

Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

General Supervision System:

The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.

The Indiana Part C, APR for FFY2013 was developed by the Bureau of Child Development Services, Division of Disability and Rehabilitative Services, Family and Social Services Administration (the lead agency for Part C) utilizing direction and input from a broad group of stakeholders. These stakeholders included:

- Parents and community leaders from the Indiana Interagency Coordinating Council (ICC)
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- Service Providers
- Central Reimbursement Office (CRO)
- Indiana Department of Education, Division of Exceptional Learners
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)

Stakeholder meetings were held in 2013 and 2014 to discuss the State Performance Plan (SPP) and Indiana's progress in meeting the SPP targets. Data for the FFY2013 APR was presented to the ICC at their quarterly meeting on November, 2014. Additionally, all ICC members received updated drafts of the indicator narratives, as they were written. On January 14, 2015, the ICC completed its final review of the FFY2013 APR. The ICC Chairperson signed the Annual Report Certification to use the State's IDEA, Part C, APR for FFY2013 in lieu of submitting a separate ICC annual report.

Data for the indicators in the APR were provided from numerous sources. These include:

- the state centralized database (data warehouse)
- claims data from the Centralized Reimbursement Office (CRO)
- Quality Review-Focused Monitoring data, compiled from annual on-site Cluster reviews
- SPOE self-reviews and Cluster Performance Plan Progress Reports/Quality Improvement Plans
- Early Childhood Outcomes (ECO) Family Survey (parent exit interviews)
- Child outcome data collected and analyzed by the Indiana Institute for Disability and Community (IIDC) at Indiana University.

In the beginning of FFY13, Indiana had ten regional Clusters. In May, 2014, Cluster E was dissolved and absorbed by surrounding clusters. Indiana now has nine regional clusters. (See Cluster map at the following link: <http://www.in.gov/fssa/ddrs/4819.htm>). Every Cluster undergoes on-site monitoring annually. For each finding of non-compliance, the lead agency verifies correction of the issue at both the individual child level as well as the Cluster/system level.

Indiana has a comprehensive general supervision system that includes the statewide data system, a statewide quality review-focused monitoring system, local quality review committees and an ongoing research initiative on program outcomes performed by the Indiana Institute on Disability and Community (IIDC) at Indiana University. A description of each component is provided below.

1. Statewide Data

System:

Indiana's computerized data system was developed in 1994. A data file is created for every child referred to the First Steps system. Data for children found eligible include fields for child/family/provider information (date of birth, referral, intake, evaluation, IFSP, termination with reason; child demographic data; and provider information). Data for each Cluster System Point of Entry (SPOE) can be reviewed at any time by state and/or the local Cluster. The Cluster SPOEs can generate preset reports for use of a variety of system uses, including their Local Planning and Coordinating Council (LPCC). State administrators can access all Cluster SPOE data and can generate preset and ad hoc reports. This data is used by the state as a source for ongoing desk audits of the system. The Central Reimbursement Office (CRO) data included child/family authorization and claims data.

The Data

Warehouse:

The Data Warehouse (a state contracted entity that uses state provided data to develop 618 data and state profile reports) provides the state with county, Cluster and statewide data reports. These reports are used by the state and Clusters to monitor trends over time. The profiles of the state and Clusters are posted on the state website for public access. They can be viewed at <http://www.in.gov/fssa/ddrs/2812.htm>.

2. A statewide quality review-focused monitoring system:

In 1998, Indiana initiated Peer

Monitoring as a component of its general supervision system. Through technical assistance provided by National Center for Special Education Accountability Monitoring (NCSEAM), Indiana revised its general supervision system to incorporate a focused monitoring (FM) approach in 2004. The state First Steps System contracts with an entity to provide quality review coordination, on-site reviews and local technical assistance. Indiana has nine Cluster System Points of Entry (SPOEs) that serve as the local entity for referrals to Part C. The SPOEs maintain the early intervention record and since 2006 have employed all Service Coordinators and, in 2011, all Assessment Teams. Each of the nine Cluster SPOEs receives technical assistance visits as needed and an annual verification visit. These visits are led by a Quality Review team member responsible for the Cluster. Additional team members include state staff, peers from other Clusters, and providers. To provide public reporting of the Cluster performance, Cluster Report Cards were developed in 2006. The reports were revised in 2007 to mirror the Part C State Performance Plan (SPP) indicators. For FFY13, Indiana incorporated the utilization of tablets to collect and calculate local compliance data for onsite peer monitoring visits. This technology allowed for more immediate data results and review by local programs, and a greater means to capture specific program quality components. The Quality Review plan was also enhanced to review not only compliance measures, but several quality measures within local programs to assess possible program training needs and for local program improvement strategic planning purposes.

3. Local quality review committees:

In addition to the annual verification visits, the SPOEs provide quarterly quality review reports and progress updates. These were called Cluster Performance Plans (CPPs) through 2013 and were restructured as Quality Improvement Plans (QIPs) beginning in 2014. The QIP serves as the Cluster's quality monitoring plan and includes strategies to correct any findings issued by the State, as soon as possible, but no later than one year. In 2014, Clusters were trained in the new improvement plan report structure (QIPs). While the new report continues to include elements such as an annual plan and quarterly reporting, it also includes changes and additions that ultimately compliment a *results driven accountability* system. The new reporting format has a much stronger emphasis on continuous quality improvement among clusters, LPCCs, provider agencies, and the state as a whole. Elements of this process include clear delineation of important child, family, and system outcomes; strengthened data collection and analyses; identification of program structures and practices that bring about these outcomes (*theory of action*). The new improvement plans now incorporate an ongoing, collaborative

program improvement approach which balances compliance monitoring with a targeted results focus. Clusters must submit progress data to demonstrate compliance. Once the Cluster SPOE has demonstrated compliance for a reporting period and the data are verified by the state, the finding is verified as corrected and the state issues a letter of compliance. As part of this process, the cluster quarterly data is shared with the Local Planning and Coordinating Council and stakeholder input is gathered.

4. Ongoing research initiative on program outcomes performed by the Early Childhood Center at the Indiana Institute on Disability and Community (IIDC) at Indiana

University:

Indiana University has been responsible for collecting child and family exit data since 2006 when the state decided to implement a uniform tool for collecting child and family outcome data. This process has remained the same until July 2014 (beginning of FFY14) when new methods and timelines were created to provide better data quality and consistency for collecting exit data for the child and family outcomes. In July 2014 a new, uniform collection tool/form was implemented for families' service providers to complete. Training was provided in conjunction with this new collection method, to ensure consistency in the completion of the child outcome measures, and to raise awareness of the child outcomes data, and how state and local programs use this information for reporting and program improvement efforts.

In January of 2014, findings were issued to each Cluster SPOE. While all Clusters were found to meet requirements, each Cluster SPOE received a findings table which listed all noncompliance requiring correction. The Cluster SPOEs were directed to demonstrate 100% compliance for indicators 1, 7, and 8, along with other state identified areas of noncompliance (annual IFSPs completed prior to expiration, timely six month reviews, ten day written prior notice, income and insurance documentation) as soon as possible, but no later than one year from the date of the finding. Utilizing the information from the findings table, each Cluster SPOE was required to develop a Quality Improvement Plan (QIP) that identified activities, strategies and timelines for correction of any systemic noncompliance. For identified noncompliance that was not attributed to a systemic root cause, SPOEs continued monitoring and reporting efforts to report progress toward compliance. SPOEs were required to provide periodic progress data and narrative updates to demonstrate compliance with the indicators at six months, nine months and eleven months from the date of the finding. Quality Review-Focused Monitoring (QRFM) visits for FFY2013 were conducted in the months of October through December, 2013, with findings issued by the state to the Cluster within 90 days of the completion of all visits. All findings were required to be corrected and verified within no later than one year.

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to early intervention service (EIS) programs.

The State has contracted with the Early Childhood Center at Indiana University to implement a system to provide technical assistance to the nine regional clusters. Indiana University has implemented an individualized, technical assistance approach designed to support the timely delivery of high quality early intervention services to eligible children and families in Indiana. Depending on regional clusters' needs, technical assistance can be provided on-site or electronically. Technical assistance is provided by trained staff and focuses on assisting regional clusters in the development of Quality Improvement Plans (QIPs) by facilitating stakeholder involvement through attendance at local and state meetings, providing training and detailed examples of high quality, evidence-based plans, and providing detailed feedback on draft plans. Technical assistance is also provided to service providers regarding the content and quality of home visit documentation. Additional technical assistance in the form of data analysis is provided throughout the year in response to requests from State staff as trends and patterns emerge. State program staff also provide direct technical assistance to local programs through ongoing contract monitoring activities and periodic

data reviews.

Professional Development System:

The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

The Unified Training System established by the First Steps Early Intervention System, within FSSA/Bureau of Child Development in conjunction with the Department of Education/Division of Special Education was created to support:

- The statewide coordination of training activities related to young children
- Greater access to learning opportunities for families and service providers
- A more balanced and coordinated schedule of training activities in terms of topics, locations, and dates throughout the state available year round. Some trainings can also be found on-line
- Specialized training opportunities that bring together families and professionals from different fields, including early education and child care service providers
- A hotline to register for UTS-sponsored learning opportunities and to access training resources

Stakeholder Involvement:

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

Indiana uses a broad group of stakeholders to assist in setting targets for the SPP that include:

- Parents and community leaders from the Indiana Interagency Coordinating Council (ICC)
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- Service Providers
- Central Reimbursement Office (CRO)
- Indiana Department of Education, Division of Exceptional Learners
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)

These groups provide a variety of feedback on state and cluster data and procedures as needed. The ICC members meet at least quarterly. This group assists the state in reviewing the data, identifying areas of concern and generating potential strategies for improvement.

Minutes from state and local meetings are posted on various state and cluster websites so those stakeholders that cannot attend a meeting have the information available to them to make additional comments. Indiana's ICC Meeting Agendas and Minutes can be found here: <http://www.iidc.indiana.edu/index.php?pageId=3694>.

Reporting to the Public:

How and where the State reported to the public on the FFY 2012 performance of each EIS Program or Provider located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2012 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2012 APR in 2014, is available.

Indiana has posted the State Performance Plan (SPP) for previous fiscal years FY 2005-2012. The Annual Progress Report (APR) for FFY2005-2012 along with OSEP letters of response to the State's December 2005 SPP and the FFY2005-FY2012 APR's on the First Steps web site located at <http://www.firststeps.in.gov> under 'Program Evaluation/Data Reports'. The Indiana APR for FFY2013 will be posted following its' submission on February 2, 2015.

Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments

Compliance indicator: 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)

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	91.00%	98.00%	98.00%	98.00%	98.50%	98.00%	99.00%	99.20%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	9,127	2,706

Explanation of Alternate Data

Indiana monitors each EIS program (Cluster) annually. The data collection strategy involved samples from each of the nine regional clusters to ensure adequate representation of all children receiving First Steps services in Indiana. This sample was comprised of files reviewed by the Quality Review Team during the annual on-site visits with each of the clusters and data gathered by clusters during quarterly internal reviews.

The sample was 10 percent of all initial and annual IFSPs written and 6 month reviews held during the July to September 2013 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files.

A minimum sample size of 619 IFSPs for the state was determined by using a sampling calculator made available from the website (<http://www.raosoft.com/samplesize.html>) by Raosoft, Inc. The actual number sampled far exceeds the required sample size for a confidence level of 99%, with a confidence interval of +/- 5%.

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
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Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
2,642	2706	99.20%	100%	98.30%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner)	18
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What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

In the 2005 SPP, Indiana defined timely as, “all services written in the IFSP are initiated within 30 calendar days from the IFSP date, with parent approval or within 30 days from the parent signature date on the IFSP service change page for newly added services”. The expectation is that 30 days represents a reasonable amount of time allowed for services to begin. This time period allows adequate time for authorized services to be entered into the Central Reimbursement Office (CRO) database, for provider agencies to be selected and for appointments with the family to be scheduled. As recommended by OSEP, in the SPP December 2005 letter, Indiana allows an exception for IFSP services that are delayed due to exceptional family circumstances, weather and travel restrictions and for less frequently delivered services, such as hearing aid maintenance scheduled on a quarterly basis.

Sample data was derived from early intervention record reviews performed by the Quality Review contractors and from state-verified, early intervention record reviews completed by the local SPOE as part of their quality review and progress monitoring system. Reviewers noted if the Documentation of Service Start form was present in the record and if all new services started within 30 days of the parent signature on the IFSP. If services were not delivered within 30 days, the reason for delay and actual date of service must be specified. If the reason for delay is due to family circumstance, cluster staff are expected to keep detailed documentation in their clinical notes. There were 18 instances of late starts due to exceptional family circumstances. This number also includes late starts due to a number of weather and travel warnings - instances where travel was restricted to emergency personnel only . These were included in the numerator.

Seven of the nine clusters were able to demonstrate correction of non-compliance with state verification within the one year timeline. Reasons for noncompliance were reviewed by each SPOE and the lead agency. While the lead agency did not find any systemic errors, it was noted that in most instances the delay could be attributed to either a lack of communication between the Service Coordinator, provider and family, a scheduling difficulty between the parent and provider or a delay resulting from a specific choice of provider.

Provide additional information about this indicator (optional)

Timely Services by Cluster FFY2013 (TABLE 1.1)

Cluster SPOE	# of IFSPs reviewed	% of total new IFSPs initiated ≤ 30 days	Services provided > 30 days	Services never provided	Range in days to service start
State	2706	98.3% (2660/2706)	46	1	
Cluster A	386	99.2% (383/386)	3	0	35,41,42
Cluster B	159	98.7% (157/159)	3	0	32,36,45
Cluster C	141	95% (134/141)	7	0	32,33,40,40,41,43,61
Cluster D	182	99.5% (181/182)	1	1	51
Cluster E	72	95.8% (69/72)	3	0	32,32,63
Cluster F	176	98.3% (173/176)	3	0	37,43,57
Cluster G	638	98% (625/638)	13	0	31,32,32,33,34,35,35,37,38,38,45,45,49
Cluster H	210	97.6% (205/210)	3	0	33,43,57
Cluster I	247	96.8% (239/247)	9	0	34,42,42,84
Cluster J	495	99.8% (494/495)	1	0	38

TABLE 1.2

Cluster SPOE	State Verified Correction of Non-Compliance Data	Data Timeframe and State Verification Date
Cluster A	100% (127/127)	(Oct-Dec 2013) Verified 8/7/14
Cluster B	100% (67/67)	(Oct-Dec 2013) Verified 9/10/14
Cluster C	100% (52/52)	(Oct-Dec 2013) Verified 12/31/13
Cluster D	100% (31/31)	(July-Sept 2013) Verified 8/19/14

Cluster E	100% (51/51)	(Oct-Dec 2013) Verified 12/31/13
Cluster F	100% (25/25)	(July-Sept 2013) Verified 10/29/13
Cluster H	100% (132/132)	(April-June 2014) Verified 10/17/14
Cluster J	100% (108/108)	(Oct-Dec 2013) Verified 8/6/14

All but two clusters (Cluster G and I) were able to correct identified noncompliance (with state verification) with the timely services indicator within the one-year timeline. Each SPOE and lead agency reviewed the reasons for noncompliance. While the lead agency did not find any systemic errors, please note that in most instances the individual reasons for delay was attributed to either a lack of communication between the Service Coordinator, provider and family, a scheduling difficulty between the parent and provider or a delay resulting from a specific choice of provider. Weather and travel issues (warnings issued preventing anyone other than emergency personnel from traveling) were also noted.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
6	6	0	0

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

TABLE 1.3

Cluster SPOE	State Verified Correction of Non-Compliance Data	Review Period and State Verification Date
Cluster A	100% (73/73)	(October 2012-December 2012) Verified 12/4/12
Cluster B	100% (59/59)	(October 2012–December 2012) Verified 12/5/12
Cluster E	100% (19/19)	(October 2012-November 2013) Verified 9/12/13
Cluster F	100% (52/52)	(October 2012-November 2013) Verified 9/12/13
Cluster G	100% (190/190)	(October 2012–December 2012) Verified 10/8/12
Cluster I	100% (40/40)	(October 2012-November 2013) Verified 11/22/13

Clusters A, B, E, F, G, and I were able to demonstrate correction of noncompliance (with state verification) within one year of identification for this indicator. The correction of noncompliance was verified by the completion of onsite visits, which include file audits and data reviews. Corrections were verified at both the system and the child level.

All Clusters were able to come into compliance within the one-year timeline. Reasons for noncompliance were reviewed by each SPOE and the lead agency. While the lead agency did not find any systemic errors, it was noted that in most individual instances the delay could be attributed to either a lack of communication between the Service Coordinator, provider and family, a scheduling difficulty between the parent and provider or a delay resulting from a specific choice of provider. There were five instances noting family reasons.

Describe how the State verified that each LEA corrected each individual case of noncompliance

In accordance with the OSEP Memorandum 09-02, the state issued 6 findings for Indicator 1 (Clusters A, B, E, F, G, I) in FFY 2012. Indiana was able to demonstrate timely correction of noncompliance and state verification of correction for 6 of 6 Clusters. Verification of correction of noncompliance was completed prior to one year from the finding. The FFY 2012 APR reported that in the 22 individual child instances where services were not provided timely, 21 children did receive the services, albeit not within 30 days. In the FFY 2012 APR, it was reported that one child, in Cluster F, never received services. The family was unresponsive after several attempts to contact them. The SPOE mailed a letter to the family giving 10-day notice of the file closure and no response was subsequently received from the family.

Indicator 2: Services in Natural Environments

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		94.00%	94.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Data	97.60%	97.40%	98.30%	98.49%	99.20%	98.18%	98.80%	98.70%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

Indiana uses a broad group of stakeholders to address natural environment that include:

- Parents
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- Local community partners
- Service Providers
- Central Reimbursement Office (CRO)
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)

These groups provide a variety of feedback on both state and cluster data and procedures as needed, and assists the state in reviewing the data, identifying areas of concern and generating potential strategies for improvement. In FFY 13, a subgroup of the ICC (the Community Intergration Committee) coordinated efforts to support natural environment early intervention services and enhance inclusive practices of child care settings through the development of the 'Welcoming All Children' revised resource guide.

Minutes and documents from state and local meetings are posted on various state and cluster websites so those stakeholders that cannot attend a meeting have the information available to them to make additional comments. For specific information regarding the 'Welcoming All Children' publication, please see <http://www.iidc.indiana.edu/index.php?pageld=123>.

Indiana's ICC analyzed and reviewed the natural environment data during the May 2014 and January 2015 meetings during a series of sessions of data analysis, and targets for 2013-2018 were maintained at 95% based on these reviews.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	9,015	
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	9,127	

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
9,015	9,127	98.70%	95.00%	98.77%

Provide additional information about this indicator (optional)

In FFY13, Indiana captured the number of early intervention services in the natural environment from the Central Reimbursement Office (CRO) provider claims data which require a location code for all services provided (these data are collected and analyzed by the state data warehouse). To validate that the claim location data are valid and reliable, Indiana performs billing reviews for approximately 10% of its early intervention providers annually. The reviews, conducted by the Quality Review contractors, compare the Face-to-Face form for each service provided during a specified two week period to the provider electronic claim data for the same period. The Face-to-Face form includes the date, time in, time out and specific service location address. The form is signed by the provider and the parent/guardian attesting to its accuracy. Provider agencies are notified when discrepancies are found. Providers are required to payback any payments for services not provided as they were represented on the face-to-face form. The service setting environments include the home and other community settings in which children without disabilities participate. When the IFSP team (including the parent and Service Coordinator) determines that the provision of early interventions services for an infant/toddler cannot satisfactorily be achieved in the child/family's natural environment, a setting other than a natural environment can be selected.

The IFSP teams make individualized decisions regarding the setting in which infants/toddlers receive early intervention services, in accordance with the IDEA. The IFSP team is trained to consider all possible service options for the child in order to individualize the IFSP for the child and family. When it has been determined by the IFSP team that services are best provided in a setting other than a natural environment for typically developing children, Indiana requires documented justification for that decision, including options that were considered by the IFSP team, along with a plan and timeline for transitioning the service into the natural environment. This information becomes a part of the child's IFSP.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A1	2008	Target ≥					52.00%	53.00%	53.00%	
		Data				51.70%	51.00%	49.00%	50.00%	52.00%
A2	2008	Target ≥					50.00%	51.00%	51.00%	
		Data				49.90%	49.00%	47.00%	49.00%	54.00%
B1	2008	Target ≥					57.00%	58.00%	58.00%	
		Data				56.30%	59.00%	59.00%	56.00%	55.00%
B2	2008	Target ≥					69.00%	70.00%	70.00%	
		Data				68.50%	68.00%	68.00%	69.00%	72.00%
C1	2008	Target ≥					54.00%	55.00%	55.00%	
		Data				53.80%	54.00%	52.00%	53.00%	50.00%
C2	2008	Target ≥					62.00%	63.00%	63.00%	
		Data				61.70%	59.00%	58.00%	63.00%	66.00%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A1 ≥	55.00%	55.00%	55.00%	55.00%	55.00%	55.00%
Target A2 ≥	57.00%	57.00%	57.00%	57.00%	57.00%	57.00%
Target B1 ≥	55.00%	55.00%	56.00%	56.00%	56.00%	57.00%
Target B2 ≥	72.00%	72.00%	72.00%	72.00%	72.00%	72.00%
Target C1 ≥	55.00%	55.00%	55.00%	55.00%	55.00%	55.00%
Target C2 ≥	67.00%	67.00%	67.00%	67.00%	67.00%	67.00%

Targets: Description of Stakeholder Input

New targets have been proposed for Indiana's child outcome data. These new targets were determined by several discussions with the ICC and audience members composed of parents, System Points of Entry staff, and Service Providers over three ICC meetings (August 2014, November 2014, and January 2015). During these meetings stakeholders identified, evaluated and analyzed trend data over the past 3 years of child outcome data collection. The proposed new targets for FFY13 through FFY18 were subsequently shared with the ICC members at the January 2015 meeting. ICC members reviewed and approved the proposed targets when the ICC adopted the APR.

Indiana uses a broad group of stakeholders to help address child outcomes that include:

- Parents and community leaders from the Indiana Interagency Coordinating Council (ICC)
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- Service Providers
- Assessment Team Providers
- Indiana Department of Education, Division of Exceptional Learners
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)
- The Unified Training System (UTS) representatives

These groups provide a variety of feedback on state and cluster data and procedures as needed. The ICC members meet at least quarterly. This group assists the state in reviewing the data, identifying areas of concern and generating potential strategies for improvement. Through the quarterly ICC meetings in FFY 2013, this stakeholder group evaluated child outcome data and provided their input and approval of the state targets set through 2018.

Minutes from state and local meetings are posted on various state and cluster websites so those stakeholders that cannot attend a meeting have the information available to them to make additional comments.

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	5,946
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Does the State’s Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or “at-risk infants and toddlers”) under IDEA section 632(5)(B)(i)? No

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

	Number of Children
a. Infants and toddlers who did not improve functioning	153
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,977
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	461

	Number of Children
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2,030
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1,325

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	2,491	4,621	52.00%	55.00%	53.91%
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	3,355	5,946	54.00%	57.00%	56.42%

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

	Number of Children
a. Infants and toddlers who did not improve functioning	139
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,097
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	434
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	886
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	3,390

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	1,320	2,556	55.00%	55.00%	51.64%
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	4,276	5,946	72.00%	72.00%	71.91%

Explanation of B1 Slippage

Indiana is divided into 9 regions with a local agency responsible (First Steps Cluster SPOE) for carrying out all intake and ongoing service coordination activities. Each of the First Steps Cluster SPOEs is responsible for collecting and inputting all child and family outcome data for analyses. Indiana University (the State's quality review data contractor), collects and analyses this data and provides quarterly reporting to each Cluster and the state concerning child and family outcomes. For the first quarter of the fiscal year (July 2013 through September 2013), each Cluster SPOE received their initial report. If a cluster's data is below the state targets for Outcomes A, B, and/or C, it is required to address possible explanations, and proposed improvement strategies as a program goal in their Quality Improvement Plan (QIP) formally known as the Cluster Performance Plan (CPP). Each quarter the First Steps Cluster SPOEs present their improvement plans showing progress in meeting the state targets. The plan also reflects local improvement activity updates within their region to make or continue improvements. The state QR vendor provides the analyses needed for the Cluster SPOE reporting, and provide technical assistance as needed.

Each month there are children exiting the program with a variety of delays and diagnosed disabilities. Some slippage may be expected due to this variance. In evaluating the slippage that occurred for Outcome B.1, it

was noted that the measurement and associated procedures did not change for FFY13, however it may be necessary for clusters and their providers to more actively engage in additional training and technical assistance around these outcome measures (and how they are used) to effectively implement programmatic improvement efforts with child outcomes. Individualized differences among providers, how they record the progress or slippage for their specific provider disciplines, across developmental domains, from Cluster to Cluster may contribute to the data observed for B1. Additionally, the provider level of awareness and sensitivity of the need to approach outcomes collection consistently, may be impacting the slippage observed in B1. However, additional review and analysis to accurately determine root cause(s) is still needed.

A new system has been put in place beginning FFY2014 that will provide better data quality and consistency through the state for the collection of the child outcome exit data. Each Cluster SPOE now utilizes a state standardized tool and collection method to reduce or mitigate variability and differences in data trends. Consistent training, through Indiana's UTS, was provided in conjunction with the implementation of this new tool.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children
a. Infants and toddlers who did not improve functioning	185
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,515
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	289
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1,428
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2,529

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	1,717	3,417	50.00%	55.00%	50.25%
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	3,957	5,946	66.00%	67.00%	66.55%

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? No

Provide the criteria for defining “comparable to same-aged peers” and list the instruments and procedures used to gather data for this indicator.

Indiana designed and began implementing an outcomes-based evaluation system for Part C in November of 2002. The original evaluation system was designed to assess the impact of First Steps on all children and families exiting the system and who had been in the system for a minimum of six months. The system was designed to assess a number of child and family outcomes. In the current system, child and family assessment data is collected from multiple sources, including a developmental evaluation of children upon entry and exit from First Steps, and an exit family interview. Service Coordinators are responsible for

compiling and submitting this data electronically once the child and family have exited the First Steps system. This assessment data is combined with demographic data collected by the state, and an outside evaluator conducts analyses to determine the impact of First Steps on both child and family outcomes.

Current measurement strategies to collect data

Who will be included in the measurement, i.e. what population of children? All infants and toddlers who are eligible for and have received early intervention services for a minimum of six months and for whom there is complete child assessment information. If assessment data is missing or incomplete (e.g., incomplete child assessment scores), then those children and families are not included in the final analyses.

What assessment/measurement tool(s) and/or other data sources will be used? Indiana employs a single, state-approved, assessment instrument—the Assessment, Evaluation, and Programming System for Infants and Children (AEPS® 2nd Ed.), which is administered to all children upon their entry into and exit from the First Steps program. With the statewide adoption of the AEPS in 2006, this year's federal report is based entirely on both entry and exit assessment data from the AEPS. The AEPS assessment data for each developmental domain is recorded in terms of standard deviation scores:

'0' for children who are at or above age level,

'1' for children who are from 1 to 1.4 standard deviations below age level (near age level),

'1.5' for children who are from 1.5 to 1.9 standard deviations below age level,

'≥2' for children who are two or more standard deviations below age level.

In addition, the IFSP team notes if progress was made for each of the five developmental domains included in the AEPS.

Assessment data from the AEPS is used in the following ways to determine the impact of First Steps on the three child outcomes for Indicator 3:

1. Positive social-emotional skills (including social relationships) – The developmental scores of children in *the social-emotional domain* (including if progress was made) is used as the primary source of data for measuring child progress on this outcome.
2. Acquisition and use of knowledge and skills (including early language/ communication) - The developmental scores of children in *the cognitive domain* (including if progress was made) is used as the primary source of data for measuring child progress on this outcome.
3. Use of appropriate behaviors to meet their needs - The developmental scores of children in *the adaptive domain* (including if progress was made) is used as the primary source of data for measuring child progress on this outcome.

Since the statewide adoption of the AEPS in October 2006, the decision was made to align each of the three federal child outcomes in Indicator 3 with a specific AEPS domain. While the federal child outcomes were designed to measure important skills across domains, it should be noted that each AEPS domain is not exclusive to one skill set, and includes skills from other developmental domains.

Who conducted the assessments? Child assessments are conducted by the state's evaluation and assessment teams, comprised of a minimum of two or more disciplines in the field of early intervention. Child assessment data is collected upon the child's entry into and exit from First Steps. While entry assessment data is collected entirely by the state's assessment team, exit assessment data is collected by one member of that assessment team and is supplemented by progress reports and observational notes from the IFSP team, which includes ongoing service providers and the child's

family.

When did measurement occur? Initial child assessment data is collected as part of the initial evaluation and eligibility determination process, concluding with the initial IFSP. Exit child assessment data is collected within 3 months of the child and family's transition from First Steps.

What data will be reported to the state, and how will the data be transmitted? On an ongoing basis (as children exit the program), service coordinators and clerical staff at each of the 9 regional SPOEs enter and transmit child assessment data through a secure, password-protected website used to collect all child and family assessment data. The child assessment data that is reported includes the summary standard deviation score (see above) for each of the five developmental domains; as well as the IFSP team's determination that progress was made (yes/no) for each domain.

What data analysis methods will be used to determine the progress categories? The statewide database of individual child and family outcome records is loaded into SPSS- Statistical Package for the Social Sciences, on a personal computer. Using the federal reporting requirements of the federal government, as well as computational guidelines from the ECO Center, the child outcome data is converted into a score representing one of the five progress categories for each developmental domain/child outcome:

Children who did not improve functioning is calculated based on no changes in or a drop in the standard deviation scores and progress noted as "no."

Children who improved functioning but not sufficient... is calculated for children with an exit score ≥ 1.5 and progress noted as "yes."

Children who improved functioning to a level nearer... is calculated for children with an exit score = 1.0 and progress noted as "yes."

Children who improved functioning to a level comparable ... is calculated for children with an exit score = 0, and entry score ≥ 1 and progress noted as "yes."

Children who maintained functioning at a level comparable... is calculated for children with both entry and exit scores = 0 and progress noted as "yes."

Once the child outcome data is converted into a score of 1-5 for each developmental area, frequency analyses and cross-tab analyses are conducted to report both overall state data and to disaggregate the data across the 9 regions.

Actions required in FFY 2012 response table

The State must report progress data and actual target data for FFY 2013 in the FFY 2013 APR.

Responses to actions required in FFY 2012 response table

Indiana is divided into 9 regions with a local agency responsible (First Steps Cluster SPOE) for carrying out all intake and ongoing service coordination activities. Each of the First Steps Cluster SPOEs is responsible for collecting and inputting all child and family outcome data for analyses. Indiana University (the State's quality review data contractor), collects and analyses this data and provides quarterly reporting to each Cluster and the state concerning child and family outcomes. For the first quarter of the fiscal year (July 2013 through September 2013), each Cluster SPOE received their initial report. If a cluster falls below the state targets for Outcomes A, B, and/or C, they are required to address this as a program goal in their Quality

Improvement Plan (QIP) formally known as the Cluster Performance Plan (CPP); and implement steps to improve outcomes among children served in their region. Each quarter the First Steps Cluster SPOEs present their improvement plans showing progress in meeting the state targets . The plan also reflects local improvement activity updates within their region to make or continue improvements. The state QR vendor provides the analyses needed for the Cluster SPOE reporting, and provide technical assistance as needed.

Each month there are children exiting the program with a variety of delays and diagnosed disabilities. Some slippage may be expected due to this variance. In evaluating the slippage that occurred for Outcome B.1 , it was noted that the measurement and associated procedures did not change for FFY13, however it may be necessary for clusters and their providers to more actively engage in additional training and technical assistance around these outcome measures (and how they are used) to effectively implement programmatic improvement efforts with child outcomes. Individualized differences among providers, how they record the progress or slippage for their specific provider disciplines, across developmental domains, from Cluster to Cluster may contribute to the data observed for B1. Additionally, the provider level of awareness and sensitivity of the need to approach outcomes collection consistently, may be impacting the slippage observed in B1. However, additional review and analysis to accurately determine root cause(s) is still needed.

A new system has been put in place beginning FFY2014 that will provide better data quality and consistency through the state for the collection of the child outcome exit data. Each Cluster SPOE now utilizes a state standardized tool and collection method to reduce or mitigate variability and differences in data trends.

Indicator 4: Family Involvement

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A	2006	Target ≥				99.00%	100%	99.00%	99.00%	99.00%
		Data		96.50%	94.00%	95.60%	96.30%	96.10%	95.10%	96.88%
B	2006	Target ≥				99.00%	100%	99.00%	99.00%	99.00%
		Data		98.70%	98.40%	98.70%	98.90%	98.90%	95.30%	96.17%
C	2006	Target ≥				99.00%	100%	97.00%	97.00%	97.00%
		Data		94.00%	93.80%	94.80%	95.30%	95.80%	93.80%	95.28%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A ≥	97.00%	97.00%	97.00%	98.00%	99.00%	100%
Target B ≥	97.00%	97.00%	97.00%	98.00%	99.00%	100%
Target C ≥	95.00%	95.00%	96.00%	96.00%	96.00%	96.00%

Targets: Description of Stakeholder Input

New targets have been proposed for Indiana's family outcome data. These new targets were determined by several discussions with the ICC and audience members composed of parents, System Points of Entry, and Service Providers over three ICC meetings (August 2014, November 2014, and January 2015). These meetings identified, evaluated and analyzed trend data over the past 3 years. The ICC believed the proposed targets are more realistic given a notable change several years ago to a new tool. The new tool replaced a collection method capturing 'yes and 'no' responses, and implements a Likert scale measurement, which provided a more refined level of responses from families. Indiana's ICC reviewed family outcome data trends during State ICC meetings, which included a variety of other stakeholder participants present. The proposed new targets for FFY13 through FFY18 were also shared and reviewed with the ICC at their January 14, 2015 meeting. ICC members approved the proposed targets when the ICC adopted the APR as their annual report.

Indiana uses a broad group of stakeholders to help address family outcomes that include:

- Parents and community leaders from the Indiana Interagency Coordinating Council (ICC)
- Cluster Local Planning and Coordinating Councils (LPCCs w/parent membership requirements)

and Cluster System Points of Entry (SPOE)

- Service Providers
- Indiana Department of Education, Division of Exceptional Learners
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)

These stakeholder groups provide a variety of feedback on state and cluster data and procedures as needed. The ICC members meet at least quarterly. This group assists the state in reviewing the data, identifying areas of concern and generating potential strategies for improvement.

Minutes from state and local meetings are posted on various state and cluster websites so those stakeholders that cannot attend a meeting have the information available to them to make additional comments.

It was discovered that our baseline data was entered incorrectly and the BaselineYear should be from 2004 instead of 2006. The correct percentages should be Outcome A:99.9%, Outcome B:99.9%, and Outcome C: 95.5%.

FFY 2013 SPP/APR Data

Number of respondent families participating in Part C	4,443
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	4,285
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	4,443
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	4,275
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	4,443
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	4,186
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	4,443

	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	96.88%	97.00%	96.44%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	96.17%	97.00%	96.22%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	95.28%	95.00%	94.22%

Explanation of C Slippage

The slippage for measure 'C' may be attributed to two regional clusters who were run by the same fiscal agent and who were not entering exit data timely. This fiscal agent's contract was not renewed in May of 2014. One of these clusters is now served by another fiscal agent who does not demonstrate timely data entry issues, and has employed new staff, and provided additional support and re-training to existing staff. The other cluster was absorbed by the three surrounding regional clusters. All of these regions experienced some staff restructuring, including changes in their staff supervision, with direct support and feedback from an onsite manager/supervisor.

Another possible reason for slippage in 'C' is the sometimes varied methods used to collect and report this data. At the beginning of FFY2014 a variety of methods were used to complete the surveys; since this time, a new procedure was implemented to provide better quality data and consistency throughout the state. Indiana has initiated the collection of family survey data via tablets in several regions, which will assist in submission of more timely data, and more accurate family responses.

Describe how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State.

Service Coordinators throughout the state are expected to request all families exiting the First Steps system to complete an exit survey that is based on the questions/form provided by the ECO Center. These requests to complete the paper/pencil survey are made up to 3 months prior to the child and family's exit from First Steps. For FFY2013, 4,428 families completed the entire survey. This represents 74% of all families (N=5,984) who exited First Steps and were in the program for a minimum of 6 months.

All service coordinators receive training on how to present the family survey and the associated collection methods and required reporting components.

Indiana has continued to carry out additional efforts designed to increase the percentage of families completing the exit survey. Individual regional offices have been asked to identify improvement efforts to increase the percentage of families completing the exit survey. Each regional office is responsible for providing quarterly data and noted ongoing efforts to ensure completion and accuracy of the family survey data. Regional offices continue to offer families the option of completing the family survey via a tablet. This effort has continued to increase the number of families willing to participate in the exit survey. The state will continue to evaluate ways to capture accurate family data when a family is leaving the system. The state will continue to review and monitor the results and coordinate with each of the regional offices to monitor their individual performance.

Was sampling used? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No



Yes, the data accurately represent the demographics of the State



No, the data does not accurately represent the demographics of the State

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, **not including correction of findings**

Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		1.40%	1.40%	1.40%	1.40%	1.40%	1.40%	1.40%
Data	1.40%	1.39%	1.25%	1.25%	1.30%	1.38%	1.26%	1.40%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	1.56%	1.56%	1.56%	1.57%	1.57%	1.57%

Targets: Description of Stakeholder Input

Indiana uses a broad group of stakeholders that look at services to infants under the age of one. They include:

- Cluster Local Planning and Coordinating Councils (LPCCs) including associated child find subcommittees, local NICU, hospital and physician representatives
- Cluster System Points of Entry (SPOE)
- Service Providers
- Assessment Team Providers
- Community partners in local communities
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)

These groups provide a variety of feedback on state and cluster data and procedures as needed. This group assists the state in reviewing the data, identifying areas of concern and generating potential strategies for improvement. Specifically, each Cluster LPCC continues to meet at least quarterly within their regions, and are contractually required to review their local 0-1 child count data and develop specific child-find activities for this young population. Indiana generates quarterly profile reporting which highlights state, cluster, and county-level data specifically highlighting the child counts for children 0-1 year of age for stakeholder review and input. The profiles are available on Indiana's Part C page - Program Evaluation Information / Data Reports: <http://www.in.gov/fssa/ddrs/2812.htm>

Minutes from state and local meetings are posted on various state and cluster websites so those

stakeholders that cannot attend a meeting have the information available to them to make additional comments. The target data set for this indicator were determined by several discussions with the ICC and audience members composed of parents, System Points of Entry staff, and Service Providers over three consecutive ICC meetings (August 2014, November 2014, and January 2015).

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers birth to 1 with IFSPs	1,008	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	12/16/2014	Population of infants and toddlers birth to 1	82,927	

FFY 2013 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,008	82,927	1.40%	1.56%	1.22%

Explanation of Slippage

The regional offices include in their QIP specific strategies and activities unique to their cluster regions to target infants under the age of one. They regularly coordinate child find activities throughout the year based on county-level child count data. Regional Local Planning and Coordinating Council staff meet on a regular basis with local hospitals and other community partners who serve the same population to identify opportunities to enhance their referral relationships.

All Indiana First Steps LPCC's are required to maintain memorandums of agreement with local referral agencies

Although no systemic issues have been identified at this time, the State will continue to work with the regional offices to improve the number of infants under one who receive Part C services. Indiana continues to serve more children in the state's 0-1 population than the national average, which is currently 1.11%.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

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Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		3.30%	3.25%	3.25%	3.15%	3.00%	3.00%	3.00%
Data	3.83%	3.66%	3.44%	3.64%	3.74%	3.92%	3.54%	3.65%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	3.83%	3.83%	3.83%	3.84%	3.84%	3.84%

Targets: Description of Stakeholder Input

Indiana uses a broad group of stakeholders that look at services to infants under the age of three. They include:

- Cluster Local Planning and Coordinating Councils (LPCCs) Cluster Local Planning and Coordinating Councils (LPCCs) including associated child find subcommittees, local NICU, hospital and physician representatives
- Cluster System Points of Entry (SPOE)
- Service Providers
- Assessment Team Providers
- Community partners in local communities
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)

These stakeholder groups provide a variety of feedback on state and cluster data and procedures as needed. This group assists the state in reviewing the data, identifying areas of concern and generating potential strategies for improvement.

Minutes from state and local meetings are posted on various state and cluster websites so those stakeholders that cannot attend a meeting have the information available to them to make additional comments.

Stakeholders provide a variety of feedback on state and cluster data and procedures as needed, and assists the state in reviewing the data, identifying areas of concern and generating potential strategies for

improvement. Specifically, each Cluster LPCC continues to meet at least quarterly within their regions, and are contractually required to review their local 0-3 child count data and develop specific child-find activities for this population. Indiana generates quarterly profile reporting which highlights state, cluster, and county-level data specifically highlighting the child count data for children 0-3 year of age for local planning purposes, as well as stakeholder review and input. The profiles are available on Indiana's Part C page - Program Evaluation Information / Data Reports: <http://www.in.gov/fssa/ddrs/2812.htm>

The target data set for this indicator were determined by several discussions with the ICC and audience members composed of parents, System Points of Entry staff, and Service Providers over three consecutive ICC meetings (August 2014, November 2014, and January 2015). I

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers birth to 3 with IFSPs	9,127	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	12/16/2014	Population of infants and toddlers birth to 3	250,449	

FFY 2013 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
9,127	250,449	3.65%	3.83%	3.64%

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Indicator 7: 45-day timeline

Monitoring Priority: Effective General Supervision Part C / Child Find

Compliance indicator: Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial 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)

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	99.62%	99.53%	99.60%	99.80%	99.90%	99.80%	99.50%	99.10%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
11,520	11,796	99.10%	100%	98.39%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline)	86
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What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

Indiana has a centralized data system. Every referral to Indiana First Steps is entered into the System Point of Entry (SPOE) database with the referral date, child name, and date of birth, address, referral source, and contact information. An Intake Service Coordinator contacts the family within two business days to schedule an appointment to meet with the family to explain the program, family rights, and procedural safeguards and to obtain consent to gather information and to proceed with the evaluation/assessment. Once the family has consented to proceed, the intake coordinator assists with obtaining the physician health summary information and coordinates scheduling of the evaluation/assessment. In Indiana, every child proceeding to evaluation/assessment receives a comprehensive developmental assessment by an Assessment Team (AT), a multidisciplinary team

representing at least two professional disciplines. In addition to information received from the medical home, family interview and the multidisciplinary team, every child is assessed using the Assessment, Evaluation and Programming System (AEPS®). Additional observations and tests are performed as needed and appropriate.

Once the AT initial evaluation and assessment is completed, the information is sent to the Intake Service Coordinator who contacts the family. Based on evaluation/assessment results and recommendations of the AT, the family makes a choice to proceed to an eligibility meeting or to accept the results that their child does not meet Indiana’s eligibility criteria. If the family chooses to proceed, the eligibility meeting is scheduled. Once the team determines that the child is eligible, the IFSP can be developed. If the child does not meet eligibility criteria or the family chooses not to proceed to the eligibility meeting, they are provided with local resource information and are informed that they will receive a follow-up call within the next three to six months to determine if the family has continued concerns about their child’s development. The family is also informed of their ability to re-refer their child to early intervention services at any time.

After the IFSP is written, the local Cluster SPOE staff enters the child’s date of intake, eligibility meeting and IFSP meeting into the SPOE database. If the child is not found eligible or the family chooses not to participate, the appropriate termination code is entered.

The local Cluster SPOE staff generate a monthly report listing every eligible child with an IFSP meeting date that exceeds the 45-day timeline. Each Cluster SPOE must submit a “Delay of IFSP” form for every IFSP that exceeds the 45-day timeline. This form provides information on why the initial 45-day timeline was not met. The parent signs this form indicating that they have been informed of their rights and procedural safeguards and understand that the IFSP exceeded the 45-day timeline and they are in agreement with the delay of IFSP reason stated on the form. Supporting documentation as to the circumstances of the delay must also be included in the Service Coordinator clinical documentation. The “Delay of IFSP” form and the clinical documentation become part of the early intervention record. It should be noted that weather and travel restrictions were also a factor is the 45 days not being met timely.

In order to monitor that the IFSP timelines are met, a Quality Review process has been developed to examine every instance when the IFSP exceeds the 45-day timeline. The determination on whether the delay was the result of an exceptional family circumstance (e.g., family medical emergency, parent/child illness, family relocation or custody change) or the result of a systemic issue is made by State staff and not the Cluster SPOE representatives. The data analysis includes the number of initial IFSPs exceeding the 45-day timeline due to system reasons divided by the total number of eligible infants and toddlers evaluated and assessed for whom an IFSP meeting was required and includes the reason for the delay. When the development of the IFSP exceeds 45 days, the actual date of the IFSP is recorded to ensure that the child/family did subsequently have an IFSP developed.

While Indiana monitors timelines for all IFSPs, findings of non-compliance are only identified and issued during the annual quality review visit, unless the State identifies a systemic error within a subsequent quarter. During the FFY2013, seven Cluster SPOEs were issued a finding of non-compliance during the annual quality review visit.

Provide additional information about this indicator (optional)

Initial IFSPs written within the 45-Day timeline (TABLE 7.1)

Cluster SPOE	Total # IFSPs	% ≤ 45 Days, including EFC	# > 45 Days	# of days until IFSP was developed
State Total	11796	98.4% (11606/11796)	190	
Cluster A	1375	98.8% (1359/1375)	16	46-81

Cluster B	1054	99.4% (1048/1054)	6	46-74
Cluster C	902	96% (866/902)	36	46-83
Cluster D	752	99.1% (745/752)	7	47-86
Cluster E	474	97.5% (474/486)	12	47-81
Cluster F	469	95.5% (448/469)	21	46-58
Cluster G	3401	98.2% (3340/3401)	61	46-82
Cluster H	733	99.3% (728/733)	5	48-62
Cluster I	1478	98.6% (1457/1478)	21	46-67
Cluster J	1146	99.6% (1141/1146)	5	48-118

The seven highlighted clusters were issued a state finding based on the annual QR visit (TABLE 7.2).

Cluster SPOE	% ≤ 45 Days, including FEC	Verification Date	# ≥ 45 Days	Number of days until IFSP was developed
Cluster A	100% (286/286)	8/7/14	0	n/a
Cluster B	100% (189/189)	9/10/14	0	n/a
Cluster E	97.5% (474/486)		21	47-81
Cluster F	95.5% (448/469)		21	46-58
Cluster G	98.2% (3340/3401)		61	46-82
Cluster H	100% (150/150)	10/17/14	0	n/a
Cluster I	100% (264/264)	10/24/14	0	n/a

Four of the seven Cluster

SPOEs demonstrated correction within the one-year period. Clusters E, F, and G were not able to demonstrate compliance within the year, although each cluster did meet a high level of compliance and did not demonstrate system issues. It should be noted that weather and travel restrictions were also a factor in the 45 days not being met timely. The State will continue to provide technical assistance as needed, and monitor the Cluster’s performance to ensure compliance with this indicator. With the exception of Clusters E, F, and G, there were no subsequent corrections needed for all other Cluster SPOEs as they were able to demonstrate compliance with the 45 day timeline and the State verified the correction within one year.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	3	0	1

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

Table 7.3 FFY12: Findings for Initial IFSPs Written within 45 days of Referral

Clusters				Number of days until IFSP was developed
	Verification date	% < 45 days, including EFC	# > 45 days	
Cluster A	10-21-13	100% (259/259)	0	
Cluster F	9-12-13	100% (52/52)	0	
Cluster G		98.1% (670/683)	13	46, 46, 48, 48, 49, 50, 55, 55, 57, 57, 70, 70, 71
Cluster J	9-12-13	100% (211/211)	0	

In accordance with the OSEP Memorandum 09-02, the level of compliance (actual target data) the State reported in FFY 2012 for indicator 7 was 99.1% (9555/9638). As reported in the FFY 2012 APR, there were 83 IFSPs out of the 9638 written that did not meet the 45-day timeline. Four Cluster SPOEs had findings issued for Indicator 7 (A, F, G, and J). Three of the SPOE Clusters were able to demonstrate timely correction, with state verification, within one year, during visits on 9/12/13 and 10/21/13 (see table 7.3 above). Cluster G was not able to demonstrate timely correction of noncompliance; however, no corrective actions have been taken. Cluster G has consistently demonstrated a very high level of compliance for FFY12 (98.1% - 670/683). No systemic issues have been identified. When the IFSP exceeded 45 days, Cluster G has documented that the parent was informed of their rights. In each incident, the referred child had an evaluation, assessment and IFSP albeit after the 45-day timeline.

Indiana has a centralized data system and verification is done through system reports and Quality Review Monitoring at the annual on-site visit. Every referral to Indiana First Steps is entered into the System Point of Entry (SPOE) database with the referral date, child name, and date of birth, address, referral source, and contact information. A quarterly report is generated to capture all referrals received with dates for Intake and IFSP meetings. In order to monitor IFSP timeliness, a Quality Review process has been developed to examine every instance when an IFSP exceeds the 45-day timeline. The determination on whether the delay was the result of an exceptional family circumstance (e.g., family medical emergency, parent/child illness, family relocation or custody change.) or the result of a systemic issue is made by State staff and not Cluster SPOE representatives. The data analysis includes the number of initial IFSPs exceeding 45-day timeline divided by the total number of eligible infants and toddler evaluated and assessed for whom an IFSP meeting was required, and includes the reason for the delay. When the development of the IFSP exceeds 45 days, the actual date of the IFSP is recorded to determine if the child/family subsequently had an IFSP developed. Indiana has verified that the EIS programs with noncompliance reflected in the FFY 2012 data is correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100% compliance) based on a review of updated data subsequently collected through the State's data system, consistent with OSEP Memo 09-02.

Describe how the State verified that each LEA corrected each individual case of noncompliance

Verification of correction of noncompliance was completed through onsite visits, which included both file and data reviews. Correction of noncompliance were verified at both the system and child level. All children received an IFSP, albeit beyond the 45 day timeline.

FFY 2012 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Cluster G has not yet corrected their noncompliance for this indicator. However, the cluster continues to demonstrate a high level of compliance with this indicator. The state will continue to monitor this cluster for any issues at the system and child level.

Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	100%	100%	99.50%	99.70%	100%	99.90%	99.90%	100%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday.

- Yes
- No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,923	1,935	100%	100%	99.38%

Explanation of Slippage

For the clusters that were out of compliance with indicator 8A, a number of records reviewed failed to contain the necessary components (complete steps and services described) of this section of the IFSP. These errors have been corrected and training has been implemented for all service coordinator staff. The state is at a high level of compliance with this indicator, and all clusters were able demonstrate compliance (with State verification) within the one year timeline.

What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

This number represents a sample of the annual IFSPs for eligible infants and toddlers. The sample composed files that were reviewed by the Quality Review Team during the annual on-site visits with each of the clusters and data gathered by clusters during quarterly internal reviews. The data collection strategy involved samples from each of the nine regional Clusters to ensure adequate representation of all children receiving First Steps services in Indiana. For FFY2013, Indiana reviewed a sample of annual IFSPs written between July 1, 2013 and June 30, 2014 to determine if the IFSP had transition steps and services written in the plan. The sampling unit for this indicator included all children, who were at least 90 days, and at the discretion of all parties not more than nine months, prior to their third birthday, with an IFSP written during FFY2013.

In FFY2013, the state was close to meeting the target of 100% for Indicator 8A of IFSPs with transition steps and services. Indiana utilizes a standard IFSP form that includes a section on transition steps, services/strategies, and timelines. This page is completed during the initial IFSP meeting and revised at the annual IFSP.

The sample was 10 percent of all annual IFSPs written during the July to September 2013 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files.

A minimum sample size of 321 IFSPs for the state was determined by using a sampling calculator made available from the website (<http://www.raosoft.com/samplesize.html>) by Raosoft, Inc. The actual number sampled far exceeds the required sample size for a confidence level of 99%, with a confidence interval of +/- 5%.

Provide additional information about this indicator (optional)

FFY13 IFSPs with Transition Steps (TABLE 8a.1)

Cluster SPOE	# of IFSPs Reviewed	% of IFSPs Reviewed with Documented Transition Steps and Services
State	1935	99.4% (1923/1935)
Cluster A	201	100% (201/201)
Cluster B	161	96.9% (156/161)
Cluster C	76	100% (76/76)
Cluster D	99	100% (99/99)
Cluster E	20	100% (20/20)
Cluster F	109	99.1% (108/109)
Cluster G	575	99.5% (572/575)
Cluster H	152	100% (152/152)
Cluster I	170	98.2% (167/170)
Cluster J	372	100% (372/372)

The state issued three findings after the fall Quality Review visit. All clusters were able to meet compliance within the one-year timeline.

TABLE 8a.2

Cluster SPOE	# of IFSPs Reviewed	% of IFSPs Reviewed with Documented Transition Steps and Services	Verification Period and Date of Verification Visit
Cluster B	55	100% (55/55)	(Jan-March 2014) 9/10/14
Cluster G	179	100% (179/179)	(Oct-Dec 2013) 12/31/13
Cluster I	60	100% (60/60)	(Jan-March 2014) 3/31/14

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
			0

Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target	100%	100%	100%	100%	100%	100%	100%	100%
Data	100%	100%	100%	100%	100%	100%	100%	100%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Data include notification to both the SEA and LEA

- Yes
- No

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
5,868	5,868	100%	100%	100%

Describe the method used to collect these data

Since 2005, Indiana has notified the appropriate SEA and LEA utilizing an electronic data transfer of child identifying information (name, date of birth, address) from the local SPOE to the SEA and LEA occurred at least 90 days prior to their third birthday for children who were identified as potentially eligible for Part B services. In the past, this electronic transfer was sent semi-annually in April and October. Beginning after the October 2012 transfer, electronic transfers occurred monthly. Indiana did not adopt a written notice or opt-out policy. Each month all children turning 30 months of age in the previous month are identified. This list of children is sent to the SEA and LEA and to the clusters. In addition to the children turning 30 months, late

referrals are also identified (children who were referred and an IFSP written after 30 months of age) are included in the list sent to the SEA and the LEA.

Indiana provides child name, date of birth, and parent contact information to the appropriate school district (SEA and LEA) based on the address of the child's residence. Effective November, 2012, the electronic transfers of this information began occurring monthly. This procedure has enabled Indiana to provide accurate notification the SEA and LEA of children potentially eligible for Part B services. Additionally, service coordinators (with parental consent) invite the LEA and other community partners (Head Start and local preschool representatives) to the transition meeting. These efforts are increasing LEA and other community partner attendance at the Part C Transition meetings.

Do you have a written opt-out policy? No

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
			0

Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	96.00%	99.00%	99.76%	99.50%	99.90%	99.40%	99.60%	99.60%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services

- Yes
- No

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,137	1,157	99.60%	100%	98.62%

What is the source of the data provided for this indicator?

- State monitoring
- State database that includes data for the entire reporting year

Describe the method used to select EIS programs for monitoring.

The data source for this indicator was the review of a sample of early intervention records of children who exited Part C in FFY2013. The review was conducted by the Quality Review – Focused Monitoring Team and through state verified, quarterly progress data provided by the Clusters. This review demonstrated that 98.6% of the sample reviewed (1137/1157) had evidence of a transition meeting, within 90 to 270 days of the child's third birthday. Indiana continues to maintain a high level of compliance for this indicator.

A list of randomly selected early intervention records was compiled for each of the nine SPOE Clusters. Indiana monitors each EIS program (Cluster) annually. For FFY2013, Indiana reviewed a sample of files of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days at the discretion of all parties not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

The sample was 10 percent of all children due to receive a transition meeting 90-270 days written during the July to September 2013 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files.

A minimum sample size of 288 IFSPs for the state was determined by using a sampling calculator made available from the website

(<http://www.raosoft.com/samplesize.html>) by Raosoft, Inc. The actual number sampled far exceeds the required sample size for a confidence level of 99%, with a confidence interval of +/- 5%.

Provide additional information about this indicator (optional)

Percent of toddlers with disabilities exiting Part C who received timely transition planning for whom the lead agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services

FFY 13 Timely Transition Meeting TABLE 8c.1)

Cluster SPOE	# of IFSPs Reviewed	% of Total EI Records with Documented Transition Meeting, 90-270 Days Prior to Third Birthday	Late Transition Meeting Verification, if child remained in EI Program
State	1157	98.6% (1141/1157)	
Cluster A	204	99.5% (203/204)	Day 86: Due to a family scheduling conflict
Cluster B	76	100% (76/76)	n/a
Cluster C	55	96.4% (53/55)	Day 47 and 46: Due to Cluster SPOE fiscal agent transition
Cluster D	78	100% (78/78)	n/a
Cluster E	31	93.5% (29/31)	Day 88 : Due to the family "no-showing" the original meeting, which was scheduled timely Day 62 : Due to SC oversight in scheduling timely meeting
Cluster F	80	100% (80/80)	n/a
Cluster G	361	97.5% (352/361)	Three files did not contain transition packets, therefore transition meetings were not able to be determined if timely. Day 89, 89, 88, 88, 83, and 74 : Due to SC oversight in scheduling timely meetings
Cluster H	58	100% (58/58)	n/a
Cluster I	85	100% (85/85)	n/a
Cluster J	129	98.4% (127/129)	Day 87 and 84 : Due to family needing to reschedule the original meeting, which was timely

Indiana issued four findings after the fall onsite QR visits. (TABLE 8c.2)

Cluster SPOE	# of IFSPs Reviewed	% of Total EI Records with Documented Transition Meeting, 90-270 Days Prior to Third Birthday	(Data Timeframe) and Verification visit date
Cluster A	69	100% (69/69)	(Oct-Dec 2013) 8/7/14
Cluster E	7	100% (7/7)	(Oct-Dec 2013) 12/31/13
Cluster G	88	96.6% (85/88)	
Cluster J	36	100% (36/36)	(Oct-Dec 2013)8/6/14

Three of the four clusters were able to demonstrate correction of noncompliance with state verification during the one-year timeframe. Cluster G was not able to demonstrate timely correction within the year, although this Cluster did meet a high level of

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compliance and did not demonstrate systemic issues. The State will continue to provide technical assistance as needed, and monitor the Cluster's performance to ensure compliance with this indicator.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2	0	0

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

Table 8C.3: Subsequent Correction of Non-compliance for Timely Transition Meetings

Cluster SPOE	# of IFSPs reviewed	% of total EI Records with documented transition meeting, 90-270 days prior to third birthday	Review Period and State Verification Date
Cluster F	25	100% (25/25)	9/12/13
Cluster G	97	100% (97/97)	11/7/13

Describe how the State verified that each LEA corrected each individual case of noncompliance

In accordance with the OSEP Memorandum 09-02, the level of compliance (actual target data) the State reported in FFY 2012 for Indicator 8C was 99.6% (1119/1123). As reported in the FFY 2012 APR, two clusters had findings issued for Indicator 8C (F and G). All four instances were due to service coordinator oversight. All clusters were able to demonstrate timely correction, within one year of notification. Cluster F and G were able to show subsequent compliance for Indicator 8C during state verification visits on 9/12/13 and 11/7/13. Indiana has verified that the EIS programs with noncompliance identified in FFY 2012 have a documented transition meeting, 90-270 days prior to the child's third birthday.

Verification of compliance was completed through onsite visits, which include file and data reviews. Corrections were verified at both the system and child level. All children received a transition meeting, albeit beyond the 90-270 day timeline.

Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: 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)

Historical Data

Baseline Data:

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥								
Data								

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥						

Targets: Description of Stakeholder Input

This indicator is not applicable, as Indiana has not adopted Part B due process hearing procedures.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/12/2013	3.1 Number of resolution sessions		
EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/12/2013	3.1(a) Number resolution sessions resolved through settlement agreements		

FFY 2013 SPP/APR Data

3.1 Number of resolution sessions	3.1(a) Number resolution sessions resolved through settlement agreements	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data

Provide additional information about this indicator (optional)

Indiana has not set targets for this indicator, as the state has not has not adopted the Part B due process hearing procedures under 34 CFR § 303.420.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Indicator 10: Mediation

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥								
Data								

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥						

Targets: Description of Stakeholder Input

Indiana has not set targets for this indicator, as it has not met the minimum threshold of 10 mediation requests.

Indiana Part C assigns a state staff member (complaint investigator) from the Bureau of Child Development Services to monitor and resolve complaint and hearing requests. A complaint and hearing log is maintained at the State level. Indiana, through the Division of Disability and Rehabilitative Services- Bureau of Child Development Services, also maintains a contract with a special education attorney. The attorney provides the Part C staff with assistance in the development and implementation of policies and procedures regarding due process, complaints, mediations and hearings.

A booklet was designed to familiarize families with Procedural Safeguards. Core training on Procedural Safeguards along with annual training on IDEA Part B and C was implemented during FFY2008. Indiana offers annual training on IDEA Part B and C rules. This particular training addresses procedural safeguards and transition for providers.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1.a.i Mediations agreements related to due process complaints	0	
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1.b.i Mediations agreements not related to due process complaints	0	
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1 Mediations held	0	

FFY 2013 SPP/APR Data

2.1.a.i Mediations	2.1.b.i Mediations	2.1 Mediations held	FFY 2012	FFY 2013	FFY 2013
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FFY 2013 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

agreements related to due process complaints	agreements not related to due process complaints		Data*	Target*	Data
0	0	0			

Provide additional information about this indicator (optional)

Indiana, through the Division of Disability and Rehabilitative Services-Bureau of Child Development Services, maintains a contract with a special education attorney to assist with mediations. The attorney provides the Part C staff with assistance in the development and implementation of policies and procedures regarding due process, complaints, mediations and hearings. Once the IDEA, Part C regulations are available, the attorney will address any needed revisions to the current policies and procedures.

Indiana has never received the minimum of 10 mediation requests; therefore, no targets have been set for this indicator.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Indicator 11: State Systemic Improvement Plan

Monitoring Priority: General Supervision

Results indicator: The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Baseline Data

FFY	2013
Data	52.00%

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	52.00%	52.00%	53.00%	54.00%	55.00%

Description of Measure

Outcome:

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

Progress categories for A:

1. 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.
2. 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.
3. 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.
4. 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.
5. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

Summary Statements for Outcome A:

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

Measurement for Summary Statement 1:

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

Targets: Description of Stakeholder Input

New targets have been proposed for Indiana's child outcome data. These new targets were determined by several discussions with the ICC and audience members composed of parents, System Points of Entry staff, and Service Providers over three ICC meetings (August 2014, November 2014, and January 2015). During these meetings stakeholders identified, evaluated and analyzed trend data over the past 3 years of child outcome data collection. The proposed new targets for FFY13 through FFY18 were subsequently shared with the ICC members at the January 2015 meeting. ICC members reviewed and approved the proposed targets when the ICC adopted the APR.

Indiana uses a broad group of stakeholders to help address child outcomes that include:

- Parents and community leaders from the Indiana Interagency Coordinating Council (ICC)
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- Service Providers
- Assessment Team Providers
- Indiana Department of Education, Division of Exceptional Learners
- Quality Review-Focused Monitoring Teams and state contractors for quality review, training and evaluation (Indiana Institute for Disability and Community at Indiana University)
- State staff from Family and Social Services Administration (FSSA), Bureau of Child Development Services (BCDS)
- The Unified Training System (UTS) representatives

Based on the recommendation of the ICC, state First Steps staff and contracted evaluators proposed the final targets.

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., EIS program and/or EIS provider, geographic region, race/ethnicity, socioeconomic status, gender, etc.) As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

See Attached file.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

See attached file.

State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g.,

FFY 2013 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).

Statement

See attached file

Description

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

See attached file.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

Submitted Theory of Action: [Indiana's Theory of Change graphic](#)



Provide a description of the provided graphic illustration (optional)

Certify and Submit your SPP/APR

This indicator is not applicable.