denied by both hearing officers.

100% of all fully adjudicated hearings (which were "0").

Discussion of Baseline Data:

Neither request was fully adjudicated. Therefore, 100% of fully adjudicated due process hearing requests were fully adjudicated within the applicable timeline.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

The state’s FFY05 grant award specified that Connecticut Part C must eliminate from its regulations the ability of either party in a due process hearing to request a postponement or extension. According to the Office of General Counsel at OSEP, all hearing decisions in Part C must be issued within 30 days of the request without exception. Although there were no fully adjudicated due process hearings in FFY04 that would have been affected by this provision, the state regulations were submitted for revision. The required 30-day comment period resulted in no comments being received and the revision should be approved by the Legislature’s Regulatory Review Committee in December, 2005. Although the lead agency proposed in FFY04 to retain outside counsel to represent the Birth to Three System at due process hearings, the Attorney General’s office has chosen to represent the lead agency at these hearings and to comply with the 30-day timeframe.

Resources: Part C Director, Hearing Officers, DMR Office of Legal and Governmental Affairs

In order to track compliance, the lead agency will develop the following:

State Profile

Since February 2005, the lead agency has posted program profiles on the birth23.org website. These include a variety of demographics and performance data for each program, for the size grouping into which the program falls, and for the state as a whole. The data about this indicator will NOT be added to the program profile since the sub-unit for this indicator is the region not each Birth to Three program. Regional data will be posted in a separate profile for the state as a whole in the same location on birth23.org (Accountability) as the program profiles.

Timeline: This will not be included since Table 4 is posted and in the APR

Resources: Part C Director, Accountability and Monitoring Team, ICC, Lead Agency Staff, Child Find/Public Awareness Coordinator, Child Development Infoline

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan 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.

Overview of Issue/Description of System or Process:

Applicable Part B due process procedures were not adopted by Part C.

Baseline Data for FFY 2004 (2004-2005):

NA

Discussion of Baseline Data:

NA

FFY	Measurable and Rigorous Target
2005 (2005-2006)	NA
2006 (2006-2007)	NA
2007 (2007-2008)	NA
2008 (2008-2009)	NA
2009 (2009-2010)	NA
2010 (2010-2011)	NA

Improvement Activities/Timelines/Resources:

NA

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Overview of Issue/Description of System or Process:

Families are informed of their right to request mediation or a due process hearing or to file a formal complaint in all printed parent materials which service coordinators review with families at least annually.

The Part C lead agency staff or the Part C Director receives requests for mediation. The Part C Director assigns one of three mediators. The mediator calls both parties (the family and the program) to schedule the mediation at a neutral location. The mediator informs the Part C Director whether or not the mediation resulted in an agreement. Mediations are held as promptly as possible. If a hearing has been requested, mediation is offered to the family and must be held prior to the hearing.

Baseline Data for FFY 2004 (2004-2005):

Two mediations held, 50% resulted in agreement.

Discussion of Baseline Data:

Two mediations were held in FFY2004:

	<u>Date Requested</u>	<u>Date Held</u>	<u>Issue</u>	<u>Agreement Reached?</u>
Mediation 1	8/24/04	9/14/04	additional ABA hrs	Yes
Mediation 2	9/16/04	11/9/04	paying for services outside of the Part C System	No

Comment: Mediation #2 was scheduled for 10/1/04 but the family's advocate could not make that date and the family requested that it be postponed until the advocate was available.

The lack of agreement in the second mediation was not surprising. The program was offering the family (whose child had an autistic spectrum disorder) an appropriate IFSP that included ABA services delivered by their own staff. However, the family was involved with an agency outside of the Birth to Three System and wanted the program to pay for those services instead.

The extremely small numbers of mediations held in Part C (far fewer than 10 per year) do not allow meaningful targets to be established.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	NA
2006 (2006-2007)	NA
2007 (2007-2008)	NA
2008 (2008-2009)	NA
2009 (2009-2010)	NA
2010 (2010-2011)	NA

Improvement Activities/Timelines/Resources:

Although the Center on Alternative Dispute Resolution (CADRE) reports that 75% of mediations should result in an agreement, the extremely small number of mediation sessions held in Part C (2-4 per year) make it doubtful that targets can be established in the future.

In addition, many issues that could potentially go to mediation are resolved prior to that, since Part C services are typically family-centered. It is a rare breakdown in communication that results in a request for mediation.

Resources: Mediators, program staff, Part C Director, Lead Agency Staff

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

State reported data, including 618 data, State performance plan, and annual performance reports, are:

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

Overview of Issue/Description of System or Process:

All 618 data is produced from the Connecticut Birth to Three Data System – a real-time data system linking all programs, regional offices, intake office, and lead agency’s central office in a wide area network. Although there are many self-edits built into the system, prior to December 1 each year, a preliminary data run identifies any missing data or data that appears to have been entered incorrectly. Programs are contacted and corrections are made. Programs that have listed a child’s primary location of service as “other” are asked to identify those locations. Once all necessary data has been entered (e.g. data on children with IFSPs on December 1 may not be entered until mid-December), the [Accountability and Monitoring](#) Team runs the data and produces the reports.

Connecticut has always filed its child count data reports prior to February 1 of each year and its other reports prior to November 1.

Connecticut’s data, as a result of its child-specific, real-time data system, is accurate. There are numerous built in edits (list provided to WESTAT for inclusion in “Taking Your Data to the Laundry.”) Since the data is used for billing the lead agency, billing families, and ranking programs for focused monitoring, there are inherent incentives for accuracy. A number of standard reports are available at the program level to assist with tracking and monitoring service delivery, caseloads, timelines, as well as areas of compliance.

Currently, each program has a module in the real-time data system called the “Performance Dashboard” which displays data being monitored by the lead agency. Each program will be given real-time access to the data for this indicator. Programs view their performance for a six-month period and update it as often as needed. To help them identify any problems, they’ll be able to see the list of records used for that sample. Stakeholders that are provided ready access to this information will be able to assist in quickly identifying and correcting erroneous data.

SPP Template – Part C (3)

Connecticut
State

All dispute resolution data is produced by the Part C Coordinator based on complaint and dispute resolution files kept in the lead agency's central office. The accuracy of this data is cross-referenced with the case files.

Baseline Data for FFY 2004 (2004-2005):

100% of all data is submitted to OSEP on or before due dates and it is accurate.

Discussion of Baseline Data:

Connecticut is very proud of its data system and its ability to provide OSEP with timely and accurate data. We will continue to operate at 100% timeliness and accuracy.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

Maintenance activities will continue in which the Part C Director, [Accountability and Monitoring Team](#), and Systems Designer work together to ensure the timeliness and accuracy of data reported to OSEP. Training is offered at least annually to all program data-entry staff, there is a bi-monthly meeting of individuals who use the data system to continue to evolve the system, and there is a data system users manual that is updated at least annually and distributed to all programs. *Timeline:* Ongoing *Resources:* [Accountability and Monitoring Team](#), system designer, program data-entry staff

In FFY06/SFY07 the lead agency will begin verification visits with programs that completed an initial BPR in FFY05/SFY06. Programs were directed to keep a list of the records they reviewed for their Biennial Performance Report self-assessment. New records will be selected as well. *Timeline:* Annually *Resources:* [Accountability and Monitoring team](#)

The lead agency will try again to increase the staff working with the [Accountability and Monitoring manager](#) and [Data System Developer](#) to assure the accuracy of all data. A technology analyst position funded 50% by Part C will be requested and if approved, filled. *Timeline:* ASAP *Resources:* Part C Funds.

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Connecticut Birth to Three System Family Survey - Spring 2007

This is a survey for families receiving Birth to Three services in Connecticut. Your responses will help guide efforts to improve services and results for children and families and will be kept confidential. For each statement below, please select one of the following response choices. Your choices are: Very strongly disagree, Strongly disagree, Disagree, Agree, Strongly agree, or Very strongly agree.

If you would like to complete this survey online, go to www.birth23.org and in "Especially for Families" click on the Family Survey link by August 15, 2007. *NOTE: You will need the number in the box below to log-on.* The results of this survey will be posted on the Birth23.org website by February 2008 as part of The Connecticut Birth to Three System's Annual Performance Report.

Birth to Three Survey Number:

Use Pencil Only

Fill in circle completely: ●
Incorrect: X ✓ ●

Very Strongly Disagree
Strongly Disagree
Disagree
Agree
Strongly Agree
Very Strongly Agree

PLEASE skip any item that does not apply to your family.

- | | | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 1. My family was given information about how most children develop and learn | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. I was asked whether I wanted help in dealing with stressful situations | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. I was given choices concerning my family's services and supports | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4. My family's daily routines were considered when planning for my child's services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5. I have felt part of the team when meeting to discuss my child | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. The services on our IFSP have been provided in a timely way | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

My family was given information about:

- | | | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 7. the rights of parents regarding Birth to Three services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. community programs that are open to all children | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. organizations that offer support for parents of children with disabilities | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. opportunities for my child to play with other children | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. how to advocate for my child and my family | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12. who to call if I am not satisfied with the services my child receives | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13. where to go for help or support if I feel worried or stressed | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Someone from the Birth to Three program:

- | | | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 14. asked whether the services my family was receiving were meeting our needs | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 15. went out into the community with me and my child to help us get involved in community activities and services | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Half-way done! Please turn the page over for the remaining questions.

Appendix 1- Sample Family Survey Page 2 of 2

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PLEASE skip any item that does not apply to your family.

Very Strongly Disagree
Strongly Disagree
Disagree
Agree
Very Strongly Agree

The Birth to Three service provider(s) that work with my child:

16. are dependable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. are easy for me to talk to about my child and my family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. are good at working with my family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. My service coordinator is available to speak with me on a regular basis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. My service coordinator is knowledgeable and professional	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. My family was given information about activities that I could do with my child in our everyday lives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I was given information to help me prepare for my child's transition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. I was given information about the public school system's programs and services for children age three and older	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Over the past year, Birth to Three services have helped me and/or my family:

24. participate in typical activities for children and families in my community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. know about services in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. know where to go for support to meet my child's needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. know where to go for support to meet my family's needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. feel that I can handle the challenges of parenting a child with special needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. feel more confident in my skills as a parent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. make changes in family routines that will benefit my child with special needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. be more effective in managing my child's behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. figure out solutions to problems as they come up	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. cope with stressful situations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. feel that I can get the services and supports that my child and family need	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. understand how the Birth to Three System works	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. find information I need	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. be able to evaluate how much progress my child is making	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. feel that my child will be accepted and welcomed in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. communicate more effectively with the people who work with my child and family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. understand the roles of the people who work with my child and family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. know about my child's and family's rights concerning Birth to Three services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42. do things with and for my child that are good for my child's development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. understand my child's special needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. feel that my efforts are helping my child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

Thank you for your participation!

Please place this form into the self addressed stamped envelope and mail it by 8/15/07.