

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

### Executive Summary:

### Attachments

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### 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 FFY2014 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:

- Indiana Interagency Coordinating Council (ICC) members, such as parents and representatives from Indiana state agencies, including:
  - o Department of Education
  - o Office of Special Education
  - o Department of Health
  - o Division of Family and Children
  - o Head Start
  - o Office of Medicaid Policy and Planning, etc.
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- 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)

Stakeholder meetings were held in 2014 and 2015 to discuss the State Performance Plan (SPP) and Indiana's progress in meeting the SPP targets. Data for the FFY2014 APR were presented to the ICC at its quarterly meeting in January 2016. On January 13, 2016, the ICC completed its final review of the FFY2014 APR. The ICC Chairperson signed the Annual Report Certification to use the State's IDEA, Part C, APR for FFY2014 in lieu of submitting a separate ICC annual report.

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

- the state centralized database (data warehouse)
- claims data from the Central 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.

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 include 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. (See Cluster map at the following link: <http://www.in.gov/fssa/ddrs/4819.htm>). 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. The Quality Improvement Plan (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. The QIP 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. This 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 improvement plans incorporate an ongoing, collaborative program improvement approach which balances compliance monitoring with a targeted results focus. Clusters must submit progress data to demonstrate compliance. 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. 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. Beginning FFY2014, 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.

Quality Review-Focused Monitoring (QRFM) visits for FFY2014 were conducted in the months of October through December 2014, with findings issued by the state to the Cluster in December of 2014, within 90 days of the completion of all visits. All findings were required to be corrected and verified no later than one year. 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.

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**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.

**Attachments**

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**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 Services 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
- 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

**Attachments**

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**Stakeholder Involvement:**  apply this to all Part C results indicators

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.

These stakeholders included:

- Indiana Interagency Coordinating Council (ICC) members, such as parents and representatives from Indiana state agencies, including:
  - o Department of Education
  - o Office of Special Education
  - o Department of Health
  - o Division of Family and Children
  - o Head Start
  - o Office of Medicaid Policy and Planning, etc.
- Cluster Local Planning and Coordinating Councils (LPCCs) and Cluster System Points of Entry (SPOE)
- 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 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 that stakeholders who 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>.

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**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 2005-2013. The Annual Progress Report (APR) for FFY2005-2013 along with OSEP letters of response to the State's December 2005 SPP and the FFY2005-FY2013 APR's on the First Steps web site located at <http://www.firststeps.in.gov> under 'Program Policies & Updates' and then 'Program Evaluation Reports'. The Indiana APR for FFY2014 will be posted following the APR submission on February 2, 2016.

**Attachments**

File Name	Uploaded By	Uploaded Date
No APR attachments found.		

**Actions required in FFY 2013 response**

None

**Indicator 1: Timely provision of services**  
**Historical Data and Targets**

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		91.00%	98.00%	98.00%	98.00%	98.50%	98.00%	99.00%	99.20%	98.30%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2014 - FFY 2018 Targets**

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

**Indicator 1: Timely provision of services**

**FFY 2014 Data**

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)

**FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
3675	3784	98.30%	100%	98.15%	Did Not Meet Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

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)	39
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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.

During the annual onsite visit, the sample was at least 10 percent of all annual IFSPs written during the July to September 2014 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files. Clusters then completed internal monitoring and submitted data on a quarterly basis.

A minimum sample size 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%.

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 39 instances of late starts due to exceptional family



circumstances.

Six of the nine clusters were able to demonstrate correction of noncompliance 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 for the six clusters, 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.

Two Clusters (B & C) were able to meet the compliance target (100%) for this indicator; however, due to state staff turnover the verification letters were not mailed in a timely manner. State verification procedures have been reviewed and updated to ensure that verification letters are sent to clusters in a timely manner.

Only one cluster continued to report non-compliance (Cluster I). Cluster I serves many rural areas of the southern part of the state and has experienced challenges related to finding and retaining providers, particularly for the rural portions of their cluster. In addition, Cluster I experienced a high rate of cluster staff turn-over during this time period. Cluster I, in collaboration with state staff and the QR team continues to explore ways of addressing this issue.

Provide additional information about this indicator (optional)

**Table 1.1 Number of 30 Day Start Services for FFY14**

Cluster/ SPOE	% of total new IFSPs initiated <30 days	Services provided >30 days	Services never provided	Reason services never started	The day the service began
State	<b>98.1%</b> <b>(3714/3784)</b>	<b>70</b>	<b>16</b>		
Cluster A*	99% (590/596)	6	2	Family failed to participate  Child withdrawn by parent	32, 35, 35, 37, 44, 49
Cluster B*	96.2% (205/213)	8	0		31, 33, 35, 36, 40, 44, 69, 70

Cluster C*	98.5% (382/388)	6	1	Family failed to participate	31, 31, 32, 41, 43, 57
Cluster D*	98.3% (352/358)	6	1	Child withdrawn by parent	32, 32, 34, 43, 43, 58
Cluster F*	95% (130/137)	7	2	Child withdrawn by parent (2)	31, 32, 32, 36, 50, 62, 62
Cluster G*	98% (604/615)	11	10	Child withdrawn by parent (8)  Family failed to participate  Family moved/lost residence	31, 31, 32, 34, 34, 35, 36, 37, 37, 40, 47
Cluster H*	99.4% (471/474)	3	0		35, 36, 42
Cluster I*	88.7% (173/195)	22	0		31, 31, 31, 32, 32, 34, 35, 35, 36, 37, 37, 39, 43, 45, 47, 56, 56, 59, 61, 63, 68, 105
Cluster J*	99.9% (807/808)	1	0		41

EFC are included in the % of total new IFSPs initiated within 30 days

\*During FFY2014, nine cluster (\*) SPOEs were issued a finding of noncompliance based on the annual quality review visit.

**Table 1.2 Indicator 1: Correction of Noncompliance for FFY14**

Cluster/SPOE	State Verified Correction of Noncompliance Data	Data Timeframe	State Verification Date
Cluster A	100% (64/64)	January- March 2015	7/9/2015
Cluster B*	100% (38/38)	April –June 2015	10/23/15
Cluster C*	100% (34/34)	April –June 2015	12/3/15
Cluster D	100% (40/40)	October-December 2014	7/21/2015
Cluster F	100% (25/25)	January- March 2015	8/19/2015
Cluster G	100% (31/31)	October-December 2015	12/15/15
Cluster H	100% (38/38)	October-December 2014	5/22/2015
Cluster I	N/A	N/A	N/A
Cluster J	100% (72/72)	October-December 2014	6/2/2015

\*Cluster was able to meet the compliance target (100%) for this indicator however due to state staff turnover the verification letter was not mailed in a timely manner.

The state issued 9 findings for Indicator 1. Indiana was able to demonstrate timely correction of noncompliance and state verification of correction for six of the nine clusters. State verification of correction of non-compliance was done via onsite visits and desk audits and was completed prior to one year from the finding for these six clusters. Corrections were verified at both the system and the child level. Two Clusters (B & C) were able to meet the compliance target (100%) for this indicator; however, due to state staff turnover the verification letters were not mailed in a timely manner. State verification procedures have been reviewed and updated to ensure that verification letters are sent to clusters in a timely manner.

Cluster I was not able to come into compliance within the year. Cluster I serves many rural areas of the southern part of the state and has experienced challenges related to finding and retaining providers, particularly for the rural portions of their cluster. In addition, Cluster I experienced an unusually high rate of cluster staff turn-over during this time period. Cluster I, in collaboration with state staff and the QR team

continues to explore ways of addressing this issue. The State will continue to provide technical assistance as needed, and monitor Cluster I's performance to ensure compliance with this indicator.

## Indicator 1: Timely provision of services

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

**Indicator 1: Timely provision of services**  
**Correction of Previous Findings of Noncompliance**

*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)

**Correction of Findings of Noncompliance Identified in FFY 2013**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	6	1	1

**FFY 2013 Findings of Noncompliance Verified as Corrected**

*Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements*

**Table 1.3 Correction of Noncompliance for FFY13**

Cluster/SPOE	State Verified Correction of Noncompliance Data	Review Period 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 E	100% (51/51)	(Oct-Dec 2013) Verified 12/31/13
Cluster G	100% (31/31)	(Oct-Dec 2015) Verified 12/15/15
Cluster H	100% (132/132)	(Apr-Jun 2014) Verified 10/17/14
Cluster I	NA	NA
Cluster J	100% (108/108)	(Oct-Dec 2013) Verified 8/6/14

Clusters A, B, C, E, H, and J 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 onsite file audits and data reviews. Corrections were verified at both the system and the child level. Reasons for noncompliance were reviewed by each SPOE lead agency. While the lead agency did not find any systemic errors with Cluster A, B, C, E, H, and J, it was noted that in most individual instances the delays were attributed to either a lack of communication between the service coordinator, provider and family, a scheduling difficulty between the parent and provide 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.

Two clusters did not achieve compliance during FFY13:

In FFY2014, Cluster G subsequently corrected a finding of noncompliance (i.e. achieved 100% compliance during the October-December quarter of 2015) based on a review of updated data collected through a desk audit (individual file and data reviews). Each individual case of noncompliance was addressed (e.g., services began, albeit not within 30 days). Corrections were verified at both the system and the child level.

Cluster I has not yet demonstrated correction of noncompliance however each individual case of noncompliance was addressed (e.g., services began, albeit not within 30 days). The lead agency verified at both the system and the child level that services began albeit not within 30 days.

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

In accordance with the OSEP Memorandum 09-02, the state issued 8 findings for Indicator 1. Indiana was able to demonstrate timely correction of noncompliance with state verification for Clusters A, B, C, E, H, and J). Verification of correction of noncompliance was completed prior to one year from the finding.

Two clusters did not achieve compliance during FFY13:

In FFY2014, Cluster G subsequently corrected a finding of noncompliance (achieved 100% compliance during the October-December quarter of 2015) based on a review of updated data collected through a desk audit (individual file and data reviews). Each individual case of noncompliance was addressed (e.g., services began, albeit not within 30 days). Corrections were verified at both the system and the child level.

Cluster I has not yet demonstrated correction of noncompliance however each individual case of noncompliance was addressed (e.g., services began, albeit not within 30 days). The lead agency verified at both the system and the child level that services began albeit not within 30 days.

The FFY2013 APR reported that in the 46 individual child instances where services were not provided timely, 45 children did receive the services, albeit not within 30 days. In the FFY2013 APR, it was reported that one child in Cluster D never received services. The family was unresponsive after multiple attempts to contact them. The SPOE mailed a letter to the family giving 10 day notice of the file closure and no response was received from the family.

#### **FFY 2013 Findings Not Yet Verified as Corrected**

*Actions taken if noncompliance not corrected*

While Cluster I has not reached full compliance of 100%, the cluster has demonstrated continued improvement over the course of the fiscal year. Following the baseline quarter FFY2014, Cluster I has demonstrated marked improvement and reached a high level of compliance in Quarter 3 (96.86%) and Quarter 4 (97%). Cluster I was required to create and submit quarterly Quality Improvement Plans, providing a hypothesis to explain the noncompliance data, identify strategies for improvement, and provide an explanation of stakeholder collaboration to correct the noncompliance. In review of this information the following root causes were identified:

- Lack of documentation present to confirm whether delays were due to system or exceptional family circumstance
- Provider availability for some services resulted in late assignment of providers
- Cluster I serves predominantly rural areas of the state and has experienced challenges related to finding and retaining providers
- Unusually high rate of cluster staff turn-over

The state takes specific actions to assist clusters when they do not reach compliance. 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 staff also provides direct technical assistance to local programs through ongoing contract monitoring activities and periodic data reviews.

The state will continue to provide the above mentioned technical assistance to support ongoing quality and compliance improvements for Cluster I. However, due to continued noncompliance with this indicator, FFY 2014 performance based funds were withheld from Cluster I.

**Correction of Findings of Noncompliance Identified Prior to FFY 2013**

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2013 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
None			



## Indicator 2: Services in Natural Environments

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			94.00%	94.00%	95.00%	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%	98.77%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

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

Key:  Blue – Data Update

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

## Indicator 2: Services in Natural Environments

FFY 2014 Data

*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)**

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	<a href="#">Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</a>	9,240	
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	<a href="#">Total number of infants and toddlers with IFSPs</a>	9,495	

**FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
9,240	9,495	98.77%	95.00%	97.31%	Met Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

**Provide additional information about this indicator (optional)**

In FFY14, 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 intervention 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 team makes 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.

## Indicator 2: Services in Natural Environments

### Required Actions from FFY 2013

*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)**

#### Actions required in FFY 2013 response

None

**Indicator 3: Early Childhood Outcomes**  
**Historical Data and Targets**

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)

Does your 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

**Historical Data**

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A1	2008	Target ≥						52.00%	53.00%	53.00%	53.00%	55.00%
		Data					51.70%	51.00%	49.00%	50.00%	52.00%	53.91%
A2	2008	Target ≥						50.00%	51.00%	51.00%	51.00%	57.00%
		Data					49.90%	49.00%	47.00%	49.00%	54.00%	56.42%
B1	2008	Target ≥						57.00%	58.00%	58.00%	58.00%	55.00%
		Data					56.30%	59.00%	59.00%	56.00%	55.00%	51.64%
B2	2008	Target ≥						69.00%	70.00%	70.00%	70.00%	72.00%
		Data					68.50%	68.00%	68.00%	69.00%	72.00%	71.91%
C1	2008	Target ≥						54.00%	55.00%	55.00%	55.00%	55.00%
		Data					53.80%	54.00%	52.00%	53.00%	50.00%	50.25%
C2	2008	Target ≥						62.00%	63.00%	63.00%	63.00%	67.00%
		Data					61.70%	59.00%	58.00%	63.00%	66.00%	66.55%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**Explanation of Changes**

**FFY 2014 - FFY 2018 Targets**

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

Key:  Blue – Data Update

**Explanation of Changes**

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).



Enter additional information about stakeholder involvement

### OSEP Response

Neither the State's FFY 2013 SPP/APR, nor its FFY 2014 SPP/APR, include the previously established targets for FFY 2012. This is apparently a pre-population error. The State should insert the previously established targets for FFY 2012.

**Indicator 3: Early Childhood Outcomes**

**FFY 2014 Data**

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)

FFY 2014 SPP/APR Data	
Number of infants and toddlers with IFSPs assessed	6575.00

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	126.00	1.92%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2148.00	32.67%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	285.00	4.33%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2372.00	36.08%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	1644.00	25.00%

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
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 $(c+d)/(a+b+c+d)$ .	2657.00	4931.00	53.91%	55.00%	53.88%	Did Not Meet Target	No Slippage
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 $(d+e)/(a+b+c+d+e)$ .	4016.00	6575.00	56.42%	57.00%	61.08%	Met Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	85.00	1.29%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1348.00	20.50%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	307.00	4.67%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1207.00	18.36%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	3628.00	55.18%

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
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	1514.00	2947.00	51.64%	55.00%	51.37%	Did Not Meet Target	No Slippage

**FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
program (c+d)/(a+b+c+d).							
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).	4835.00	6575.00	71.91%	72.00%	73.54%	Met Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

**Outcome C: Use of appropriate behaviors to meet their needs**

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	121.00	1.84%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1770.00	26.92%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	232.00	3.53%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1626.00	24.73%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2826.00	42.98%

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
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).	1858.00	3749.00	50.25%	55.00%	49.56%	Did Not Meet Target	No Slippage
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).	4452.00	6575.00	66.55%	67.00%	67.71%	Met Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

**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's Part C program employs the Assessment, Evaluation, and Program System for Infants and Children (AEPS) to determine children's eligibility and developmental status in relation to 'same-aged peers.' The AEPS is administered by a multidisciplinary Assessment Team at entrance into Part C to determine eligibility and initial developmental status; at exit, the child's ongoing service providers compile progress data on AEPS skills and provide this data to an Assessment Team member for final scoring on the AEPS. In FFY2014, a new instrument and procedure was used to increase the quality and accuracy of exit assessments. The state developed a standard data collection tool for recording children's progress upon exit. All ongoing service providers are asked to complete this Exit Skills Checklist within the child's final month of service. The Assessment Team uses this checklist to determine scoring of the AEPS. Only Assessment Team members with extensive training on the AEPS may compute final scores in the form of standard deviations below the mean (0, -1., -1.5, and -2.0). If a child shows no developmental delays on the AEPS (zero or no standard deviations), then the child's status is defined as 'comparable to same-aged peers.' Three domains of the AEPS are associated with each of the three federal outcomes:

1. Outcome 1 - Social/Emotional domain
2. Outcome 2- Cognitive domain



3. Outcome 3- Adaptive domain

Provide additional information about this indicator (optional)

**OSEP Response**

Neither the State's FFY 2013 SPP/APR, nor its FFY 2014 SPP/APR, include the previously established targets for FFY 2012. This is apparently a pre-population error. The State should insert the previously established targets for FFY 2012.

### Indicator 3: Early Childhood Outcomes

#### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

**Indicator 4: Family Involvement**  
**Historical Data and Targets**

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2004 2006	Target ≥		99.00%	99.00%	99.00%	99.00%	100%	99.00%	99.00%	99.00%	97.00%
		Data	99.90%		96.50%	94.00%	95.60%	96.30%	96.10%	95.10%	96.88%	96.44%
B	2004 2006	Target ≥		99.00%	99.00%	99.00%	99.00%	100%	99.00%	99.00%	99.00%	97.00%
		Data	99.90%		98.70%	98.40%	98.70%	98.90%	98.90%	95.30%	96.17%	96.22%
C	2004 2006	Target ≥		99.00%	99.00%	99.00%	99.00%	100%	97.00%	97.00%	97.00%	95.00%
		Data	95.50%		94.00%	93.80%	94.80%	95.30%	95.80%	93.80%	95.28%	94.22%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**Explanation of Changes**

It was discovered when writing the FFY2013 APR that Indiana's baseline data was entered incorrectly and the Baseline Year should be from 2004 instead of 2006. The correct percentages for 2004 should be Outcome A: 99.9%, Outcome B: 99.9% and Outcome C: 95.5%.

**FFY 2014 - FFY 2018 Targets**

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

Key:  Blue – Data Update

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

**Indicator 4: Family Involvement**

**FFY 2014 Data**

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)

**FFY 2014 SPP/APR Data**

Number of respondent families participating in Part C	4912.00
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	4742.00
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	4912.00
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	4730.00
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	4912.00
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	4654.00
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	4912.00

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	96.44%	97.00%	96.54%	Did Not Meet Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	96.22%	97.00%	96.29%	Did Not Meet Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	94.22%	95.00%	94.75%	Did Not Meet Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

**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 FFY2014, 4,912 families completed the entire survey. This represents 72% of all families (N=6850) 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 continue to identify improvement efforts to increase the percentage of families completing the exit survey. Each regional office is responsible for providing quarterly data and noting ongoing efforts to ensure completion and accuracy of the family survey data. 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

Provide additional information about this indicator (optional)

How representative of the general First Steps population is our sample of families who completed the family outcomes survey upon their exit from early intervention? A series of descriptive analyses were conducted that looked at representativeness by geography (region of residence), child race, family income level, and child eligibility. The makeup of the entire exiting population of children and families who were in First Steps for at least six months was compared to the makeup of the sample completing the exit family survey. The results, presented below in the following tables, suggest that the sample of families who did complete the exit family survey were highly representative of the overall First Steps population of families.

Table 1. Representativeness across the nine regions in Indiana

Table 1 shows a very close representation of the sample data by region, with Cluster G showing the largest difference of being under represented (1.2%).

	A	B	C	D	F	G	H	I	J
Sample	12.7%	10.8%	9.6%	8.2%	3.9%	27.5%	6.7%	12.4%	8.2%
Population	12.7%	9.9%	9.3%	8.1%	4.1%	28.7%	6.1%	12.8%	8.3%
(dif)	0.0%	0.9%	0.3%	0.1%	-0.2%	-1.2%	0.6%	-0.4%	-0.1%

Table 2. Representativeness across children's race.

Table 2 shows a very close representation of the sample data by race, with a very slight over representation of White children

	2 or more races	American Indian/ Pacific Island	Asian	Black or African American	Hispanic/ Latino	White
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Sample	5.4%	0.2%	1.2%	8.5%	8.4%	76.3%
Population	5.7%	0.2%	1.4%	9.2%	8.5%	74.9%
(dif)	-0.3%	0.0%	-0.2%	-0.8%	-0.2%	1.4%

Table 3. Representativeness across family poverty levels.

Table 3 shows a close representation of the sample data by family income level, with the sample slightly under representative of the very lowest income families.

	0-100%	101-200%	201-300%	>300%
Sample	41.8%	23.3%	15.2%	19.7%
Population	44.9%	21.9%	14.3%	18.9%
(dif)	-3.1%	1.3%	1.0%	0.8%

Table 4. Representativeness across child eligibility.

Table 4 also indicates that the sample of families completing the exit survey is representative of all exiting families based on their child’s eligibility for services, with children showing delays in only one domain slightly under represented (-1.1%).

	20% Delay in 2 or more Domains	25% Delay in 1 Domain	Medical Diagnosis
Sample	72.9%	13.7%	13.4%
Population	72.2%	14.8%	13.1%
(dif)	0.8%	-1.1%	0.3%

**OSEP Response**

The State checked the box indicating that "Yes, the data accurately represent the demographics of the State," and described its efforts to increase the percentage of families completing survey, but the State did not, as required by the measurement for this indicator, "Include a description of how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State."

## Indicator 4: Family Involvement

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None



## Indicator 5: Child Find (Birth to One)

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			1.40%	1.40%	1.40%	1.40%	1.40%	1.40%	1.40%	1.56%
Data		1.40%	1.39%	1.25%	1.25%	1.30%	1.38%	1.26%	1.40%	1.22%


Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

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

Key:  Blue – Data Update

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

 Enter additional information about stakeholder involvement

**Indicator 5: Child Find (Birth to One)**

**FFY 2014 Data**

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)

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	<a href="#">Number of infants and toddlers birth to 1 with IFSPs</a>	1,050	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	4/3/2014	<a href="#">Population of infants and toddlers birth to 1</a>	82,993	null

**FFY 2014 SPP/APR Data**

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
1,050	82,993	1.22%	1.56%	1.27%	Did Not Meet Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

**Provide additional information about this indicator (optional)**

A new target was set and approved by OSEP in April 2015 for this indicator. The state continues to work with existing referral sources and will continue to identify new referral sources in each cluster that can help increase the number of children under twelve months being served by the early intervention system.

Indiana continues to serve more children in the state's birth to one population than the national average (1.11%).

## Indicator 5: Child Find (Birth to One)

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

## Indicator 6: Child Find (Birth to Three)

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			3.30%	3.25%	3.25%	3.15%	3.00%	3.00%	3.00%	3.83%
Data		3.83%	3.66%	3.44%	3.64%	3.74%	3.92%	3.54%	3.65%	3.64%


Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

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

Key:  Blue – Data Update

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

 Enter additional information about stakeholder involvement

## Indicator 6: Child Find (Birth to Three)

### FFY 2014 Data

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)

#### Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	<a href="#">Number of infants and toddlers birth to 3 with IFSPs</a>	9,495	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	7/2/2015	<a href="#">Population of infants and toddlers birth to 3</a>	250,287	

#### FFY 2014 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
9,495	250,287	3.64%	3.83%	3.79%	Did Not Meet Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

Provide additional information about this indicator (optional)

A new target was set and approved by OSEP in April 2015. Each cluster continues to work with existing referral sources and identify new sources for referrals locally.

Indiana continues to serve more children in the state's birth to three population than the national average (2.82%).

## Indicator 6: Child Find (Birth to Three)

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

## Indicator 7: 45-day timeline

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		99.62%	99.53%	99.60%	99.80%	99.90%	99.80%	99.50%	99.10%	97.60% <del>98.39%</del>

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### Explanation of Changes

Indiana discovered an error that was made while calculating the percentages for this indicator during FFY2013. During this timeframe, Indiana transitioned from an access database to a SQL Server database, iSPOE. In the transition process, a conversion error was made. Indiana reported 11606 out of 11796 in the FFY2013 APR (98.4%). However, the accurate data should be 9291 out of 9436 (97.6%).

#### FFY 2014 - FFY 2018 Targets

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

**Indicator 7: 45-day timeline**

**FFY 2014 Data**

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)

**FFY 2014 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 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
9,731	10,141	97.60%	100%	97.01%	Did Not Meet Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

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)	107
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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 decline to proceed. 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 or services meeting, they are provided with local resource information and are informed that they may choose to 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 about 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 in 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 of 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. Because State staff review every late 45 day instance, there is no separate verification process (as there is with other indicators).

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 noncompliance are only identified and issued during the annual quality review visit, unless the State identifies a systemic error within a subsequent quarter.

Provide additional information about this indicator (optional)

**Table 7.1 Indicator 7: 45-Day Timeline for FFY14**

<b>Cluster SPOE</b>	<b>Total # IFSPs</b>	<b>% ≤ 45 Days, including EFC</b>	<b># &gt; 45 Days</b>	<b>Range of days until IFSP was developed</b>
<b>State</b>	<b>10141</b>	<b>97.0% (9838/10141)</b>	<b>303</b>	<b>46-98</b>
<b>Cluster A*</b>	1082	99.6% (1078/1082)	4	48-58
<b>Cluster B*</b>	938	99.3% (931/938)	7	46-56
<b>Cluster C*</b>	925	96.4% (892/925)	33	46-98

<b>Cluster D*</b>	766	98.6% (755/766)	10	46-88
<b>Cluster F*</b>	437	90.4% (395/437)	42	46-76
<b>Cluster G*</b>	3104	95.8% (2973/3104)	131	46-96
<b>Cluster H</b>	654	99.2% (649/654)	5	47-62
<b>Cluster I</b>	1178	94.7% (1116/1178)	62	46-94
<b>Cluster J*</b>	1048	99.2% (1040/1048)	8	49-66

\*The clusters with an asterisk received a state finding based on the annual QR visit.

During the FFY2014, seven Cluster SPOEs were issued a finding of noncompliance based on the annual quality review visit. Clusters H and I were in compliance from the baseline and did not receive a finding for this indicator.

**Table 7.2 Indicator 7: Correction of Noncompliance for FFY14**

<b>Cluster SPOE</b>	<b>State Verified Correction of Noncompliance Data</b>	<b>Data Timeframe</b>	<b>State Verification Date</b>
<b>Cluster A*</b>	100% (266/266)	October-December 2014	7/9/2015
<b>Cluster B</b>	N/A	N/A	N/A
<b>Cluster C</b>	100% (219/219)	July-September 2015	12/15/2015

<b>Cluster D*</b>	100% (217/217)	April-June 2015	11/11/2015
<b>Cluster F</b>	N/A	N/A	N/A
<b>Cluster G</b>	N/A	N/A	N/A
<b>Cluster J*</b>	100% (304/304)	April-June 2015	11/1/2015

\*Clusters A, D, and J were able to meet the compliance target (100%) for this indicator however due to state staff turnover the verification letter was not mailed in a timely manner.

The state issued 7 findings for Indicator 7. Indiana was able to demonstrate timely correction of noncompliance (with state verification) for Cluster C. State verification of correction of non-compliance was done via onsite visits and desk audits and was completed prior to one year from the finding for this cluster. Corrections were verified at both the system and the child level.

Three Clusters (A, D, J) were able to meet the compliance target (100%) for this indicator however due to state staff turnover the verification letter was not mailed in a timely manner. State verification procedures have been reviewed and updated to ensure that verification letters are sent to clusters in a timely manner.

Three clusters (B, F, G) remain noncompliant with this indicator. The three clusters (B, F, G) that remained noncompliant experienced the following challenges:

Cluster B: Seven children received IFSPs after the 45 day timeline. All of these instances were due to assessment team limitations.

Cluster F: Forty-two children received IFSPs after the 45 day timeline. A review of a sample of these children indicated that assessment team shortages and consequent scheduling issues were at the root of the problem.

Cluster G: One hundred and thirty-one children received IFSPs after the 45 day timeline. Seventy-six of the 131 were due to assessment team scheduling. Twenty of the 131 were due to exceptional family circumstances that were not adequately documented and therefore counted as system errors. Eighteen of the 131 were service coordinator scheduling issues. Five of the 131 were due to cost participation issues. Twelve of the 131 were due to "other system errors".

Every child who received a late IFSP in FFY2014 did receive an evaluation, assessment and IFSP, albeit beyond the 45 day timeline.

The State will continue to provide technical assistance as needed, and monitor these clusters' performance to ensure compliance with this indicator.

## Indicator 7: 45-day timeline

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

**Indicator 7: 45-day timeline**

**Correction of Previous Findings of Noncompliance**

*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)

**Correction of Findings of Noncompliance Identified in FFY 2013**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	4	0	3

**FFY 2013 Findings of Noncompliance Verified as Corrected**

*Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements*

**Table 7.3 Correction of Noncompliance for FFY 2013:**

Cluster/SPOE	% $\geq$ 45 Days	Verification Date	# $\geq$ 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)	N/A	21	47-81
Cluster F	95.9% (350/365)	N/A	15	46-58
Cluster G	98.1% (2683/2735)	N/A	52	46-82
Cluster H	100% (150/150)	10/17/14	0	n/a
Cluster I	100% (264/264)	10/24/14	0	n/a

Clusters A, B, H, 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 included both file and data reviews. Corrections were verified at both the system and the child level.

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 of 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 the 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 Clusters A, B, H and I demonstrated correction of noncompliance based on a review of updated data, subsequently collected through the State's data system, consistent with OSEP Memo 09-02.

Three clusters (E, F, and G) were not able to demonstrate timely correction of noncompliance.

Cluster E was dissolved and its counties were absorbed into Clusters A, B, C, and D in May 2014. The clusters that absorbed Cluster E's counties were all in compliance with this indicator for FFY2013. Those counties which comprised Cluster E continue to be monitored, and the clusters that absorbed Cluster E's counties all achieved a high level of compliance for FFY2014 (>95%).

Clusters F and G have not yet demonstrated correction of noncompliance however each individual case of noncompliance was addressed. Every child who received a late IFSP in FFY2013 did receive an evaluation, assessment and IFSP, albeit beyond the 45 day timeline. Overall, Clusters F and G consistently demonstrated a very high level of performance for FFY13 (> 95%).

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

In accordance with the OSEP Memorandum 09-02, the state issued seven findings for indicator 7 (A, B, E, F, G, H, and I). Indiana was able to demonstrate timely correction of noncompliance with state verification for Clusters A, B, H, and I. Verification of correction of noncompliance was completed prior to one year from the finding.

As reported in the FFY2013 APR, there were 145 IFSPs that did not meet the 45-day timeline. Indiana has verified that every child who received a late IFSP in FFY2013 did receive an evaluation, assessment and IFSP, albeit beyond the 45 day timeline. When the IFSP exceeded 45 days, clusters documented that the family was informed of their rights. Correction of noncompliance was verified at both the system and child level.

Verification of correction of noncompliance was completed on an on-going basis via a Quality Review process that included file and data reviews and has been developed to examine every instance when the IFSP exceeds the 45-day timeline. The determination of 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.

While the lead agency did not find any systemic errors, please note that in most instances the individual reasons for delay were attributed to either a lack of communication between the service coordinator, assessment team, and family, a scheduling difficulty between the parent and assessment team or a delay resulting from provider shortages on the assessment team. Weather and travel issues (warnings issued preventing anyone other than emergency personnel from traveling) were also noted.

Three clusters (E, F, and G) were not able to demonstrate timely correction of non-compliance.

Cluster E was dissolved and its counties were absorbed into Clusters A, B, C, and D in May 2014. The clusters that absorbed Cluster E's counties were all in compliance with this indicator for FFY2013. Those counties which comprised Cluster E continue to be monitored, and the clusters that absorbed Cluster E's counties all achieved a high level of compliance for FFY2014. Every child who received a late IFSP in FFY2013 did receive an evaluation, assessment and IFSP, albeit beyond the 45 day timeline. When the IFSP exceeded 45 days, clusters documented that the family was informed of their rights.

Clusters F and G have not yet demonstrated correction of noncompliance however each individual case of noncompliance was addressed. Every child who received a late IFSP in FFY2013 did receive an evaluation, assessment and IFSP, albeit beyond the 45 day timeline. When the IFSP exceeded 45 days, clusters documented that the family was informed of their rights. Overall, Clusters F & G have consistently demonstrated a very high level of performance for FFY13 (> 95%).

#### FFY 2013 Findings Not Yet Verified as Corrected

*Actions taken if noncompliance not corrected*

Cluster F has not reached full compliance of 100%; however, in FFY2013 Cluster F demonstrated a high level of performance (95.5%). Cluster F was required to create and submit quarterly Quality Improvement Plans, providing a hypothesis to explain the noncompliance data, identify strategies for improvement, and provide an explanation of stakeholder collaboration to correct the noncompliance. In review of this information the following root causes were identified:

- Understaffing of Assessment Team personnel
- Weather related issues during winter months

Cluster G has not reached full compliance of 100%; however, in FFY2013 the cluster demonstrated a high level of performance (98.1%). Cluster G was required to create and submit quarterly Quality Improvement Plans, providing a hypothesis to explain the noncompliance data, identify strategies for improvement, and provide an explanation of stakeholder collaboration to correct the noncompliance. In review of this information the following root causes were identified:

- Transition to fully electronic documentation processes causing lack of attention to detail by service coordinators
- Service coordinator errors related to scheduling, documentation, and communication
- Temporary understaffing of Assessment Team Personnel

The state takes specific actions to assist clusters when they do not reach compliance. 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 staff also provides direct technical assistance to local programs through ongoing contract monitoring activities and periodic data reviews.

The state will continue to provide the above mentioned technical assistance to support ongoing quality and compliance improvements for Clusters F and G. However, due to continued noncompliance with this indicator, FFY 2014 performance based funds were withheld from Clusters F and G.

**Correction of Findings of Noncompliance Identified Prior to FFY 2013**

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2013 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY2012	1	null	1

**FFY 2012 Findings Not Yet Verified as Corrected**

*Actions taken if noncompliance not corrected*

Cluster G has not reached full compliance of 100%; however, the cluster demonstrated a high level of performance during FFY2014 (95.8%), FFY2013 (98.1%), and FFY2012 (98.5%). Cluster G was required to create and submit quarterly Quality Improvement Plans, providing a hypothesis to explain the noncompliance data, identify strategies for improvement, and provide an explanation of stakeholder collaboration to correct the noncompliance. In review of this information the following root causes were identified:

- Transition to fully electronic documentation processes causing lack of attention to detail by service coordinators
- Service coordinator errors related to scheduling, documentation, and communication
- Temporary understaffing of Assessment Team Personnel

While Cluster G has not met compliance for this indicator, it should be noted that every child who received a late IFSP in FFY2012 did receive an evaluation, assessment and IFSP, albeit beyond the 45 day timeline. When the IFSP exceeded 45 days, clusters documented that the family was informed of their rights.

While the lead agency did not find any systemic errors, please note that Cluster G is our largest cluster and serves approximately a third of the state. Due to the number of children being served, it is particularly challenging to achieve compliance. In most instances the individual reasons for delay were attributed to either a lack of communication between the service coordinator, assessment team, and family, a scheduling difficulty between the parent and assessment team or a delay resulting from provider shortages on the assessment team.

The state takes specific actions to assist clusters when they do not reach compliance. 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 staff also provides direct technical assistance to local programs through ongoing contract monitoring activities and periodic data reviews.

The State will continue to provide technical assistance as needed and monitor Cluster G's performance to



ensure compliance with this indicator.

## Indicator 8: Early Childhood Transition

FFY 2014 Data: All Indicator 8 Sections

*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)

### FFY 2014 SPP/APR Data

Number of toddlers with disabilities exiting Part C	9,202
Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	6,870

Provide additional information about this indicator (optional)

## Indicator 8A: Early Childhood Transition

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		100%	100%	99.50%	99.70%	100%	99.90%	99.90%	100%	99.38%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

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

**Indicator 8A: Early Childhood Transition**

**FFY 2014 Data**

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)

**FFY 2014 SPP/APR Data**

Source	Date	Description	Data	Overwrite Data
<a href="#">Indicator 8</a>	1/12/2016	Number of toddlers with disabilities exiting Part C	9,202	2,398
<a href="#">Indicator 8</a>	12/16/2015	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	6,870	null

**Explanation of Alternate Data**

Indiana does not review the records of all children exiting the Part C system.

This number represents a sample of the annual IFSPs for eligible infants and toddlers. The sample is composed of 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 FFY2014, Indiana reviewed a sample of annual IFSPs written between July 1, 2014 and June 30, 2015 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 FFY2014.

During the annual onsite visit, the sample was at least 10 percent of all annual IFSPs written during the July to September 2014 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files. Clusters then completed internal monitoring and submitted data on a quarterly basis.

A minimum sample size 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%.

**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 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
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Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
2,396	2,398	99.38%	100%	99.92%	Did Not Meet Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of children exiting Part C who have an IFSP with transition steps and services)	0
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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.**

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 FFY2014, Indiana reviewed a sample of annual IFSPs written between July 1, 2014 and June 30, 2015 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 FFY2014.

In FFY2014, 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.

During the annual onsite visit, the sample was at least 10 percent of all annual IFSPs written during the July to September 2014 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files. Clusters then completed internal monitoring and submitted data on a quarterly basis.

A minimum sample size 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)

**Table 8a.1 Indicator 8A: IFSP's with Transition Steps and Services for FFY14**

Cluster SPOE	# of IFSPs Reviewed	% of IFSPs reviewed with documented transition steps and services

<b>State</b>	2398	99.9% (2396/2398)
<b>Cluster A</b>	242	100% (242/242)
<b>Cluster B</b>	173	100% (173/173)
<b>Cluster C</b>	226	100% (226/226)
<b>Cluster D</b>	103	100% (103/103)
<b>Cluster F *</b>	142	99.3% (141/142)
<b>Cluster G *</b>	568	99.8% (567/568)
<b>Cluster H</b>	248	100% (248/248)
<b>Cluster I</b>	185	100% (185/185)
<b>Cluster J</b>	511	100% (511/511)

\* Clusters that were issued a finding for this indicator.

The state issued two findings letters for this indicator (F and G).

**Table 8a.2 Indicator 8A: Correction of Noncompliance for FFY14**

<b>Cluster SPOE</b>	<b>State Verified Correction of Noncompliance Data</b>	<b>Data Timeframe</b>	<b>State Verification Date</b>
<b>Cluster F</b>	100% (28/28)	October-December 2014	8/19/2015
<b>Cluster G</b>	100% (112/112)	October-December 2014	7/24/2015

The state issued two findings (F and G) for Indicator 8A. Indiana was able to demonstrate timely correction of noncompliance and state verification of correction for Clusters F and G. State verification of correction of noncompliance was done via onsite visits and desk audits and was completed prior to one year from the finding for these two clusters. Corrections were verified at both the system and the child level.

## Indicator 8A: Early Childhood Transition

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

**Indicator 8A: Early Childhood Transition**  
**Correction of Previous Findings of Noncompliance**

*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)

**Correction of Findings of Noncompliance Identified in FFY 2013**

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

**FFY 2013 Findings of Noncompliance Verified as Corrected**

*Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements*

**Table 8a.3 Indicator 8A: Correction of Noncompliance for FFY13:**

Cluster SPOE	State Verified Correction of Noncompliance Data	Review period and State Verification Date
Cluster B	100% (55/55)	(Jan-March 2014) Verified 9/10/14
Cluster G	100% (179/179)	(Oct-Dec 2013) Verified 12/31/13
Cluster I	100% (60/60)	(Jan-March 2014) Verified 3/31/14

In FFY2013, Clusters B, G, and I received a finding for this indicator. All three clusters 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 included both file and data reviews. Corrections were verified at both the system and the child level.

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

In accordance with the OSEP Memorandum 09-02, the level of compliance (actual target data) the State reported in FFY2013 for indicator 8A was 99.4% (1923/1935). As reported in the FFY 2013 APR, three



Clusters (B, G, and I) were found to be out of compliance for documentation of IFSP transition steps and services. Subsequently, Indiana was able to demonstrate timely correction of noncompliance with state verification for all three Clusters. Verification of correction of noncompliance was completed prior to one year from the finding. Verification of compliance was completed through onsite visits, which include file and data reviews. Corrections were verified at both the system and child level. For the 12 children who did not receive documented transition steps and services in their IFSPs, State staff worked with Clusters to ensure that all of the 12 children received appropriate transition steps and services and that these steps and services were documented correctly in the IFSPs.

The SPOEs and lead agency reviewed the cause of the error. A number of records reviewed failed to contain the necessary components (complete steps and services described) of this section of the IFSP. These errors were 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 to demonstrate compliance (with state verification) within the one year timeline.

**Correction of Findings of Noncompliance Identified Prior to FFY 2013**

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2013 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
None			

**Indicator 8B: Early Childhood Transition**  
**Historical Data and Targets**

*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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		100%	100%	100%	100%	100%	100%	100%	100%	100%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

**FFY 2014 - FFY 2018 Targets**

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

## Indicator 8B: Early Childhood Transition

### FFY 2014 Data

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)

#### FFY 2014 SPP/APR Data

Source	Date	Description	Data	Overwrite Data
Indicator 8	12/16/2015	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	6,870	null

#### Data include notification to both the SEA and LEA

- Yes
- No

#### Please explain

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 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
6,870	6,870	100%	100%	100%	Met Target	No Slippage

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

Number of parents who opted out (this number will be subtracted from the number of toddlers with disabilities exiting Part C who were potentially eligible for Part B when calculating the FFY 2014 Data)	null
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#### Describe the method used to collect these data

Beginning November 2012, 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) and 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**

**Is the policy on file with the Department? No**

**Policy:**

[No Policy Submitted](#) No Policy Submitted

**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.**

**Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).**

Effective November, 2012, the electronic transfers of this information began occurring monthly.

**Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.**

Electronic transfers are done for all children participating in the program and this information is sent on a monthly basis. 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) and 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. This has enabled Indiana to provide accurate, on-going notification to the SEA and LEA of children potentially eligible for Part B services.

**Provide additional information about this indicator (optional)**

**OSEP Response**

The State did not mark "Yes" or "No" on the FFY 2014 data page for Indicator 8B of the SPP/APR where the State was asked whether the "Data include notification to both the SEA and LEA." The State did however include a description in its narrative which indicates that notification to both the SEA and LEA is occurring. The State needs to confirm that its FFY 2014 data for this indicator include notification to both the SEA and LEA by marking "Yes" for that section.

## Indicator 8B: Early Childhood Transition

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

**Indicator 8B: Early Childhood Transition**  
**Correction of Previous Findings of Noncompliance**

*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)

**Correction of Findings of Noncompliance Identified in FFY 2013**

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

**Correction of Findings of Noncompliance Identified Prior to FFY 2013**

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2013 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
None			

## Indicator 8C: Early Childhood Transition

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		96.00%	99.00%	99.76%	99.50%	99.90%	99.40%	99.60%	99.60%	98.62%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

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

**Indicator 8C: Early Childhood Transition**

**FFY 2014 Data**

*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)

**FFY 2014 SPP/APR Data**

Source	Date	Description	Data	Overwrite Data
<a href="#">Indicator 8</a>	12/16/2015	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	6,870	1,408

**Explanation of Alternate Data**

Indiana does not review the records of all children exiting the Part C system. Instead, the data source for this indicator was the review of a sample of early intervention records of children who exited Part C in FFY2014. The annual review was conducted by the Quality Review–Focused Monitoring Team.

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 FFY2014, Indiana reviewed a sample of files of toddlers with disabilities exiting Part C where the transition conference occurred 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. The sample was 10 percent of all children due to receive a transition meeting 90-270 days written during the July to September 2014 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files. A minimum sample size 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%.

Additionally, quarterly progress data was provided by the clusters which was verified by the State when they report compliance. This review demonstrated that 99.1% of the sample reviewed (1395/1408) had evidence of a transition meeting during the July to September 2014 quarter. Indiana continues to maintain a high level of compliance for this indicator.

**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	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
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Part B					Did Not Meet Target	No Slippage
1,395	1,408	98.62%	100%	99.08%		

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

Number of toddlers for whom the parent did not provide approval for the transition conference (this number will be subtracted from the number of toddlers with disabilities exiting Part C who were potentially eligible for Part B when calculating the FFY 2014 Data)	null
Number of documented delays attributable to exceptional family circumstances (this number will be added to the 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)	null

**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.**

The data source for this indicator was the review of a sample of early intervention records of children who exited Part C in FFY2014. The annual review was conducted by the Quality Review–Focused Monitoring Team.

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 FFY2014, 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 2014 quarter. For smaller clusters, the number of files reviewed was increased to include at least 20 files. A minimum sample size 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%.

Additionally, quarterly progress data was provided by the clusters which was verified by the State when they report compliance. This review demonstrated that 99.1% of the sample reviewed (1395/1408) 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.

**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.

**Table 8c.1 Timely Transition Meeting for FFY14**

Cluster SPOE	# of IFSPs Reviewed	% of IFSPs reviewed with documented transition steps and services	Late Transition Meeting Verification, if child remained in EI Program

<b>State</b>	1408	99.1% (1395/1408)	
<b>Cluster A</b>	163	100% (163/163)	N/A
<b>Cluster B</b>	87	100% (87/87)	N/A
<b>Cluster C *</b>	146	98.6% (144/146)	Family cancelled meeting and when rescheduled, the meeting was outside the 90-270 day timeline. (1)  Family moving and Transition meeting was held same time as quarterly, meeting happened on day 48. (1)
<b>Cluster D *</b>	141	97.9% (138/141)	Meeting was late due to child's summer birthday. (1)  File transfer and got lost resulting in late meeting. (2)
<b>Cluster F</b>	69	100% (69/69)	N/A
<b>Cluster G *</b>	349	98.0% (342/349)	Rescheduled meeting resulting in late meeting. (1)  Child had a summer birthday resulting in a late meeting. (1)  Meeting was held late because SC illness. (1)  Meeting held late due to system reason. (4)
<b>Cluster H</b>	101	100% (101/101)	N/A
<b>Cluster I</b>	99	100% (99/99)	N/A
<b>Cluster J *</b>	253	99.6% (252/253)	Meeting was late due to new SC. (1)

\* Clusters that were issued findings for this indicator.

The state issued four findings letters for this indicator (clusters C, D, G, J). The five other clusters were in compliance and did not receive a finding for this indicator.

**Table 8c.2 Indicator 8C: Correction of Noncompliance for FFY14**

<b>Cluster SPOE</b>	<b>State Verified Correction of Noncompliance Data</b>	<b>Data Timeframe</b>	<b>State Verification Date</b>
<b>Cluster C</b>	100% (34/34)	January-March 2015	7/10/2015
<b>Cluster D</b>	100% (35/35)	October-December 2014	7/21/2015
<b>Cluster G</b>	100% (44/44)	January-March 2015	7/24/2015
<b>Cluster J</b>	100% (18/18)	October-December 2014	6/2/2015

The state issued 4 findings (C, D, G, and J) for Indicator 8C. Indiana was able to demonstrate timely correction of noncompliance (with state verification) for Clusters C, D, G, and J. State verification of correction of non-compliance was done via onsite visits and desk audits and was completed prior to one year from the finding for these 4 clusters. Corrections were verified at both the system and the child level.

## Indicator 8C: Early Childhood Transition

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

**Indicator 8C: Early Childhood Transition**  
**Correction of Previous Findings of Noncompliance**

*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)

**Correction of Findings of Noncompliance Identified in FFY 2013**

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	1	0

**FFY 2013 Findings of Noncompliance Verified as Corrected**

*Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements*

**Table 8c.3 Correction of Noncompliance for FFY13**

Cluster SPOE	State Verified Correction of Noncompliance Data	Review Period and State Verification Date
Cluster A	100% (69/69)	(Oct-Dec 2013) Verified 8/7/14
Cluster E	100% (7/7)	(Oct-Dec 2013) Verified 12/31/13
Cluster G	100% (85/85)	(Jan-March 2015) Verified 7/24/15
Cluster J	100% (36/36)	(Oct-Dec 2013) Verified 8/6/14

In FFY2013, Clusters A, E, G, and J received a finding for this indicator. Three clusters (A, E, and J) 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 included both file and data reviews. Corrections were verified at both the system and child level.

Cluster G subsequently demonstrated compliance in FFY2014 during the January-March 2015 quarter.

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

In accordance with the OSEP Memorandum 09-02, the level of compliance (actual target data) the State reported in FFY2013 for indicator 8C was 98.6% (1141/1157). As reported in the FFY 2013 APR, four Clusters (A, E, G, and J) were found to be out of compliance for late transition meetings. Indiana was able to demonstrate timely correction of noncompliance with state verification for three of the four Clusters. Verification of correction of noncompliance was completed prior to one year from the finding. Verification of compliance was completed through the onsite visits, which include file and data reviews. Corrections were verified at both the system and child level.

Cluster G subsequently demonstrated compliance in FFY2014 during the January-March 2015 quarter.

Of the 16 late transition meetings, 4 occurred late due to family reasons, 12 occurred late due to system reasons. The majority of issues were related to a service coordinator error. Indiana has verified that Clusters with noncompliance identified in FFY2013 have documented that transition meetings did occur, albeit beyond the required timeline, for all children who did not receive a meeting in a timely manner.

**Correction of Findings of Noncompliance Identified Prior to FFY 2013**

	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2013 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
None			

## Indicator 9: Resolution Sessions

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥										
Data										


Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥					

Key:  Blue – Data Update

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

 Enter additional information about stakeholder involvement

## Indicator 9: Resolution Sessions

### FFY 2014 Data

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)

#### Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	<a href="#">3.1(a) Number resolution sessions resolved through settlement agreements</a>	null	null
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	<a href="#">3.1 Number of resolution sessions</a>	null	null

#### FFY 2014 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
null	null				Incomplete Data	N/A

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

Provide additional information about this indicator (optional)

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



## Indicator 9: Resolution Sessions

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

## Indicator 10: Mediation

### Historical Data and Targets

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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥										
Data										


Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

#### FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥					

Key:  Blue – Data Update

**Targets: Description of Stakeholder Input** - Please see the Stakeholder Involvement section of the [introduction](#).

 Enter additional information about stakeholder involvement

**Indicator 10: Mediation**

**FFY 2014 Data**

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)

**Prepopulated Data**

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	<a href="#">2.1.a.i Mediations agreements related to due process complaints</a>	0	null
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	<a href="#">2.1.b.i Mediations agreements not related to due process complaints</a>	0	null
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	<a href="#">2.1 Mediations held</a>	0	null

**FFY 2014 SPP/APR Data**

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data	Status	Slippage
0	0	0				N/A	N/A

\* FFY 2013 Data and FFY 2014 Target are editable on the Historical Data and Targets page.

**Provide additional information about this indicator (optional)**

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 training on IDEA Part B and C was implemented during FFY2008. Indiana offers training on IDEA Part B and C rules. This particular training addresses procedural safeguards and transition for providers.

## Indicator 10: Mediation

### Required Actions from FFY 2013

*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)

#### Actions required in FFY 2013 response

None

# Indicator 11: State Systemic Improvement Plan

## Data and Overview

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.

### Reported Data

Baseline Data: 2013

FFY	2013	2014
Target		52.00%
Data	52.00%	53.88%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline  Blue – Data Update

### Explanation of Changes

### FFY 2015 - FFY 2018 Targets

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

Key: Blue – Data Update

### 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** - Please see the Stakeholder Involvement section of the [introduction](#).



Enter additional information about stakeholder involvement

### Overview

SSIP Phase I is located on state profile page. No changes have been made to Phase I.

## Indicator 11: State Systemic Improvement Plan

### Data and Overview

*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.**

#### 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.

SSIP Phase I is located on state profile page. No changes have been made to Phase I.

## Indicator 11: State Systemic Improvement

### Plan

#### Data and Overview

*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.**

#### **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.

SSIP Phase I is located on state profile page. No changes have been made to Phase I.



## Indicator 11: State Systemic Improvement

### Plan

#### Data and Overview

*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.**

#### **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., 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*

SSIP Phase I is located on state profile page. No changes have been made to Phase I.

#### *Description*

## Indicator 11: State Systemic Improvement Plan

### Data and Overview

*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.**

#### 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.

SSIP Phase I is located on state profile page. No changes have been made to Phase I.

## Indicator 11: State Systemic Improvement Plan

### Data and Overview

*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.**

#### 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:** No Theory of Action Submitted



Provide a description of the provided graphic illustration (optional)

## Indicator 11: State Systemic Improvement

### Plan

#### Data and Overview

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.

#### Infrastructure Development

- (a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- (b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- (c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

See attachments

#### Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

See attachments

#### Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

See attachments

#### Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

See attachments

## Certify and Submit your SPP/APR

I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

**Selected:** Designated by the Lead Agency Director to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name: Dawn Downer

Title: Chief of Staff

Email: dawn.downer@fssa.in.gov

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