

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

APR Process

The process to develop Hawai'i's APR for FFY 2008 included:

1. The Hawai'i Department of Health (HDOH) identified a Part C Lead Agency Quality Assurance Team (LAQuAT) member to be responsible for specific indicators as identified in the approved State Performance Plan (SPP)
2. On-going meetings with the identified LAQuAT members were held to prepare them to facilitate workgroups at the statewide Annual Stakeholders' Meeting.
3. There was broad dissemination regarding the Stakeholders' Meeting to determine interest by agency, Hawai'i Early Intervention Coordinating Council (HEICC), and community members to ensure appropriate input into the review process.
4. Groups were separated based on the specific indicator. Each group was provided with copies of the Indicator targets, FFY 2007 APR data, draft FFY 2008 APR data, and other relevant data so the group could determine:
 - Whether the target was met.
 - The extent of progress/slippage for each indicator.
 - Possible reasons for progress or slippage.
 - Whether target data, if a performance indicator, should be changed.
 - Whether current Improvement Activities focused on identifying root causes to support improved data.
 - Whether current Improvement Activities were appropriate as originally written or whether they needed to be revised, deleted, or if new activities were needed.
5. Final recommendations by indicator were presented to all stakeholders.
6. Recommendations were reviewed by the LAQuAT.
7. The APR and SPP were drafted by members of the LAQuAT.
8. The APR draft was reviewed and revised, as necessary, by the Part C Coordinator.
9. The APR was reviewed and approved by the HEICC. As authorized by the HEICC, the HEICC Chairperson reviewed and signed the APR certification form.
10. The APR was sent to the Director of Health to review, approve, and sign the cover letter to accompany the APR to the Office of Special Education Program (OSEP). While the report does not need to be signed by the Director of Health, it has been an on-going policy to have the Director review the report prior to submission to OSEP to ensure that she is knowledgeable of the status of the Part C program.
11. The APR was submitted to OSEP as required.
12. The SPP will be revised after the APR is approved by OSEP.
13. The APR and SPP will be placed on the Department of Health (DOH), Early Intervention Section's website, once approved.

Broad Representation

A stakeholder group of approximately sixty-five (65) individuals provided recommendations to the development of the APR and changes to the SPP. Because of Hawai'i's broad eligibility and geography, it was important that there was broad representation that included: Part C early intervention service providers and family members from all islands, from urban and rural areas, as well as the different ethnic and cultural groups that represent Hawai'i's population. The stakeholders were from the islands of Oahu, Hawai'i, Maui, Kauai, and Molokai and included:

- Members of the HEICC
- DOH administrators, service coordinators, direct service providers, quality assurance specialists, data staff, personnel training staff, and contracted providers from:
 - Family Health Services Division (FHSD)
 - Children with Special Healthcare Needs Branch (CSHNB)
 - Public Health Nursing Branch (PHNB)
 - Early Intervention Section (EIS)
- Department of Human Services (DHS) administrators
- Department of Education (DOE) Section 619 District Coordinators
- Community Members, including representatives from:
 - Exceptional Family Member Program (military support program)
 - Head Start
 - University of Hawai'i
- Parents

Reporting to the Public

The APR will be posted on the EIS website. In addition, information about how to access the APR will be included in various newsletters that reach providers and families (e.g., Special Parent Information Network (SPIN) newsletter, and newsletters of Part C providers (e.g., Easter Seals Hawai'i, Imua Family Services).

Response to June 1, 2009 OSEP Letter and Enforcement Action Regarding Hawai'i's Needs Assistance 2 Determination

OSEP's June 1, 2009 letter required that Hawai'i's Part C program complete several specific tasks, in accordance with sections 616(e) and 642 of the Individuals with Disabilities Education Act (IDEA), because Hawai'i continued to be a Needs Assistance Two state (NA2). All of the following requirements were met:

1. The Part C program was required to notify the public that it continued to be a NA2 state. This requirement was met by:
 - Posting OSEP's June 1, 2009 letter on the EIS web-site, and
 - Distributing a copy of the letter to all participants at the Annual Stakeholders' meeting held on December 1, 2009.

2. The Lead Agency was required to provide an update to OSEP by October 1, 2009 on the technical assistance provided to programs to address the areas of non-compliance and the status of on-going non-compliance.
 - The required letter was submitted to OSEP on September 30, 2009.
3. Hawai'i was required to report on the technical assistance sources that provided technical assistance and the actions that Hawai'i took as a result of that technical assistance.
 - Hawai'i accessed the "Technical Assistance Related to the SPP and Determinations" website and upon examination of the investigative questions, determined the technical assistance and actions that were most appropriate.
 - Following is a list of the technical assistance sources that were accessed by Hawai'i's Part C program and the actions Hawai'i took as a result of the technical assistance for Indicators 1 and 9. Information is provided for these indicators as they were the specific areas that affected OSEP's determination of Hawai'i as a NA 2 state. The Technical Assistance Sources listed supported both indicators unless otherwise noted. The actions taken as a result of the technical assistance are listed by indicator.

Technical Assistance Sources

- OSEP
 - Attended the Early Childhood Conference, December 2009.
 - Attended the 2009 OSEP National Early Childhood Conference pre-conference workshop on fiscal issues.
 - Participated in monthly conference calls, with Ruth Ryder and Debra Jennings, Hawai'i's Project Officer.
 - Received an overview of Hawai'i APR requirements summarized by Hawai'i's Project Officer.
 - Requested and participated in a conference call with Kala Suprenant, Office of General Counsel and Debra Jennings, Hawai'i's Project Officer on consent requirements based on both FERPA and Part C regulations.
- National Early Childhood Technical Assistance Center (NECTAC)
 - Requested and participated in a conference call organized by NECTAC Contact Person with Part C Coordinators from 3 other states to discuss mandated insurance and family cost participation.
 - Requested and received input on possible changes in the State Plan for the sections on eligibility, evaluation, and fiscal issues.
 - Requested and received a summary of evaluation instruments currently used by other states.
 - Received individualized technical assistance on other issues as requested.
- Western Regional Resource Center (WRRC)
 - Attended the APR Clinic, November 2009.
 - Participated in monthly Part C conference calls on various topics. One topic, requested by Hawai'i was how states without an insurance mandate accessed private insurance, including Tricare, to pay for Part C expenses.
 - Requested and received a summary of research on the efficacy of treadmill training for infants and toddlers with Down Syndrome. This was requested in response to a family requesting Part C to pay for treadmill training for their toddler.
 - Received individualized technical assistance on other issues as requested.

- SPP/APR Technical Assistance Documents
 - Reviewed the SPP/APR Investigative Questions, Tools, Resources, and Additional Resources in the SPP/APR Calendar.
 - Reviewed information on various General Supervision Systems of other states on the NECTAC website.
 - Reviewed Guidance and Suggestions for SPP/APR Indicator C1, C7, and C8.
 - Reviewed the Indicator 9 Worksheet.

Actions Taken as a Result of the Technical Assistance

Indicator 1 and 9:

- Reviewed, revised and streamlined Improvement Activities to:
 - Be more specific to identifying root causes of the non-compliance
 - Identify specific strategies to address the non-compliance.
- Required Programs that had on-going non-compliance to complete the “Local Contributing Factor Tool” recommended by WRRC/NECTAC.
- Revised the Corrective Action Plan (CAP) template based on a Sample Template provided by WRRC/NECTAC. The revised template included a section on strategies. Programs were required to develop and provide monthly progress on strategies if:
 1. They had on-going non-compliance;
 2. Their percent compliance was below 90%; and/or
 3. Their indicators at 90% and above were not corrected within 3 months.
- Revised procedures to track findings based on the year the findings were issued.
- Identified additional levels of enforcement actions and sanctions to be utilized based on the time needed by specific programs to correct their findings of non-compliance.
 - A. Programs in Year 3 of non-compliance were:
 1. Required to submit weekly data regarding timely services;
 2. Required to hold weekly staff meetings to review Timely Services Worksheet A and appointment schedules; and
 3. Required to initiate all services within 30 days of the signature of the IFSP, regardless of the frequency noted on the IFSP (e.g., quarterly services).
 4. In addition, programs were provided reminders via phone or e-mail to submit their weekly data to the EIS Quality Assurance Supervisor. The Quality Assurance Specialist met weekly with the Program Managers to provide support (e.g., completing Timely Services Worksheet A, meeting with staff, problem-solving scheduling issues, etc.)
 - B. Programs in Year 2 of non-compliance were:
 1. Required to hold weekly staff meetings to review Timely Services Worksheet A and appointment schedules, effective September 2009.
- Reviewed Hawaii’s current Part C eligibility to determine if changes are needed due to Hawaii budget deficits, as lack of correction may be due to insufficient funding to meet service needs.

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner.

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

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.</p> <p>Account for untimely receipt of services, including the reasons for delays.</p>
<p>Applied:</p> <p>246 infants and toddlers with IFSPs received the early intervention services on their IFSPs in a timely manner</p> <p>294 infants and toddlers with IFSPs</p> <p>Percent = 246/294 = 84%</p>

FFY	Measurable and Rigorous Target
FFY 2008	100%

Definition of Timely Services:

Hawaii’s definition of timely services is consistent with OSEP’s direction as included in the Frequently Asked Questions (FAQ) document of 10/13/06. Timely services are defined as: “within 30 days from when the parent provides consent for the IFSP service or as projected based on the date provided in the IFSP and identified by the IFSP team.”

Actual Target Data for FFY 2008:

Data for the percent of infants and toddlers with Individual Family Service Plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner was from monitoring data.

- 246 of 294 (84%) of infants and toddlers with IFSPs received EI services on their IFSPs in a timely manner.
- Exceptional Family Circumstances. 30 of the 294 (10%) infants and toddlers did not receive timely services, due to exceptional family circumstances as defined by IDEA Part C. This number is included in both the above numerator and denominator. The following are the two predominate family circumstances that impacted the scheduling of timely services:

- Medical reasons (child or family member sick)
- Did not return calls in a timely manner
- Program Reasons. 48 of the 294 (16%) infants and toddlers did not receive timely services, due to program reasons. The following are the two predominate program reasons that impacted the scheduling of timely services: :
 - No documentation that the service was provided
 - Staff vacancy
- Of the 48 children who did not receive services in a timely manner due to program reasons, 1 child was determined to no longer need the services so it was removed from the IFSP prior to the service being provided, 5 children left the program jurisdiction before the service was implemented and the remaining 42 children all received services listed on their IFSP, although untimely.

Range of Days to Initiate Services (For the 42 children not receiving services on their IFSP in a timely manner)		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	23/42	54%
31-60 days	5/42	12%
61-90 days	7/42	17%
> 90 days	7/42	17%

- There were 17 programs serving the 48 children who did not receive services in a timely manner.
 - 6 of the 17 programs were issued findings
 - 1 of the 17 programs was not issued a new finding because it had on-going non-compliance for this indicator.
 - 10 of the 17 programs were not issued findings because they submitted required data that was verified by HDOH to demonstrate correction prior to written issuance of findings.
 - The data demonstrates the programs provided the required service(s), although late, unless the child was not under the program’s jurisdiction. The programs are now correctly implementing the timely services requirement.
- Related Requirements

Refer to Indicator 9, Table 1b (Indicator 2d) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Monitoring Process:

A total of 413 children were monitored within the time period 7/1/08- 6/30/09 across the Part C programs, including the EIS - 18 programs and PHNB - 11 sections. The EI Self Assessment Monitoring (SAM) Tool which was developed by HDOH with feedback from EI providers was utilized to gather data.

For FFY 2008, the EIS Quality Assurance Team completed the SAM tool for each of the EIS programs while PHNB elected to have their Section Supervisors complete the tool for their respective programs.

Identification of Children. To ensure a random selection of children for review with the SAM Tool, the following criteria were followed:

- Names of all children with an Initial, Review or Annual IFSP between 11/1/08 – 3/31/09 were obtained by HDOH from each program/section. The timeframe was chosen to ensure that there were 3 months to confirm that services were provided in a timely manner within FFY 2008.
- HDOH identified 10% of children at each program/section based on the 12/1/08 child count, or a minimum of fifteen (15) children to be monitored, unless there were an insufficient number of children who met the above criteria. If there were an insufficient number of children, all were chosen to ensure as complete monitoring as possible. This resulted in a review of 413 charts.
- An Initial, Review, or Annual IFSP for each selected child was reviewed to determine if new services were timely. If the Review or Annual IFSP was the identified IFSP and there were no new services, N/A was noted for this indicator. Therefore, for this indicator the results were based on new and timely services for 294 children as 119 children had no new services identified on either their Review or Annual IFSP.

Determination of Timeliness: The SAM Tool was completed for each child selected using the specified IFSP (Initial, Review, Annual), following the guidelines developed by HDOH to determine if services were timely, consistent with Hawai'i's definition for timely services.

For each service, the following documentation was required to confirm the service was both provided and timely:

- If the service was provided by the program providing service coordination, documentation must be included in anecdotal notes in the official child's record.
- If the service was provided by a Part C program not providing service coordination, the provider must inform the service coordinator of the date services were initiated either through verbal confirmation of the written documentation or through receipt of written documentation.
- If the service was provided by a contracted fee-for-service provider, documentation must be via the required Service Log developed by HDOH.
- If the service was not timely due to an "exceptional family reason," there must be confirmation of the family reason via an anecdotal note in the official child's record (e.g., child was sick; family on vacation).
- If the service was late, and there was no documentation of an exceptional family reason (only a date of when the service occurred), it was considered a program reason and therefore did not meet the definition of timely services.
- If there was no documentation that the service was provided, it was considered a program reason and therefore did not meet the definition of timely services.

Self-Assessment Results

- Raw data was submitted to HDOH.
- HDOH inputted the data into the database which was developed by HDOH.
- HDOH analyzed the data for non-compliance with Timely Services (see Table 1b in Indicator 9 for findings from last year's APR). The data was given to each program/section as part of the notification of findings for FFY 2008.

Verification of Data: The following activities occurred to verify the Self-Assessment results.

- The SAM results were reviewed to identify any possible inconsistencies.
- Program Managers/Supervisors were contacted, as necessary, for additional data to confirm results.
- The SAM results were revised, if necessary, based on additional data received.

Previously Identified Non-Compliance

FFY 2006

- Six programs were notified of findings for Timely Services in FFY 2006. These findings were based on FFY 2005 data that was used in the FFY 2006 Self-Assessment process. (See Table 2, Correction of Non-Compliance Identified in FFY 2006 in Indicator 9).
 - 1 finding was verified as corrected within one year of notification.
 - 5 findings were subsequently verified as corrected.

FFY 2007

- 26 programs were notified of findings for Timely Services in FFY 2007. These findings were based on FFY 2006 data that was used in the FFY 2007 Self-Assessment process. (See Table 1b, Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Monitoring Priorities, in Indicator 9).
 - 17 findings were verified as corrected within one year of notification.
 - 8 programs were subsequently verified as corrected.
 - 1 finding remains uncorrected.

Correction of Noncompliance for Indicator 1 – Timely Services						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	6	1	5	6	0
FFY 2006	FFY 2007	26	17	8	25	1
FFY 2007	FFY 2008	To be reported in the FFY 2009 APR to be submitted in 2011				

- Required Correction for the Previously Identified Non-Correction

HDOH required the following Corrective Actions for each of the programs that did not correct the non-compliance for Timely Services within one year of notification. The programs/sections:

1. Completed the Local Contributing Factor tool to identify root causes of non-compliance.
2. Developed a Corrective Action Plan (CAP) specific to the reasons identified and submitted it to both their Agency and HDOH for approval. The plan included strategies

based on the Local Contributing Factor Tool, timelines and if necessary, identified technical assistance to support their correction.

3. Provided monthly documentation on Timely Services in each child's Initial, Review, or Annual IFSP to its Agency Administrator (EIS or PHNB).
4. Agencies submitted a CAP Summary Report to HDOH on a monthly basis which documented progress toward correction and/or correction data.
5. HDOH reviewed the monthly data to determine progress toward correction and provided feedback to support correction.
6. Programs/Sections that did not demonstrate progress were required to hold weekly staff meetings to discuss schedule of services to ensure services were initiated in a timely manner.
7. Programs in year 3 of non-compliance were also required to submit weekly progress data to their Agency Administrator.

As a result of the above corrective activities:

1. The two remaining programs from FFY 2006 were successful in subsequently correcting the non-compliance in FFY 2009.
2. Eight of the nine programs from FFY 2007 were successful in subsequently correcting the non-compliance, leaving only 1 program with continued non-compliance at the time of the APR submission.

- Required Follow-Up for Continuing Non-Compliance

HDOH provided Technical Assistance to the one local EIS program with continued non-compliance and required the following Corrective Actions in addition to what is noted above. The Program Manager of the local EIS program must:

1. Develop a revised Corrective Action Plan (CAP) by the end of February 2010 and submit it to both the Agency Administrator and HDOH for review and approval.
2. Provide weekly data to show progress in correcting this area of non-compliance.
3. Report monthly on progress in the CAP strategies to correct non-compliance.
4. If non-compliance is not corrected by the end of April 2010, HDOH will schedule a meeting with the Program Manager of the local EIS program, the Program Director who is responsible for the local EIS program, and the Agency Administrator to discuss continued non-compliance and initiate additional enforcement activities.

- Response to June 1, 2009 OSEP Letter and Enforcement Action Regarding Hawai'i's Needs Assistance 2 Determination

Refer to Introduction, pages 2-4.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress:

The current data on provision of Timely Services shows an improvement of 6% from FFY 2007 to FFY 2008, from 78% to 84%:

- FFY 2005 compliance was at 69%.
- FFY 2006 compliance was at 71%.
- FFY 2007 compliance was at 78%
- FFY 2008 compliance was at 84%

Consistent with last year’s monitoring, the major issue this year was lack of consistent documentation. To address the on-going issue of the lack of documentation the following was implemented:

1. Program Managers are required to complete “Worksheet A” for each child after an IFSP meeting. Worksheet A includes the following information:
 - All services listed on the IFSP;
 - Frequency of each service;
 - Due date for the initiation of services;
 - Actual date of the initiation of services;
 - Verification of documentation that the service occurred; and,
 - If service was untimely, the reason why it was late
2. Guidelines on “Appropriate Documentation of Timely Services” were developed and distributed to all Part C providers and discussed at a Program Manager Meeting. It has been included in the Part C EI Orientation.
3. Fee-for-Service (FFS) Providers are required to submit the Service/Attendance Log to the Service Coordinators on a monthly basis prior to authorization for services for the next quarter. The form tracks all scheduled visits and reasons if a scheduled visit does not occur. The parent or caregiver must sign the form to confirm that the service was provided.

Completed Improvement Activities

There were no improvement activities completed at this time.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Identify recruitment incentives for “difficult to serve” areas.	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Discussions were held with potential purchase of service agencies on their ability to provide increased salaries and recruitment bonuses, with justifications, for “difficult to serve” areas. 2. Actions were put in place to implement the “hire above minimum” protocol for state programs that have long-term vacancies. <p>Justification: Due to the State budget deficit, the HDOH is unable to provide financial incentives to POS agencies to support recruitment incentives.</p>

APR Template – Part C (4)

Continuing and New Improvement Activities:

The following table includes improvement activities that are continuing and new activities that were developed to support compliance for Timely Services.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
<p>Review professional standard requirements in the current EI State Plan for adequacy in meeting service needs of Hawai'i's Part C population, and update if determined necessary.</p>		X	X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> HDOH encouraged Programs to hire certified Occupational therapy assistants and Physical therapy assistants to increase staff to provide early intervention services. HDOH recommended programs use the transdisciplinary model of services as best practice with the focus on mentoring and coaching parents on how they can best support their child's development. Programs were encouraged to hire teachers and paraprofessionals as primary service providers, as appropriate. <p>Continuing</p> <ol style="list-style-type: none"> Once the draft Federal Regulations are approved, the State Plan will be reviewed and up-dated to be consistent with the Federal Regulations. 	<p>Extend timeline</p> <p>Justification: The draft Federal Regulations have not been approved so the timeline is again extended.</p>
<p>Explore staffing options (e.g., "loan" staff to other programs; collaborate with DOE/Head Start, etc).</p>		X	X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> HDOH partnered with Easter Seals Society to support a legislative bill for a loan forgiveness program to encourage Hawaii students on the mainland to return and work in Hawaii after receiving their professional therapy degrees. HDOH contracted with a provider who recruits Mainland therapists to come to Hawaii to work. EI programs collaborated with each other, during periods of staff shortage, to help each other by allowing staff to serve children in other geographical areas. HDOH recently hired a full time vision specialist to support infants and toddlers who are visually impaired. HDOH is contracting with DOE Hearing Specialists to support children in who are deaf or have a hearing loss. <p>Continuing</p> <ol style="list-style-type: none"> Continue to explore opportunities through the legislature to create incentives for "difficult to serve" areas. Contact DOE's deaf educators to determine if they are willing 	<p>Extend timeline</p> <p>Justification: Due to budget deficits and personnel changes, DOH will need to continue to explore a variety of options to increase the capacity of HDOH to provide all required services in a timely manner.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
							to be contracted with the DOH to provide support to 0-3 children with hearing loss. Due to the state's Reduction in Force and "bumping" process, the vacant Deaf Educator position was filled with an individual who does not meet qualifications for this position and therefore alternatives to meet this need are needed.	
Collaborate with academic institutions to investigate the possibility of developing a program of EI certification.			X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> HDOH initiated conversations with University of Hawai'i Department of Special Education Program to explore developing an EI Certification. <p>Continuing</p> <ol style="list-style-type: none"> HDOH will initiate conversations with Community Colleges to explore the possibility of including an EI Certification as part of their Early Childhood Program. HDOH will explore on-line EI Certifications. 	
Develop guidelines, procedures, and billing parameters for programs to request and provide services for other programs due to staff shortage.				X	X		<p>Completed to Date</p> <ol style="list-style-type: none"> A statement is included on every POS program's contract whereby children can be served by a POS program if the state ECSP program is unable to serve the child. HDOH has given permission to POS programs to help serve children outside their geographic area during interim periods before a contract could be awarded. <p>Continuing</p> <ol style="list-style-type: none"> HDOH is exploring the possibility of providing funds to POS programs to hire staff to support state ECSPs due to abolishment of state positions or freezing of vacant positions. 	
Develop a training module to address required and acceptable documentation.				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> The CSPD position was filled 1/4/2010 so this activity can be initiated. 	<p>Extend timeline</p> <p>Justification: Although the CSPD position was recently filled, additional time is needed to complete this activity.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
Post documentation training module on the web.					X	X	Completed to Date 1. The CSPD position was filled 1/4/2010 so this activity can be initiated.	Extend timeline Justification: Although the CSPD position was recently filled, additional time is needed to complete this activity.
Embed the documentation training module into the mandatory EI Orientation Training.					X	X	Completed to Date 1. The CSPD position was filled 1/4/2010 so this activity can be completed once the module is completed.	Extend timeline Justification: Although the CSPD position was recently filled, additional time is needed to complete this activity.
New Activity: Utilize clip video to support consultations.					X	X	Completed to Date 1. EIS has clip videos to support timely and cost effective consultations.	New: Justification: The use of clip videos is a cost effective method of providing timely and cost-effective consultation services.

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Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.</p>
<p>Applied:</p> <p><u>Early Intervention Section Programs</u>, upon which the target was based.</p> <p>1410 infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.</p> <p>1523 infants and toddlers with IFSPs</p> <p>Percent = 1410/1523 = 93%</p> <p><u>All Part C Children</u>, based on Section 618 Child Count data of 12/1/08</p> <p>3338 infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.</p> <p>3471 infants and toddlers with IFSPs</p> <p>Percent = 3338/3471 = 96%</p>

FFY	Measurable and Rigorous Target
2008	85%

Actual Target Data for FFY 2008:

- The target was originally set using data from EIS Programs rather than all Part C children. Therefore EIS data is provided as the applied measure for this target.
- The target of 85% was surpassed for EIS Programs (93%), PHNB (95%), Healthy Start Sites (100%) and all Part C children (96%). See table below.

Early Intervention Services in Natural Environments Based on Child Count Data of 12/1/08		
Part C Agencies	#	%
Early Intervention Section Programs	1410/1523	93%
Public Health Nursing Branch Sections	350/370	95%
Healthy Start Sites	1578/1578	100%
All Part C Children	3338/3471	96%

- Programs that did not meet the state target of 85% of children served receiving services in the natural environment were not issued a finding since this is a performance indicator. They were issued a “need to improve” notice that requires them to include this indicator in their CAP and to submit monthly data and progress on strategies.
- Programs that did not meet the target for each specific Family Goal were not issued a finding since this is a performance indicator; however, they were required to develop strategies in their CAP to address the specific Family Goal.
- Related Requirements

Refer to Indicator 9, Table 1b (Indicator 2d) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress and Slippage

The following table shows data by Part C agency and all children since FFY 2005. There was both progress and slippage related to the percent of infants and toddlers with IFSPs who primarily received early intervention services in the home or community-based settings between 2007 and 2008.

FFY	Early Intervention Section	Public Health Nursing	Healthy Start	All Part C Children
2005	81%	92%	100%	90%
2006	89%	96%	100%	95%
2007	86%	96%	100%	93%
2008	93%	95%	100%	96%

Explanation of Progress (EIS, Healthy Start, and All Part C Children)

- EIS programs (progress of 7%) made a concerted effort to provide more services in the natural environment.
- Healthy Start programs (100%) continued to serve all children in their homes based upon their requirements.
- The increase in EIS programs serving children in natural environments was instrumental in increasing the statewide percentage of all Part C children served in the natural environment.

Explanation of Slippage (PHNB)

The slippage of 1% for Public Health Nursing from FFY 2007 and FFY 2008 is very minimal and therefore it was determined that no analysis was needed as they surpassed the target of 85%.

Completed Improvement Activities

There were no improvement activities completed at this time.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Proposed Targets

The proposed target of 90% as indicated in the SPP for FFY 2009 will remain the same.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Based on programs with low percentages for this indicator, the Inclusion Project Coordinator will identify community preschools and other inclusive environments to provide training on inclusion to support increased opportunities for inclusive programs.	Justification: This activity is being removed as it is embedded in the following activity: "Target technical assistance to programs in the following situations to help them determine root causes so they can develop appropriate strategies to support increased services in natural environments. <ul style="list-style-type: none"> ○ When programs do not meet the state target. ○ When programs report slippage between 2 reporting years.

Continuing and New Improvement Activities:

The following table includes improvement activities that are continuing and new activities that were developed to support serving children in natural environments.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
Review and revise the EI brochure and other relevant service delivery materials to include natural environments as part of the EI philosophy.			X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> The following statement was added to the EI brochure, "The following services are provided in locations where your child lives, learns and grows." Removed from the EI brochure is the statement "Services are at no cost" because Hawai'i has revised the section on Finances in the State Plan to allow for family cost participation. <p>Continuing</p> <ol style="list-style-type: none"> Other relevant service delivery materials are being identified for the addition of the natural environment statement above. All other materials requiring this edit will be updated by June 2010. 	
Create a DVD for families about EI that staff may use as part of the intake process.				X	X	X	<p>Continuing</p> <ol style="list-style-type: none"> There have been preliminary discussions with the HEICC member, who is also a University of Hawaii, Department of Special Education faculty, on utilizing a student project to help develop a DVD. There have also been discussions with the DOE to utilize State Improvement Grant II (SIG II) funds to support the development of a DVD to support the understanding of early intervention. Previously developed media will be reviewed for its appropriateness to be included in the DVD. Further discussion has occurred with the executive director for the Learning Disabilities Association of Hawai'i to partner with them in production of this DVD. Previously developed media will be reviewed for its appropriateness to be included in the DVD. 	
Target technical assistance to programs in the following situations to				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> Under the direction and guidance of the EIS Quality Assurance Supervisor, the statewide percentage of services 	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
<p>help them determine root causes so they can develop appropriate strategies to support increased services in natural environments.</p> <ul style="list-style-type: none"> • When programs do not meet the state target. • When programs report slippage between 2 reporting years. 							<p>provided in the natural environment has increased from 86% to 93%.</p> <p>Continuing</p> <ol style="list-style-type: none"> 1. Additional investigation is on-going for programs experiencing difficulties in increasing their percentage of children served in natural environments. 2. The Inclusion Project Coordinator will work with programs with low percentages for this indicator to identify appropriate inclusive locations to support the provision of services in natural environments. 	

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:	<p>A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.</p> <p>B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.</p> <p>C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.</p>
Applied:	<p>A. 696 families participating in Part C reported that early intervention services have helped the family know their rights. 775 families responded to the question regarding knowing their rights Percent = 696/775 = 90%</p> <p>B. 710 families participating in Part C reported that early intervention services have helped the family effectively communicate their children's needs. 771 families responded to the question regarding communicating their child's needs Percent = 710/771 = 92%</p> <p>C. 715 families participating in Part C reported that early intervention services have helped the family help their child develop and learn. 774 families responded to the question regarding helping their child develop and learn. Percent = 715/774 = 92%</p>

FFY	Measurable and Rigorous Target		
2008	A. 91%	B. 93%	C. 93%

Actual Target Data for FFY 2008

- The Family Survey was revised to include a question to identify the length of time each child has been in early intervention. (See Attachment)
- Family Survey Results

Statewide Family Survey Results July 2008 – June 2009		
Family Goal	# *	%
A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights.	696/775	90%
B. Percent of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs.	710/771	92%
C. Percent of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn.	715/774	92%

*The denominator is based on the number of people who responded to the specific question on the survey. "A" was based on the responses to question 16, "B" was based on the responses to question 17, and "C" was based on the responses to question 18.

- Of the 1892 surveys that were distributed, 791 surveys were completed and returned for a 42% statewide return rate.
- Programs that did not meet the target for each specific Family Goal were not issued a finding since this is a performance indicator; however, they were required to develop strategies in their CAP to address the specific Family Goal.
- Additional Data

When comparing the survey results with the length of time the child was enrolled in early intervention services, the data suggests that:

- Families' perceptions improved based on the amount of time their child was in early intervention.
- There was only one exception, as noted in the survey question "know their rights" as the percentage with a positive perception decreased from 92% (6-12 months in EI) to 89% (1-2 years in EI). However, it increased back to 92% for families with children who were in EI for 2+ years.
- As this is the first year data was available on family perception based on the length of time their child received early intervention services, it cannot be determined if there is a trend, or if the one exception is meaningful. Data from this year will be compared to next year's data to determine if there appears to be a trend. This is included in a revised Improvement Activity.

Family Goal	Statewide Total	Length of Time in Program			
		0-6 mos.	6-12 mos.	1-2 yrs.	2+ yrs.
Know their rights	90%	87%	92%	89%	92%
Effectively communicate their children's needs	92%	91%	92%	94%	96%
Help their children develop and learn	92%	91%	93%	94%	94%

- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicators 4a and 4b) for findings made and timely correction under the Hawai'i Monitoring Priorities related to this Indicator.

Representative of the State’s population

Three factors were considered when determining whether the returned surveys were representative of the early intervention population:

- Ethnicity
- Gender
- County of residence

Comparison by Ethnicity:

When comparing the Family Survey return rates with the Child Count Data for FFY 08, it appears that the family surveys returned were not representative of the population served, although they were more representative than for FFY 07. Based on the surveys returned:

- A higher percentage of Caucasian families completed the survey as compared to the percentage served (25% vs. 18%); therefore Caucasian families were over-represented.
- A lower percentage of Asian/Pacific Islander families completed the survey as compared to the percentage served (65% vs. 74%); therefore Asian/Pacific Islander families were under-represented.
- However, in comparing the results for FFY 2008 and FFY 2007, the differences between the Family Survey response rate and the Child Count percentage decreased for both primary ethnic groups. Therefore there has been improvement as the two primary ethnic groups have moved closer to being representative of the population served (improvement of 4% for each primary ethnic group).

Ethnicity	FFY 2008			FFY 2007			Improvement over last year
	Child Count	Family Survey	Difference	Child Count	Family Survey	Difference	
Asian/Pacific Islander	74%	65%	9%	81%	68%	13%	4%
Caucasian	18%	25%	7%	12%	23%	11%	4%

When comparing the survey results of the two primary ethnic groups represented in Early Intervention (Caucasian and Asian/Pacific Islander) and by the statewide total, it appears that:

- Both ethnic groups had similar perceptions for each survey question. The difference by question ranged from 1% to 3% which does not appear to be significant.
- Both ethnic groups had similar perceptions with the statewide total.

Family Goal	Asian/Pacific Islander	Caucasian	Statewide Total
Know their rights	90%	91%	90%
Effectively communicate their children's needs	91%	94%	92%
Help their children develop and learn	93%	91%	92%

Comparison by Gender:

When comparing the Family Survey return rates with the Child Count Data for gender, it appears that the family surveys returned were representative of the gender of the population served. Based on the surveys returned:

- The differences between Child Count and Family Survey responses were minimal, with only 1.6% fewer responses for families with female children and .5% more responses for families with male children.
- The data suggests that the gender of the child did not play a role in response rate.

Gender	Child Count		Family Survey		Difference
	#	%	#	%	
Female	679	35.9%	271	34.3%	1.6%
Male	1214	64.1%	511	64.6%	.5%
Unspecified	0	0.0%	9	1.1%	
Total	1893	100%	791	100%	

When comparing the survey results by gender of children served in Early Intervention and by the statewide total, it appears that there were some differences in perception based on the gender of the child:

- Families of male children were higher (4%) than female children in knowing their rights.
- Families of male children were slightly higher (2%) than female children in effectively communicating their children's needs.
- Families of female children were very slightly higher (1%) than male children in helping their children develop and learn.
- The difference by question ranged from 1% to 4%. Further investigation is needed to determine if any of the differences were significant.
- There was little difference in comparing survey results with the statewide total (ranged from 1% - 3%); therefore the gender of the child did not impact on the families' perceptions.

Family Goal	Female	Male	Statewide Total
Know their rights	87%	91%	90%
Effectively communicate their children's needs	91%	93%	92%
Help their children develop and learn	93%	92%	92%

Comparison by County

When comparing the Family Survey return rates with the Child Count Data based on the County the child lives in, it appears that there were some differences in return rate based on the island where the child resided. Based on the surveys returned:

- The most representative island was Kauai, with only .2% difference between Child Count and returned surveys. Kauai's return rate was very minimally lower (.2%).
- The next representative island was the island of Hawaii, with a 2% difference. More surveys were returned when compared with the Child Count.
- Although the islands of Maui and Oahu had the largest differences, with 4% on Maui and 6% on Oahu, Maui returned a higher percentage of surveys than would have been expected by the Child Count while Oahu's difference reflected 6% fewer surveys returned than expected based on the Child Count.
- One possible reason for the higher percentage of returned surveys on all islands except Oahu is because there are fewer early intervention programs on the Neighbor Islands and staff encouraged and reminded families to return their surveys.

As this is the first year data was available by County, it cannot be determined if these percentages are a trend. Data from this year will be compared to next year's data to determine if there appears to be a trend. This is included in a revised Improvement Activity.

County	Child Count		Family Survey		Difference
	#	%	#	%	%
Hawai'i	184	10%	93	12%	2%
Honolulu	1438	76%	553	70%	6%
Kauai	94	5%	38	4.8%	.2%
Maui	177	9%	107	13%	4%
Statewide	1893	100%	791	99.8%	2%

When comparing the survey results by county of residence and by the statewide total, it is evident that there were some differences in perception based on the residence of the family:

- Families in Maui County rated all Family Goals higher than other counties. It is interesting to note that there is one Agency that provides early intervention services in the County of Maui, which consists of program on the islands of Maui and Lanai.
- Families in Hawaii County rated 2 goals, "Know their rights" and "Help their children develop and learn" the lowest of all counties. The difference in the goal "Help their children develop and

learn” (76%) with the statewide data (93%) is significantly lower. Because the data was from 3 separate programs, additional analysis by program is necessary to determine if the perception is island-wide, or due to program differences.

- Families in Kauai County rated the goal “Effectively communicate their children’s needs” the lowest. There is one early intervention program that serves the County of Kauai.
- The range in responses was the least for “Know their rights” (8%, from 86% to 94%) and the most for “Help their children develop and learn” (20%, from 76% to 96%). The range for “Effectively communicate their children’s needs” was 10%, from 84% to 94%.
- Families in Honolulu County were the closest to the statewide average, which is expected as the majority of families resides in Honolulu County (which is the entire island of Oahu).
- A revised Improvement Activity will address the differences in family perception.

Family Goal	Hawai'i	Honolulu	Kauai	Maui	Statewide
Know their rights	86%	88%	91%	94%	89%
Effectively communicate their children's needs	93%	91%	84%	94%	91%
Help their children develop and learn	76%	92%	88%	96%	93%

Improvement Activities have been revised to determine if the differences noted are statistically significant.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2008:

Explanation of Progress and Slippage

Family Goal	FFY 2005	FFY 2006	FFY 2007	FFY 2008
A. Percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights.	78%	91%	89%	90%
B. Percent of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs.	74%	93%	91%	92%
C. Percent of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn.	89%	93%	93%	92%

NOTE: The survey tool was changed in 2006 and continued to be used for 2007 and 2008. Therefore in discussing progress and slippage, the focus should be on the percentages from 2006, 2007 and 2008.

Explanation of Progress

- The current data for Family Goal A (Knows Their Rights) shows an improvement of 1% from FFY 2007 to FFY 2008, from 89% to 90%.
- The current data for Family Goal B (Effectively Communicates Their Needs) shows an improvement of 1% from FFY 2007 to FFY 2008, from 90% to 91%.

Explanation of Slippage

There was slippage for Family Goal C (Help Their Children Learn and Grow). The data shows that when analyzing the results and taking the percentage out two decimal points, the actual slippage for Family Goal C is only .18%. Based on results received for 791 families, this calculates to only 1.4 families and is therefore not significant to the overall results.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Explore the possibility of revising the cover of the “Dear Family” brochure.	The title of the brochure was changed from “Dear Family” to “Family Rights” in order to ensure that families understand the purpose of this brochure.
Translate “Dear Family” brochure and survey into multiple languages.	The Family Rights (previously known as the “Dear Family”) brochure was translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Add “EIS,” “Healthy Start,” and “Public Health Nursing” in parenthesis in the actual survey when the term “Early Intervention” is used. .	Justification: This concern was only voiced only by Healthy Start, as many of their families did not understand that Healthy Start was part of Early Intervention. As Healthy Start is no longer providing care coordination to Part C children, amending the survey is no longer necessary.

Continuing and New Improvement Activities:

The following table includes improvement activities that are continuing and new activities that were developed to support compliance for EI Family Goals.

Resources:

There are no changes to resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
<p><u>Original</u> Analyze return rates by different variables (e.g., gender, county, program, length of time in program) to further determine if the data is representative of the state's Part C population. Based on the analysis, strategize how to increase return rates by specific variables.</p> <p><u>Revised</u> Identify variables to analyze to determine if the data is statistically representative of the state's Part C population. Based on the statistical significance of the data, strategize how to increase return rates by specific variables.</p>				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Last year's APR focused on the variables of ethnicity and age to determine if the data was representative of the Part C population. 2. This year's APR also included the variables of geographic area and gender to determine if the data was representative of the Part C population. <p>Continuing</p> <ol style="list-style-type: none"> 1. Additional variables will be examined for inclusion in next year's APR. 2. Results from first time variables, gender and county, will be compared with these variables next year to determine if there are any trends that need further analysis. 	<p>Revision</p> <p>Justification: The original activity did not identify specific variables to consider in determining if the data is representative of Hawaii's Part C population. Nor did it determine if the differences were statistically significant. The revised activity will identify specific variables to analyze if they are determined statistically significant.</p>
<p><u>Original</u> Develop strategies for targeted programs with low return rates to increase their return rates.</p> <p><u>Revised</u> Develop strategies for</p>				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. A workgroup has been created to support this Improvement Activity. <p>Continuing</p> <ol style="list-style-type: none"> 1. The workgroup will examine current data and develop strategies to address programs with low return rates. 	<p>Revision</p> <p>Justification: The data shows differences in return rates from the four counties as well as differences in perception by county. This revised strategy will address</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
targeted programs and targeted counties with low return rates and less positive response rates to both increase their return rates and increase the percentages of positive responses if the differences are statistically significant.								these differences if the data differences are statistically significant.

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.</p>
<p>Applied:</p> <p><u>Excluding At Risk</u></p> <p>232 of infants and toddlers birth to 1 with IFSPs 18,472 population of infants and toddlers birth to 1 Percent = 232/18472 = 1.26%</p> <p><u>Including At Risk</u></p> <p>828 of infants and toddlers birth to 1 with IFSPs 18,472 population of infants and toddlers birth to 1 Percent = 828/18,472 = 4.48%</p>

FFY	Measurable and Rigorous Target	
2008	Excluding environmentally at risk = 2.95%	Including environmentally at risk = 7.2%

Actual Target Data for FFY 2008:

- Compared to National Data (based on OSEP 2008 data tables):

The following compares Hawai'i's percentage served with national data:

- The national average for all states including Washington D.C. is 1.04%. Hawai'i surpassed the national average for both excluding and including environmentally at risk infants and toddlers birth to 1 with IFSPs.
- Excluding environmentally at risk: Hawai'i was ranked 14th, as it served 1.26% (232 of 18,472) of infants and toddlers birth to 1 with IFSPs when infants and toddlers birth to age 1 were excluded from the count.
- Including environmentally at risk: Hawai'i was ranked first, as it served 4.48% (828 of 18,472) of infants birth to 1 with IFSPs, when infants and toddlers birth to age 1 at environmental risk were included. Hawaii surpassed the national average of 1.04% by 3.44%.

- Although the current data does not reach the proposed target in either the excluding or including at risk categories, Hawaii’s data is above the national baseline of 1.04%.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress and Slippage

The following table shows data for Part C children, including and excluding Environmental Risk since 2005.

FFY	Excluding Environmental Risk	Including Environmental Risk
FFY 2005	2.41%	5.67%
FFY 2006	1.97%	6.98%
FFY 2007	1.26%	5.00%
FFY 2008	1.26%	4.48%

FFY 2008 data shows that for all children 0-1, excluding Environmental Risk, the percentage remained the same at 1.26%. However, because the trend shows a decrease in percentage served from FFY 2005 except for this past year, further analysis will be conducted next year if the trend continues and if so, why.

Explanation of Slippage

There was a very slight decrease in the percentage of children 0-1, including Environmental Risk (.52%). Because of the minimal slippage it was determined that no analysis was needed at this time. However because the trend has shown a decrease since FFY 2006, further analysis will be conducted next year if the trend continues and why.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Translate 4 critical informational brochures into Marshallese, Chuukese, Tagalog, Ilocano, Mandarin and Spanish.	The H-KISS, Family Rights (previously known as “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:

Proposed Targets

Due to the decrease in funding to the Department of Health, a public hearing was held May 4, 2009 to revise Hawaii’s Part C eligibility by removing the category “Environmental Risk.” As a result, the targets

APR Template – Part C (4)

were revised. Deleted is the category “including at-risk.” The actual percentage for the Revised Target is consistent with the percentage previously identified for the population “excluding at-risk.” The table below provides the current and revised targets.

FFY	Current	Revised
2009	Excluding at-risk 2.97% Including at-risk 7.25%	2.97%
2010	Excluding at-risk 3.0% Including at-risk 7.3%	3.0%

Continuing and New Improvement Activities:

The following table includes improvement activities that are continuing and new activities that were developed to support Child Find.

Revised Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
<p>Review Hawai'i's Part C eligibility criteria for continued appropriateness.</p>		X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> Hawai'i Part C eligibility was changed, effective May 15, 2009 to remove the environmentally at-risk category, as a result of the public hearing process. The revised eligibility was submitted with the grant application to OSEP on May 15, 2009. <p>Continuing:</p> <ol style="list-style-type: none"> There have been discussions related to further restricting eligibility which will depend on the state's fiscal situation and available state funds to support Part C. Public hearings have been scheduled for January 2010 on eligibility changes. 	
<p><u>Original</u> Work with the American Academy of Pediatrics to design an educational activity to incorporate into doctors' professional improvement requirements to target doctors (both pediatricians and family practice physicians)</p> <p><u>Revised</u> Work with the American Academy of Pediatrics and other Pediatric organizations to design an educational activity to incorporate into doctors' professional improvement</p>					X	X	<p>Continuing</p> <ol style="list-style-type: none"> Discussions with the HEICC representative from the American Academy of Pediatrics have been initiated occurred and the formulation of a plan to create such an educational activity is forthcoming. 	<p>Revision Justification: The revised language will expand the work group to other Pediatric organizations in Hawaii.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
requirements to target doctors (both pediatricians and family practice physicians)								
Review existing videos to determine what could be included in the DVD.				X	X	X		Extend Timeline Justification: Additional time is needed as the focus on this year's activities was on other public awareness activities
Create a DVD at 4 th grade level comprehension to provide an overview of Early Intervention.					X	X	Completed to Date: 1. Discussion has occurred with the executive director for the Learning Disabilities Association of Hawaii to partner with them in production of this DVD. Continuing 1. Previously developed media will be reviewed for its appropriateness to be included in the DVD.	Extend Timeline Justification: Additional time is needed due to the time and resources needed to create a DVD.
Identify other public awareness materials needed, including new brochures, posters, displays, etc. to support increased referrals.				X	X	X	Completed to Date: 1. The H-KISS, Family Rights (formerly known as "Dear Family"), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese. 2. New EIS public outreach displays were created and have been utilized at conferences and festivals targeting families. Continuing: 1. A poster for use in Pediatricians' offices and a variety of giveaway materials such as pencils, magnets, and stickers with H-KISS contact information will be developed.	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
<p>Provide information on early intervention services to pre-natal teenage mothers and teenage mothers in the following geographical areas: Oahu - Waianae Coast, Waimanalo, Waipahu, Makiki, Chinatown and Kalihi; Island of Hawai'i – Kona, Oceanview, Waikaloa, Nalehu, Pahala and Puna; and all of Maui</p>				X	X	X	<p>Completed to Date:</p> <p>1. It is estimated that nearly 500 pregnant teens and teen parents participated in public awareness events targeting pregnant teens and teen parents at the following locations:</p> <ul style="list-style-type: none"> • Oahu: Waianae Coast, Makiki and Kalihi. • Hawai'i Island: Kona, Nalehu, Pahala, Puna, Oceanview, Waikaloa. • Maui: Island-wide <p>Continuing:</p> <p>1. The other areas still needing follow-up will be the focus of the coming calendar year in addition to the areas where successful outreach occurred. The geographic areas still needing follow up are:</p> <ul style="list-style-type: none"> • Oahu: Chinatown, Waipahu, Waimanalo 	<p>Extend Timeline</p> <p>Justification:</p> <p>Additional time is needed to cover the additional geographic areas that are remaining.</p>
<p>Provide information on EI services to OB/GYNs and midwives across the state so they can be placed in their office lobbies and distributed to expectant mothers.</p>				X	X	X		<p>Extend Timeline</p> <p>Justification:</p> <p>Additional time is needed as the focus on this year's activities was on other public awareness activities.</p>
<p>Partner with non-Part C programs to increase their awareness about Part C so they will refer potentially eligible Part C children to EI.</p>				X	X	X	<p>Completed to Date:</p> <p>1. EIS state and local staff partnered with the following non-Part C programs and organizations to educate both the organizations and the communities they serve regarding Early Intervention Services:</p> <ul style="list-style-type: none"> • Participated at student health fairs sponsored by local community colleges and universities, such as at Brigham Young University – Hawaii. • Participated at the Children & Youth Day sponsored by the 	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
							Legislature. <ul style="list-style-type: none"> • Attended meetings with members of the Micronesian Cultural Awareness Project. • Attended local neighborhood board meetings to discuss early intervention services. • Participated in language access and other community outreach fairs sponsored by Non-Part C State agencies. • Participated in health and human service conferences sponsored by non-governmental and non-profit organizations, such as the Special Parent Information Network Conference. • Participated in teacher in-services with community preschools 	
<p>New (from Indicator 9) Educate referral sources (e.g., pediatricians) about Hawaii's early intervention system, especially regarding transdisciplinary services, so that they provide accurate information to families about how services are provided</p>					X	X	<p>Continuing</p> <ol style="list-style-type: none"> 1. A preliminary discussion occurred with the Family Health Services Division's medical consultant on the need to update pediatricians and other primary care physicians on changes in the early intervention system, including changes in eligibility and provision of services. 2. On-going meetings will be scheduled to support increased knowledge of Part C referral sources. For example, a meeting will be scheduled with the FHSD Medical Consultant, Hawaii's AAP representative (who is on the HEICC), a developmental pediatrician and the HEICC Co-Chairs to help identify strategies to increase knowledge of pediatricians on changes in Hawaii's Part C program. 	<p>New Justification: This activity is relevant to Child Find Activities; therefore it was moved from Indicator 9 to Indicators 5 & 6.</p>

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

<p>Measurement:</p> <p>Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.</p>
<p>Applied:</p> <p><u>Excluding At Risk</u></p> <p>2,025 of infants and toddlers birth to 3 with IFSPs. 53,720 population of infants and toddlers birth to 3 Percent = 2,025/53,720 = 3.77%</p> <p><u>Including At Risk</u></p> <p>3,509 of infants and toddlers birth to 3 with IFSPs. 53,720 population of infants and toddlers birth to 3 Percent = 3,509/53,720 = 6.53%</p>

FFY	Measurable and Rigorous Target	
2008	Excluding environmentally at risk = 4.43%	Including environmentally at risk = 7.37 %

Actual Target Data for FFY 2008:

- Compared to National Data (based on OSEP 2009 data tables)

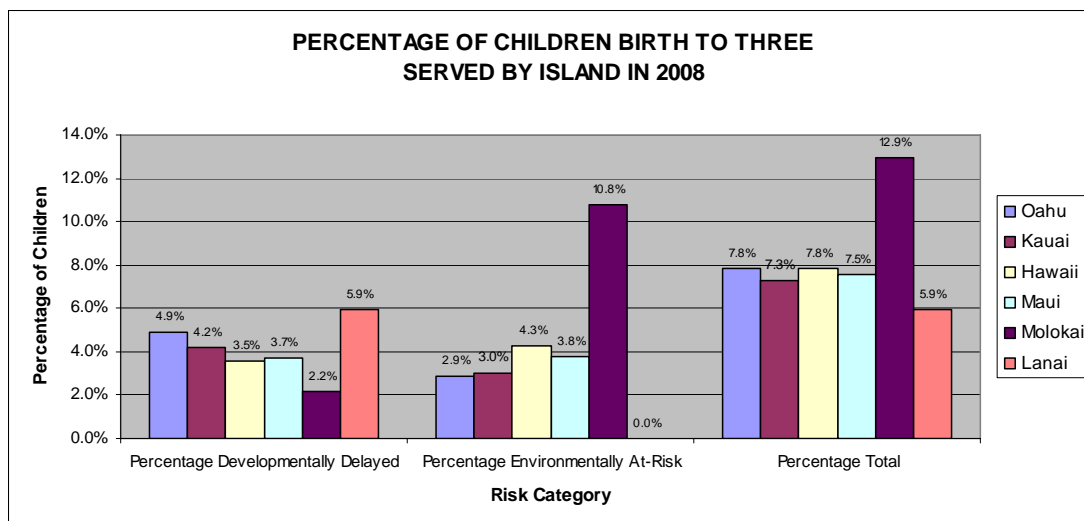
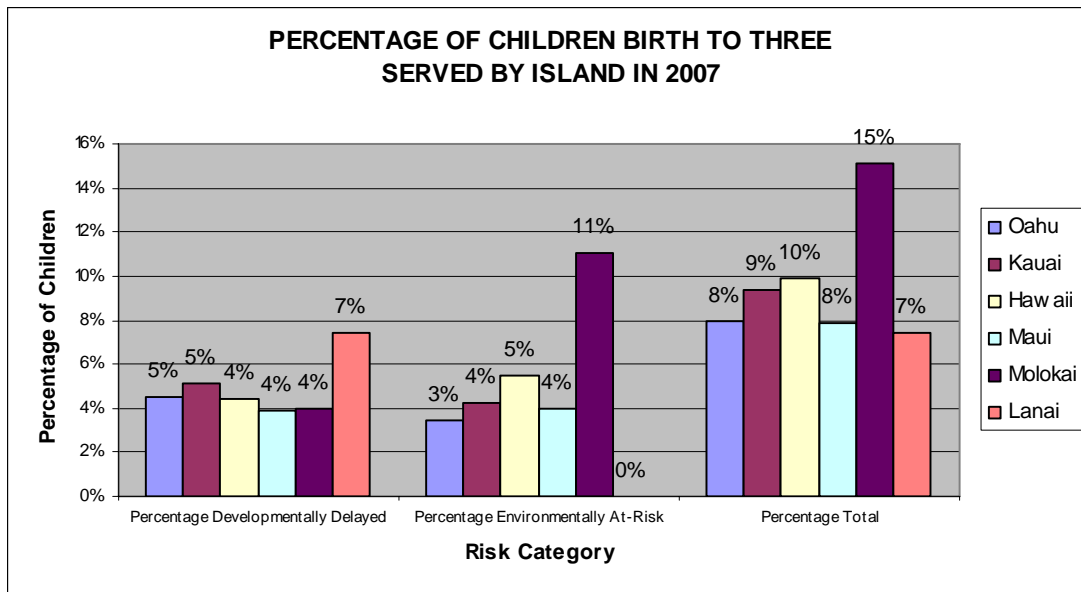
The following compares Hawai'i's percentage served with national data:

- The national average for all states including Washington D.C., is 2.66%. Hawai'i surpassed the national average for both excluding and including environmentally at risk infants and toddlers birth to 3.
- Excluding environmentally at risk: Hawai'i was ranked 8th, as it served 3.77% (2,025 of 53,720) of infants and toddlers birth to 3 with IFSPs when infants and toddlers at environmental risk were excluded from the count.
- Including environmentally at risk: Hawai'i was ranked first, as it served 6.53% (3,509 of 53,720) of infants and toddlers birth to 3 with IFSPs, when infants and toddlers at environmental risk were included in the count. Hawaii surpassed the national average of 2.66% by 3.87%.

- Although the current data does not reach the proposed target in either the excluding or including at risk categories, Hawai'i's data is above the national average of 2.66%.
- Additional Data - By Island 2007 to 2008:

A comparison served by island found that there are no significant changes in percentages of children served by island other than for Lanai. However, due to the very small numbers that fluctuate from year-to-year (from 4 in 2006 to 10 in 2007) the percentages are misleading.

The following charts compare the percentage of children, 0-3, served by island, for FFY 2007 and FFY 2008.



Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress and Slippage

FFY	Excluding Environmental Risk	Including Environmental Risk
FFY 2005	4.3%	6.7%
FFY 2006	4.2%	7.48%
FFY 2007	3.74%	6.94%
FFY 2008	3.77%	6.53%

Explanation of Progress

For all children 0-3, excluding Environmental Risk, there was a very slight increase from FFY 2007 to FFY 2008 of .03%. In looking at trend data over the past 4 years, there is no consistent pattern of increases or decreases. Further analysis will be conducted next year to determine there appears to be a trend.

Explanation of Slippage

There was a very slight decrease in the percentage of children 0-3, including Environmental Risk (.41%). Because of the minimal slippage it was determined that no analysis was needed at this time. However because the trend has shown a decrease for the past 4 years, further analysis will be conducted next year if the trend continues and why.

Completed Improvement Activities

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Translate 4 critical informational brochures into Marshallese, Chuukese, Tagalog, Ilocano, Mandarin and Spanish.	The H-KISS, Family Rights (previously known as the “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:

Proposed Targets

Due to the decrease in funding to the Department of Health, a public hearing was held May 4, 2009 to revise Hawaii’s Part C eligibility by removing the category “Environmental Risk.” As a result, the targets were revised. Deleted is the category “including at-risk.” The actual percentage for the Revised Target is consistent with the percentage previously identified for the population “excluding at-risk.” The table below provides the current and revised targets.

FFY	Current	Revised
2009	Excluding at-risk 4.44% Including at-risk 7.38%	4.44%
2010	Excluding at-risk 4.45% Including at-risk 7.4%	4.45%

Continuing and New Improvement Activities:

The following table includes improvement activities that are continuing and new activities that were developed to support Child Find.

Revised Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
<p>Review Hawai'i's Part C eligibility criteria for continued appropriateness.</p>		X	X	X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> Hawai'i Part C eligibility was changed, effective May 15, 2009 to remove the environmentally at-risk category, as a result of the public hearing process. The revised eligibility was submitted with the grant application to OSEP on May 15, 2009. <p>Continuing:</p> <ol style="list-style-type: none"> There have been discussions related to further restricting eligibility which will depend on the state's fiscal situation and available state funds to support Part C. Public hearings have been scheduled for January 2010 on eligibility changes. 	
<p><u>Original</u> Work with the American Academy of Pediatrics to design an educational activity to incorporate into doctors' professional improvement requirements to target doctors (both pediatricians and family practice physicians)</p> <p><u>Revised</u> Work with the American Academy of Pediatrics and other Pediatric organizations to design an educational activity to incorporate into doctors' professional improvement</p>					X	X	<p>Continuing</p> <ol style="list-style-type: none"> Discussions with the HEICC representative from the American Academy of Pediatrics have been initiated occurred and the formulation of a plan to create such an educational activity is forthcoming. 	<p>Revision Justification: The revised language is more inclusive of other Pediatric organizations in Hawaii.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
requirements to target doctors (both pediatricians and family practice physicians)								
Create a DVD at 4 th grade level comprehension to provide an overview of Early Intervention.					X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> Discussion has occurred with the executive director for the Learning Disabilities Association of Hawaii to partner with them in production of this DVD. <p>Continuing</p> <ol style="list-style-type: none"> Previously developed media will be reviewed for its appropriateness to be included in the DVD. 	<p>Extend Timeline</p> <p>Justification Due to the time and resources needed to create a DVD, it is necessary to extend the timeline.</p>
Identify other public awareness materials needed, including new brochures, posters, displays, etc. to support increased referrals.				X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> The H-KISS, Family Rights (formerly known as “Dear Family”), EIS and Developmental Checklist brochures have all been translated and printed in Mandarin, Chuukese, Vietnamese, Marshallese, Spanish, Ilocano, Tagalog, Korean, and Japanese. New EIS public outreach displays were created and have been utilized at conferences and festivals targeting families. <p>Continuing:</p> <ol style="list-style-type: none"> A poster for use in Pediatricians’ offices and a variety of giveaway materials such as pencils, magnets, and stickers with H-KISS contact information will be developed. 	
Partner with non-Part C programs to increase their awareness about Part C so they will refer potentially eligible Part C children to EI.				X	X	X	<p>Completed to Date:</p> <ol style="list-style-type: none"> EIS state and local staff partnered with the following non-Part C programs and organizations to educate both the organizations and the communities they serve regarding Early Intervention Services: <ul style="list-style-type: none"> Participated at student health fairs sponsored by local community colleges and universities, such as at Brigham Young University – Hawaii. Participated at the Children & Youth Day sponsored by the Legislature. 	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
							<ul style="list-style-type: none"> • Attended meetings with members of the Micronesian Cultural Awareness Project. • Attended local neighborhood board meetings to discuss early intervention services. • Participated in language access and other community outreach fairs sponsored by Non-Part C State agencies. • Participated in health and human service conferences sponsored by non-governmental and non-profit organizations, such as the Special Parent Information Network Conference. <p>2. Participated in teacher in-services with community preschools</p>	
<p>New (from Indicator 9) Educate referral sources (e.g., pediatricians) about Hawaii's early intervention system, especially regarding transdisciplinary services, so that they provide accurate information to families about how services are provided</p>					X	X	<p>Continuing</p> <ol style="list-style-type: none"> 1. A preliminary discussion occurred with the Family Health Services Division's medical consultant on the need to update pediatricians and other primary care physicians on changes in the early intervention system, including changes in eligibility and provision of services. 2. On-going meetings will be scheduled to support increased knowledge of Part C referral sources. For example, a meeting will be scheduled with the FHSD Medical Consultant, Hawaii's AAP representative (who is on the HEICC), a developmental pediatrician and the HEICC Co-Chairs to help identify strategies to increase knowledge of pediatricians on changes in Hawaii's Part C program. 	<p>New Justification: This activity is relevant to Child Find Activities therefore it was moved from Indicator 9 to Indicator 5 & 6.</p>

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

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

Applied:

1998 infants and toddlers received an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline

2060 infants and toddlers with IFSPs

Percent = 1998/2060 = 97%

34 infants and toddlers did not have a timely IFSP due to untimely evaluations. Of the 34 untimely evaluations, 29 were due to exceptional family circumstances and 5 were due to program reasons.

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

Statewide data for eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline was collected from Agency data systems for the period 7/1/08 – 6/30/09. The timelines were from the date of referral to the initial IFSP meeting and were based on actual, not an average, number of days.

- 1998 of 2060 (97%) of infants and toddlers received an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline.
- Untimely Evaluations: 34 of the 2060 (2%) infants and toddlers did not have an Initial IFSP meeting within Part C’s 45-day timeline due to untimely evaluations. Of the 34 untimely evaluations, 29 (85%) were due to exceptional family circumstances and 5 (15%) were due to program reasons.

- Exceptional Family Circumstances: 428 of the 2060 (21%) infants and toddlers did not have an initial IFSP meeting within Part C’s 45-day timeline due to exceptional family circumstances as defined by IDEA Part C. They are included in both the above numerator and denominator. Only 7% (29 of the 428 late IFSPs due to exceptional family reasons) were due to untimely evaluations. The following are the two predominate exceptional family circumstances:
 - Canceled appointment
 - Schedule conflict

- Program Reasons. 62 of the 2060 (3%) infants and toddlers did not have an initial IFSP meeting within Part C’s 45-day timeline due to program reasons. Only 8% (5 of the 62 late IFSPs due to program reasons) were due to untimely evaluations. The following are the two predominate program reasons:
 - Staff vacancy
 - Medical (staff sick)

- Of the 62 infants and toddlers who did not receive an evaluation and assessment and an initial IFSP meeting within Part C’s 45-day timeline, all 62 (100%) infants and toddlers received an evaluation and assessment and had an initial IFSP meeting, although untimely.

Range of Days Beyond the 45-day timeline to Receive an Evaluation and Initial IFSP		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	51/62	82%
31-60 days	7/62	11%
61-90 days	2/62	3%
> 90 days	2/62	3%

- There were 18 programs serving the 62 children who did not receive an evaluation and assessment and an initial IFSP meeting within Part C’s 45-day timeline.
 - 12 of the 18 programs were issued findings
 - 5 of the 18 programs were not issued findings because they submitted required data that was verified by HDOH to demonstrate correction prior to the written issuance of findings. The data demonstrates that all infants and toddlers had received initial IFSPs, although late, unless the child was not under the program’s jurisdiction. The programs are correctly implementing the Timely Evaluation and Assessments and initial IFSPs requirement.
 - 1 of the 18 programs was not issued findings because the program closed prior to the written issuance of findings.

- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicators 1a, 4d, and 4e) for findings made and timely correction under the Hawai’i Monitoring Priorities related to this Indicator.

Previously Identified Non-Compliance

FFY 2006

- Eight programs were notified of findings for Timely Evaluation and Assessment and Initial IFSPs in FFY 2006 (See Table 2 in Indicator 9) and all were verified as corrected within one year.

FFY 2007

- 16 programs were notified of findings for Timely Evaluation and Assessment and Initial IFSPs in FFY 2007 (See Table 1b in Indicator 9) and all were verified as corrected within one year. The data received demonstrates that all infants and toddlers received initial IFSPs, although late, unless the child was not under the program’s jurisdiction. The programs are now correctly implementing the Timely Evaluation and Assessments and Initial IFSPs requirement.

Correction of Noncompliance for Indicator 7 – Evaluation and Assessment and Initial IFSP within 45-days						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	8	8	0	8	0
FFY 2006	FFY 2007	16	16	0	16	0
FFY 2007	FFY 2008	To be reported in FFY 2009 APR to be submitted in 2011				

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress:

The current data on timely evaluations and assessment and initial IFSP meetings remains the same (97%) from FFY 2007 to FFY 2008.

- FFY 2005 compliance was at 98%.
- FFY 2006 compliance was at 98%.
- FFY 2007 compliance was at 97%
- FFY 2008 compliance was at 97%

Completed Improvement Activities:

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Require Programs with late IFSPs due to “forgot to schedule in a timely manner” to	Completed to Date 1. New Database reports developed and distributed on 5-29-09. 2. Staff can easily query due dates for Initial IFSPs ahead of time so they

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
develop and implement a tickler system.	will remember to schedule the IFSPs in a timely manner.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

New Improvement Activities:

The following table includes new improvement activities that were developed to support compliance for Timely Evaluations and Assessment and Initial IFSPs.

Revised Resources:

There are no new resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
Require Programs with late IFSPs due to "late MDEs" to identify the root causes and embed strategies in their CAP.				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. New Database reports developed and distributed on 5-29-09. 2. Staff is to enter reasons for late MDE. 3. Staff can easily query reasons for late MDE, develop strategies to reduce late MDEs and include in their CAPs. <p>Continuing</p> <ol style="list-style-type: none"> 1. Preliminary data show that late MDEs are due to scheduling problems or because the appropriate team is not available. 2. Staff needs to develop strategies on how to resolve scheduling issues and include them in the CAP. 3. Staff needs to continue to query database regularly to see if strategies are working. 4. EIS Quality Assurance staff will continue to work with program staff to ensure that they identify the root causes of late MDEs. 	
Develop a training module to address required and acceptable documentation.				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. The CSPD position was filled 1/4/2010 so this activity can be completed. <p>Continuing</p> <ol style="list-style-type: none"> 1. Because module is not yet completed, TA has been provided to programs based on calls/questions to EIS. 2. Programs are encouraged to review charts to determine if their documentation is sufficient. 3. Programs have requested that modules include clear directions on what is required to be considered appropriate documentation. 	<p><u>Extend Timeline</u></p> <p>Justification:</p> <p>The CSPD position was recently filled; therefore additional time is needed to complete this activity.</p>
Post documentation training module on the web.					X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. The CSPD position was filled 1/4/2010 so this activity can be completed. 	<p><u>Extend Timeline</u></p> <p>Justification:</p> <p>The CSPD position was recently filled; therefore</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
								additional time is needed to complete this activity.
Embed the documentation training module into the mandatory EI Orientation Training.					X	X	<p>Completed to Date</p> <p>1. The CSPD position was filled 1/4/2010 so this activity can be completed.</p>	<p><u>Extend Timeline</u></p> <p>Justification:</p> <p>The CSPD position was recently filled; therefore additional time is needed to complete this activity.</p>
<p>New Activity</p> <p>Develop checklists to be used in the Intake process to identify the child's profile so that an appropriate evaluation team will complete the MDE.</p>					X	X		<p>Justification:</p> <p>Having an appropriate profile of the child will help ensure that the appropriate team will evaluate the child. This should result in a more accurate assessment of the child's level in each area.</p>

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

- A. IFSPs with transition steps and services;
- B. Notification to the Lead Educational Agency (LEA), if child potentially eligible for Part B (DOE); and
- C. Transition conference, if child potentially eligible for Part B.

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

<p>Measurement:</p> <ul style="list-style-type: none"> A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100. B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100. C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100. <p>Account for untimely transition conferences, including reasons for delays.</p>
<p>Applied:</p> <ul style="list-style-type: none"> A. 394 children exiting Part C who have an IFSP with transition steps and services 399 children who exited Part C Percent $394/399 = 99\%$ B. 764 children exiting Part C and potentially eligible for Part B where timely notification to the LEA occurred 836 children exiting Part C who were potentially eligible for Part B Percent = $764/836 = 91\%$ C. 455 children exiting Part C where the <u>timely</u> transition conference occurred 485 children exiting Part C where the transition conference occurred Percent = $455/485 = 94\%$

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

Data for the Transition Plan was obtained via the monitoring process because the section on the Transition Plan in the new EIS database was not completed. (See Indicator 1, page 6-7, Monitoring Process section that explains the SAM selection process.

Statewide data for the Transition Notice and the Transition Conference for all children who exited Part C in FFY 2008 was collected from Agency data systems for the period 7/1/08-6/30/09.

- Transition Plan

- 394 of 399 (99%) children exiting Part C had a timely and complete Transition Plan on their IFSP with steps and services.
- 5 of the 399 (1%) children exiting Part C did not have a timely and complete Transition Plan in their IFSP, based on Hawai'i's requirements for a complete Transition Plan. To be considered "complete," Hawai'i requires the Transition Plan to be updated at each IFSP meeting.
- Of the 5 children exiting Part C who did not have a timely and complete Transition Plan in the IFSP selected for review, 3 children had a "complete" transition plan included in their IFSP prior to exiting Part C and 2 children did not have a "complete" transition plan included in their IFSP prior to exit.
- There were 4 programs serving the 5 children who did not have a timely and complete Transition Plan in their IFSP with steps and services.
 - 2 of the 4 programs were issued findings
 - 2 of the 4 programs were not issued findings because they submitted required data that was verified by HDOH to demonstrate correction prior to written issuance of findings. The data demonstrates that all infants and toddlers had a complete transition plan, although late unless the child was no longer under the program's jurisdiction. The programs are now correctly implementing the timely and complete transition plans requirement.

- Transition Notice

- 764 of 836 (91%) children exiting Part C and potentially eligible for Part B services exited with timely notification to the LEA. The Part B and C programs mutually decided that any child served by Part C with a developmental delay was "potentially eligible for Part B services." Therefore it is a requirement that, at a minimum, directory information on all children exiting Part C with a developmental delay be forwarded to Part B unless the family opts out of this requirement.
- Opt Out Option: 386 children exiting Part C and potentially eligible for Part B services exited without providing notification to the LEA due to the family exercising the "opt out" policy. The "opt out" policy was presented to the community at a public hearing held May 4, 2009. The policy was officially forwarded to OSEP as part of the Part C Grant

Application mailed to OSEP on May 14, 2009 and is officially on file. These children are not included in either the above numerator or denominator.

- **Program Reasons:** 72 of 836 (9%) children exiting Part C and potentially eligible for Part B exited without timely notification to the LEA due to program reasons. They are included in the above denominator. It is Hawai'i's policy that the transition notice must be sent to the LEA at least 90 days prior to the child's 3rd birthday or when the child is eligible to begin DOE. The timeline is in place to support DOE's Child Find efforts to ensure that all children who are potentially eligible for DOE can receive a timely evaluation and start the Part B program by their 3rd birthday.
- Of the 72 children exiting without timely notification to the LEA, notification was provided to the LEA for 40 of these children, although untimely.

Range of Days, Beyond the Requirement of 90 Days Prior to the Child Exiting Part C, that Notification to the LEA was Provided		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	29/40	73%
31-60 days	5/40	13%
61-90 days	3/40	7%
>90 days	3/40	7%

- For the 32 children remaining, notification to the LEA was never provided prior to the children exiting Part C for the following reasons:
 - 3 were late referrals to Part C and the Program did not complete the Transition Notice.
 - 4 families did not respond within the 10 days when given a copy of the Transition Notice and the Program neglected to send the Transition Notice to the LEA as required.
 - 20 records had insufficient documentation to determine if a Transition Notice was completed and sent to the LEA.
 - 5 had "other" reasons documented.
- There were 16 programs serving the 72 children who exited Part C with either untimely notification to the LEA or insufficient documentation that notification to the LEA was provided:
 - 11 of the 16 programs were issued findings
 - 3 of the 16 programs were not issued findings because they submitted required data that was verified by HDOH to demonstrate correction prior to the written issuance of findings. The data demonstrates that transition notices for all infants and toddlers were provided to the LEA unless the family "opted out" or child was not under the program's jurisdiction. Programs are now correctly implementing the requirement of notifying the LEA of children who are potentially eligible for DOE.
 - 2 of the 16 programs were not issued findings because they closed prior to the written issuance of findings.

- Transition Conference

Hawaii’s policy is to offer a Transition Conference for all children exiting from Hawaii’s Part C program as they are all potentially eligible for Part B services.

- 455 of 485 (94%) children exiting Part C where the timely transition conference occurred.
- 739 families declined a Transition Conference and are not included in either the above numerator or denominator.
- Exceptional Family Circumstances: 129 of 485 (27%) children exiting Part C did not have a timely Transition Conference due to exceptional family circumstances. They are included in both the above numerator and denominator. The following are the two predominate exceptional family circumstances:
 - Request to postpone the Transition Conference
 - Not initially interested in having a Transition Conference and then changed their mind
- Program Reasons: 30 of 485 (7%) children exiting Part C did not have a timely Transition Conference due to program reasons. The following are the two predominate program reasons:
 - Schedule full
 - No documentation
- Of the 30 families that did not receive a timely Transition Conference, 10 received a Transition Conference, although untimely.

Range of Days, Beyond the Requirement of 90 Days Prior to the Child Exiting Part C, that the Transition Conference was Held		
Range of Days Beyond the Due Date	# of Children	% of Children
1-30 days	8/10	80%
31-60 days	1/10	10%
61-90 days	1/10	10%

- There were 20 children who exited Part C with insufficient documentation that the Transition Conference occurred.
- There were 11 programs serving the 30 children who exited Part C with either an untimely Transition Conference or there was insufficient documentation that the Transition Conference occurred:
 - 8 of the 11 programs were issued findings
 - 2 of the 11 programs were not issued findings because they submitted required data that was verified by HDOH to demonstrate correction prior to the written issuance of findings. The data demonstrates that all children received a transition conference, although late, unless the family declined a transition conference or the child was no longer under the program’s jurisdiction. Programs are now

correctly implementing the transition conference requirements for all infants and toddlers.

- 1 of the 11 programs was not issued findings because the program closed prior to the written issuance of findings.
- Related Requirements
 - Refer to Indicator 9, Table 1b (Indicator 3a) for findings made and timely correction under the Hawaii Monitoring Priorities related to this Indicator.

Previously Identified Non-Compliance

- Transition Plan

FFY 2006

- Three programs were notified of findings for Transition Plan in FFY 2006 (See Table 2 in Indicator 9); all were verified as corrected within one year of notification.

FFY 2007

- Eight programs were notified of findings for Transition Plan in FFY 2007 (See Table 1b in Indicator 9); all were verified as corrected within one year of notification.

Correction of Noncompliance for Indicator 8A: Transition Plan with Steps and Services						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	3	3	0	3	0
FFY 2006	FFY 2007	8	8	0	8	0
FFY 2007	FFY 2008	To be reported in FFY 2009 APR to be submitted in 2011				

- Transition Notice

FFY 2006

- No findings were issued.

FFY 2007

- Eight programs were notified of findings for Transition Notice in FFY 2007 (See Table 2b in Indicator 9); 7 findings were verified as corrected within one year of notification and one finding was subsequently verified as corrected.

Correction of Noncompliance for Indicator 8B: Transition Notice						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	0	0	0	0	0
FFY 2006	FFY 2007	8	7	1	8	0
FFY 2007	FFY 2008	To be reported in FFY 2009 APR to be submitted in 2011				

- Transition Conference

FFY 2006

- No findings were issued.

FFY 2007

- 14 programs were notified of findings for Transition Conference in FFY 2007 (See Table 2b in Indicator 9); all findings were verified as corrected within one year.

Correction of Noncompliance for Indicator 8B: Transition Notice						
Monitoring Data Year	Year Findings of Noncompliance Issued	Total Findings of Noncompliance	Findings Verified as Corrected within One Year	Findings Subsequently Verified as Corrected	Total Findings Corrected as of Submission	Findings of Noncompliance Remaining
FFY 2005	FFY 2006	0	0	0	0	0
FFY 2006	FFY 2007	14	14	0	14	0
FFY 2007	FFY 2008	To be reported in FFY 2009 APR to be submitted in 2011				

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress and Slippage:

FFY	Transition Plan	Transition Notice	Transition Conference
2005	99%	100%	94%
2006	99%	100%	96%
2007	97%	99%	97%
2008	99%	91%	94%

Explanation of Progress:

Transition Plan

- The current data from Timely Transition Plans shows an increase of 2% from FFY 2007 to FFY 2008, from 97% to 99%. However, a true comparison cannot be made as the data are from two different sources. FFY 2007 data was from Agency data systems. FFY 2008 data was collected from the Self Assessment Monitoring (SAM) tool, as the new EIS database was not completed until July 2009.

Explanation of Slippage:

Transition Notice

- The current data on Timely Transition Notices shows a slippage of 8% from FFY 2007 to FFY 2008, from 99% to 91%.
- An improvement activity has been developed to investigate why there was slippage for the requirement of notifying the LEA of children who are potentially eligible for Part B services.

Transition Conference

- The current data on Timely Transition Conferences shows a slippage of 3% from FFY 2007 to FFY 2008, from 97% to 94%.
- A review of the data found that programs continue to experience staff turnover and vacancies which interfere with the required documentation. In addition, staff vacancies have resulted in higher ratios of Service Coordinators to Children, impacting the scheduling of timely transition conferences.

Completed Improvement Activities:

There are no activities that have been completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for Timely Transition Planning.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
<p>Provide written information to families on DOE preschool special education eligibility requirements to support families to better understand their options.</p>	X	X	X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> The <u>STEPS to Transition Guide</u> developed by the Hawai'i STEPS Project has been shared with families. The "Path to Transition" handout was developed to share with families that outline referral steps from Part C to Part B. Community STEPS teams have updated/revised transition materials to share with families in their communities. This includes written information on what documents are needed for registration and enrollment at the Department of Education schools, a checklist of practical tips for parents on preschool transition, and recommended readings that support children in transition. Written material was provided at Annual Parent/Child Fairs designed to inform families of available options in the community. The "Comparison of the Individuals with Disabilities Education Act (IDEA) Part C and Part B" handout was developed in March 2009 to share with families. It outlines the differences between Part C and Part B. Written material was provided to families at the SPIN Annual Conference in April 2009. <p>Continuing</p> <ol style="list-style-type: none"> Written materials, including updates and new materials, will continue to be provided at Annual Parent/Child Fairs designed to inform families of available options in the community. Written materials will be updated as changes are made. 	
<p>Investigate reasons for high number of "opt outs" for the Transition Notice and determine how to increase the number of Transition Notices sent to the</p>			X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> The EIS database was updated to include reasons why families chose to "opt out" of sending the Transition Notice to DOE. The data will be available for analysis prior to the submission of the FFY 2009 APR to be submitted in 2011. <p>Continuing</p> <ol style="list-style-type: none"> Now that the EIS database has been updated, programs are to 	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
DOE.							input reasons in the EIS database as to why families are choosing to “opt out” of sending the Transition Notice to the DOE. 2. EIS Quality Assurance staff is to work with program staff to ensure that the data is being inputted as required. 3. The data should be reviewed quarterly to determine to look at the number of families choosing to “opt out” as well as their reasons. Only through an analysis of the reasons can improvement activities can be developed to reduce this number. 4. The protocols on Transition Notice need to be reviewed to ensure that the Notice is discussed with families at the IFSP meeting closest to the child’s 2 nd birthday, not prior to this IFSP. 5. Data on the age of the child when the “opt out” occurred needs to be collected to ensure that Transition Notice protocol was followed.	
Investigate reasons for high number of “declines” for the Transition Conference and determine how to increase the number of scheduled and completed Transition Conferences.			X	X	X	X	<p>Completed to Date</p> 1. The HDOH database was updated to include reasons why families declined the Part C Transition Conference. The data will be available for analysis prior to the submission of the FFY 2009 APR due in 2011. 2. The SAM tool was revised to include a question to track reasons for transition conference “declines.” 3. Based on data from SAM tool, the top three reasons why families declined having a Transition Conference were: <ul style="list-style-type: none"> • Families already decided where they want their child to go (31%) • Families chose to handle seeking options on their own (24%) • Families are already familiar with the options (19%) 4. The State STEPS team coordinated the dissemination of a Transition Feedback Survey to families. The survey included a question pertaining to the Part C Transition Conference: if the family declined one, the reason why.	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
							<p>Continuing</p> <p>1. Data on declines will continue to be analyzed to determine how to decrease this number.</p>	
<p>The STEPS State team will coordinate the development of a resource folder of both Part B and Part C information by district/complex/community areas, to be used by DOE Student Services Coordinators and DOH Service Coordinators and Program Managers.</p>				X	X	X	<p>Completed to Date</p> <p>1. The Windward Oahu STEPS team, Kamalapua O Koolau, developed a "Transition Resource Guide." It includes information and resources in the Windward Oahu district.</p> <p>Continuing</p> <p>1. The State STEPS team is reviewing materials included in Kamalapua O Koolau's "Transition Resource Guide" and gathering other tools/resources. A list of recommended tools/resources will be developed to share with other community STEPS teams to enhance existing Transition Resource Guides and/or develop one for their respective communities.</p>	
<p>Develop a training module to address required and acceptable documentation.</p>				X	X	X	<p>Completed to Date:</p> <p>1. The CSPD position was filled 1/4/2010 so this activity can be completed.</p> <p>Continuing</p> <p>1. The first draft of a module to address required and acceptable documentation was developed, however there as been no further progress, as the HDOH Training Coordinator position was only just filled after being vacant for over a year.</p>	<p>Revise Timeline</p> <p>Justification: Although the CSPD position was recently filled, additional time is needed to complete this activity.</p>
<p>Post documentation training module on the web.</p>					X	X		<p>Revise Timeline</p> <p>Although the CSPD position was recently filled, additional time is needed to complete this activity.</p>

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
Embed the documentation training module into the mandatory EI Orientation Training.					X	X		<p>Revise Timeline Although the CSPD position was recently filled, additional time is needed to complete this activity.</p>
<p>New Explore the current implementation of the Transition Notice protocol and address any inconsistencies discovered.</p>					X			<p>Justification: There was slippage for the Transition Notice requirement so it is necessary to investigate the possible reasons for the slippage.</p>
<p>New Up-date Transition Policies and Procedures, Training Modules, and the MOA with the DOE to be consistent with the recent FAQs from OSEP on Transition between B and C and the change in DOE's protocol on the entrance date to DOE Preschool Special Education Program.</p>					X	X		<p>Justification: OSEP's recent FAQs on Transition and the change in entrance age to Part B will require revisions in the Part C to Part B transition MOA as well as changes to Part C Transition policies and protocols and training modules.</p>

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

<p>Measurement:</p> <p>Percent of noncompliance corrected within one year of identification:</p> <p style="margin-left: 20px;">a. # of findings of noncompliance.</p> <p style="margin-left: 20px;">b. # of corrections completed as soon as possible but in no case later than one year from identification.</p> <p>Percent = [(b) divided by (a)] times 100.</p> <p>States are required to use the “Indicator 9 Worksheet” to report data for this indicator.</p>
<p>Applied:</p> <p>308 findings of noncompliance</p> <p>292 corrections completed as soon as possible but in no case later than one year from identification</p> <p>Percent = 292/308 = 95%</p>

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

- The following findings were issued in FFY 2007, based on FFY 2006 data, and were verified as corrected within one year of notification or later.

a. No. of Findings of Non-Compliance Issued (FFY 2007)	308
b. No. of Findings Verified as Corrected within One Year of Notification (FFY 2008)	292
c. Percent Verified as Corrected within One Year of Notification (FFY 2008)	95% (292/308)
d. No. of Finding Subsequently Verified as Corrected	11
e. No. of Findings Closed due to Program Closing & Children Outside of Jurisdiction	4

f. Total No. of Findings Verified as Corrected by FFY 2008 APR Submission or Closed	307
g. Percent Verified as Corrected by APR Submission	99.6% (307/308)

- The table 1b below, as required by OSEP, provides data, by each SPP/APR compliance indicator and each Hawai'i monitoring priority indicator, on:
 - whether the findings were identified through Hawai'i's monitoring process (i.e., self assessment, data review) or by a dispute resolution process (e.g., complaints or hearings)
 - the number of EI programs issued findings in FFY 2007
 - the number of findings of non-compliance identified in FFY 2007
 - the number of findings verified as corrected within one year of notification.

Three additional columns have been added to the table to report on:

- the number of findings subsequently verified as corrected prior to the submission of the FFY 2008 APR
- the number of findings that were closed due to program closing and children no longer within the jurisdiction of the EIS program.
- the number of findings of non-compliance remaining.

The 1 finding of non-compliance remaining is related to Indicator 1. There were no findings identified by the dispute resolution process.

Table 1b. Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Hawaii Monitoring Priorities							
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # Findings of Non-compliance Identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # Findings on Non-compliance from (a) for which correction was Verified no later than One Year of Identification	# Findings Subsequently Verified as Corrected prior to the Submission of the APR	# Findings Closed due to Programs Closing and Children no longer within Program's Jurisdiction	# Findings of Non-Compliance Remaining
1. Percent of infants and toddlers with IFSPs who receive the early	Monitoring Activities: Self-Assessment	26	26	17	8	0	1

Table 1b. Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Hawaii Monitoring Priorities							
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # Findings of Non-compliance Identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Identification	# Findings Subsequently Verified as Corrected prior to the Submission of the APR	# Findings Closed due to Programs Closing and Children no longer within Program's Jurisdiction	# Findings of Non-Compliance Remaining
intervention services on their IFSPs in a timely manner.	Dispute Resolution: Complaints, Hearings	0	0	0	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline	Monitoring Activities: Data Review	16	16	16	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
8. Percent of all children exiting Part C who received timely transition planning: A. IFSPs with transition steps and services;	Monitoring Activities: Data Review	8	8	8	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0

Table 1b. Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Hawaii Monitoring Priorities							
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # Findings of Non-compliance Identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Identification	# Findings Subsequently Verified as Corrected prior to the Submission of the APR	# Findings Closed due to Programs Closing and Children no longer within Program's Jurisdiction	# Findings of Non-Compliance Remaining
8. Percent of all children exiting Part C who received timely transition planning: B. Notification to LEA, if child potentially eligible for Part B	Monitoring Activities: Data Review	8	8	7	1	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A-	0	0
8. Percent of all children exiting Part C who received timely transition planning: C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Data Review	14	14	14	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
Hawaii Monitoring Priorities	Timelines						
1a. Evaluation	Monitoring Activities:	14	14	14	0	0	0

Table 1b. Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Hawaii Monitoring Priorities							
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # Findings of Non-compliance Identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Identification	# Findings Subsequently Verified as Corrected prior to the Submission of the APR	# Findings Closed due to Programs Closing and Children no longer within Program's Jurisdiction	# Findings of Non-Compliance Remaining
within 45 days of referral.	Data Review						
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
1b. 1 st Annual IFSP within 1 year of Initial IFSP.	Monitoring Activities: Data Review	17	17	17	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
IFSP Development							
2a. Complete present levels of development	Monitoring Activities: Data Review	11	11	11	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
2b. Frequency, intensity, method, location, & payment	Monitoring Activities: Self-Assessment	21	21	21	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
2c. IFSP objectives complete	Monitoring Activities: Self-Assessment	29	29	28	0	1	0
	Dispute Resolution: Complaints,	0	0	0	N/A	0	0

Table 1b. Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Hawaii Monitoring Priorities							
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # Findings of Non-compliance Identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Identification	# Findings Subsequently Verified as Corrected prior to the Submission of the APR	# Findings Closed due to Programs Closing and Children no longer within Program's Jurisdiction	# Findings of Non-Compliance Remaining
	Hearings						
2d. Justification for services in non-natural environments	Monitoring Activities: Self-Assessment	12	12	11	1	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
3a. Appropriate individuals invited to Transition Conference	Monitoring Activities: Self-Assessment	8	8	8	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
4a. FERPA notice explained and provided/offered to the family	Monitoring Activities: Self-Assessment	29	29	28	0	1	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
4b. "Dear Family" explained and provided/offered to the family	Monitoring Activities: Self-Assessment	26	26	25	0	1	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
4c. Written Prior Notice	Monitoring Activities:	42	42	41	0	1	0

Table 1b. Correction of Non-Compliance Identified in FFY 2007 by SPP/APR Indicator and Hawaii Monitoring Priorities							
SPP/APR Indicator	General Supervision System Components	# EI Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # Findings of Non-compliance Identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # Findings on Noncompliance from (a) for which correction was Verified no later than One Year of Identification	# Findings Subsequently Verified as Corrected prior to the Submission of the APR	# Findings Closed due to Programs Closing and Children no longer within Program's Jurisdiction	# Findings of Non-Compliance Remaining
provided to the family	Self-Assessment						
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
4d. Consent for MDE	Monitoring Activities: Self-Assessment	12	12	11	1	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
-4e. Written consent prior to the initiation of services	Monitoring Activities: Self-Assessment	15	15	15	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0	N/A	0	0
TOTAL		308	308	292	11	4	1

Verification of Correction of Non-Compliance

When any child specific noncompliance occurred, the Program's respective EI Agency (EIS or PHNB) verified that each individual case of noncompliance was corrected. If the noncompliance was related to a timeline, the EI Program was directed to take the required action although late (e.g. complete the evaluation/assessment, provide the required service, and implement the transition conference). Current data is also reviewed to ensure that programs are correctly implementing the requirement that was in noncompliance.

Programs that had noncompliance were required to develop written corrective action plans (CAPs) that included strategies, benchmarks, and timelines and submit the CAP to their respective EI Agency for approval. Once approved, the program CAPs were submitted to their respective EI Agency on a monthly basis with current data to support their CAP and progress on strategies to change program protocol so that timelines were met. The EI Agencies submitted their CAP Summary Reports to the HDOH for verification that Programs were correctly implementing the specific regulatory requirement.

Once received, HDOH reviewed the CAP Summary Reports to determine if any follow-up was needed or if the reports were considered complete and were accepted. If, however, there are concerns related to the CAP Summary Report, HDOH would contact the EI Agency and/or the EI Program for additional information.

Required Follow-Up for Continuing Non-Compliance

HDOH provided Technical Assistance to the one local EIS program with continued non-compliance for timely services and required the following Corrective Actions. The Program Manager of the local EIS program must:

1. Develop a revised Corrective Action Plan (CAP) by the end of February 2010 and submit it to both the Agency Administrator and HDOH for review and approval.
2. Provide weekly data to show progress in correcting this area of non-compliance. In addition, progress in the CAP strategies also must be reported monthly.
3. If non-compliance is not corrected by the end of April 2010, HDOH will schedule a meeting with the Program Manager of the local EIS program, the Program Director who is responsible for the local EIS program, and the Agency Administrator to discuss continued non-compliance and initiate additional enforcement activities.

Previously Identified Non-Compliance

Findings Issued Prior to FFY 2006

- o All non-compliance identified prior to FFY 2006 was subsequently verified as corrected.

Findings Issued in FFY 2006

- o As a result of the required corrective actions, all findings of non-compliance were subsequently corrected.

Table 2. Summary of Correction of Non-Compliance of Findings Issued in FFY 2006	
a. No. of Findings of Non-Compliance Issued (FFY 2006)	82
b. No. of Findings Verified as Corrected within One Year of Notification (FFY 2007)	77
c. Percent Verified as Corrected within One Year of Notification (FFY 2007)	94% (77/82)
d. No. of Finding Subsequently Verified as Corrected	3
e. Total No. of Findings Verified as Corrected by FFY 2007 APR Submission	80
f. Percent Verified as Corrected by FFY 2007APR Submission	98% (80/82)

g. No. of Findings Subsequently Verified as Corrected after FFY 2007 APR Submission	2
h. Total No. of Findings Verified as Corrected by FFY 2008 APR Submission	82
i. Percent Verified as Corrected by FFY 2008 APR Submission	100% (82/82)

Response to June 1, 2009 OSEP Letter and Enforcement Action regarding it’s determination Needs Assistance 2 Determination

Refer to Introduction, pages 2-4.

Monitoring Process

The monitoring process described in last year’s APR has not changed. A description of the monitoring process which includes the process for selecting children for monitoring, called the HDOH Continuous Quality Improvement System (CQIS), can be found in the SPP.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress

The current data shows an improvement of 1% from FFY 2006 to FFY 2007, from 94% to 95%.

- FFY 2005 compliance was at 97%
- FFY 2006 compliance was at 94%
- FFY 2007 compliance was at 95%

HDOH implemented recommendations by WRR/NECTAC to address on-going non-compliance (refer to Introduction, pages 2-4). As HDOH enforced sanctions and provided individualized support, Programs were able to subsequently correct areas of non-compliance.

Completed Improvement Activities:

There were no activities that were completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Explore options to develop a statewide Part C data system for all Part C providers, to	1. A database for Part C programs to input their self-assessment data was completed and was used by all providers to support the SAM. a. The data was sent to the HDOH data person who ran reports for the

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
support monitoring and other data requirements.	Part C Lead Agency Quality Assurance Specialist to review. b. The data was inputted into a data sheet which was sent back to each Program for review. c. Any errors due to a data input error, with confirmation from the Program Manager was determined appropriate and corrected. d. Any errors due to any other reason, with appropriate documentation to verify the change, were corrected. 2. EIS completed its new data system for EIS providers; it currently collects data on specific compliance indicators.
	<p>Justification: A statewide Part C data system is no longer relevant because: 1) the Hawai'i's Part C eligibility no longer includes children at environmental risk and therefore the Healthy Start programs are no longer functioning; 2) PHN will only provide service coordination to the children they currently service coordinate. Therefore once these children age out they will no longer Part C service coordinators and will not need a Part C database.</p>
Educate referral sources (e.g., pediatricians) about Hawaii's early intervention system, especially regarding transdisciplinary services, so that they provide accurate information to families about how services are provided	A preliminary discussion occurred with the Family Health Services Division's medical consultant on the need to update pediatricians and other primary care physicians on changes in the early intervention system, including changes in eligibility and provision of services.
	<p>Justification: This activity was moved to Indicator 5 & 6 as it is more relevant to Child Find Activities.</p>

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for Correction of Noncompliance.

Resources:

There are no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
Develop and implement procedures to include HEICC and family members in the monitoring process.		X	X	X	X	X	<p>Continuing</p> <ol style="list-style-type: none"> 1. HEICC and family members are not currently included in the monitoring process. 2. Discuss with HEICC members how HEICC and family members can best support the provision of quality early intervention services. 3. Identify appropriate activities for HEICC members and families (e.g., family members may interview families about their early intervention experiences.) 	
Explore options to utilize a monitoring cycle based on monitoring results.			X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Each Part C Program completed the SAM tool to provide data on their compliance with Part C. <p>Continuing</p> <ol style="list-style-type: none"> 1. Review data to determine if it is appropriate to implement a monitoring cycle for programs that are continually successfully in meeting all indicators for a specific number of consecutive years. 2. Review OSEP requirements to determine if implementing a monitoring cycle meets monitoring requirements. 	
Define, develop, and implement different levels of sanctions, based on monitoring results, to support timely correction of non-compliance.			X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> 1. Programs developed Corrective Action Plans for any indicator that did not meet 95% compliance. 2. Programs provided monthly data to its Agency Administrator until correction of non-compliance occurred and was verified. 3. Sanctions were developed and implemented: <ol style="list-style-type: none"> a. Programs/sections with on-going non-compliance were provided additional technical assistance to identify root causes of the non-compliance. b. Correction data requirements were based on the level/percentage of non-compliance (i.e., the number of correct charts or months of data). The lower the percentage, the longer the data was reported to its Agency Administrator (e.g., if less than 50%, the program must report monthly until there are 3 	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
							<p>consecutive months at 100%. At that point, that specific indicator is considered corrected.</p> <p>4. Agency Administrators met monthly with the Part C Lead Agency Quality Assurance Specialist, and provided Program/Section progress and correction data.</p> <p>5. WRRC and NECTAC, through their technical assistance, assisted EIS in developing new sanctions for EIS programs who did not correct their areas of non-compliance. Sanctions were developed for programs at both their 2nd and 3rd year of not correcting their areas of non-compliance. Based on preliminary data, the new sanctions have been successful.</p> <p>Continuing</p> <p>1. EIS will continue to monitor programs that have recently reached corrected non-compliance to assure that they continue to provide timely services.</p>	
<p>Gather and analyze data to determine reasons for vacancies, and make recommendations to support recruitment and retention.</p>			X	X	X	X	<p>Completed to Date</p> <p>1. An e-mail was sent to the Executive Directors of the Purchase of Service EI programs to identify reasons for vacancies. The following information was received from 4 of the 6 Executive Directors.</p> <p>a. <u>Salaries</u>. All respondents indicated that inadequate salaries were the major reason for vacancies. For example, one noted that they offer salaries of about \$56,000 for therapists; on the mainland they are making \$80-100,000. Therapists in the private section can make \$15-20,000 more.</p> <p>b. <u>10-Month Schedule for DOE therapists</u>. All respondents noted that in addition to the DOE therapists having higher salaries, they also have a 10-month schedule which allows them to do additional work during the summer months for extra pay.</p> <p>c. <u>Natural environment requirements</u>. One respondent reported increased hiring difficulty for his programs that serve families in low SES, drug areas, and low income housing. Although safety is paramount and no one is expected to put themselves in danger, when prospective employees are driven through the areas those programs serve, this is a deterrent for some</p>	

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
							<p>potential staff to accept positions.</p> <p>Continuing</p> <ol style="list-style-type: none"> 1. With the current and expected budget cuts, increasing salaries is currently not an option. Meeting with Executive Directors will be planned to discuss recruitment/retention strategies that have been successful and how the state can support them. 2. Although the Executive Directors noted that recruitment bonuses were effective and because they were one-time costs and not re-occurring, the reduction of the EIS budget has eliminated providing these additional funds to programs. Also effective but eliminated was providing a “finder’s fee” for staff who identified individuals to fill vacant positions. 3. Further discussion is needed on recruitment/retention strategies that are at no cost to the state. 	
<p>For long-standing non-compliance, require the Agency (or its Quality Assurance staff person) to work with the specific program/section to use the local contributing tool developed by NECTAC and develop a comprehensive Corrective Action Plan that addresses the long-standing non-compliance.</p>				X	X	X	<p>Completed</p> <ol style="list-style-type: none"> 1. EIS required 8 programs to complete the local contributing tool and develop a Corrective Action Plan to address the non-compliance. As a result 5 programs have subsequently corrected their non-compliance. 2. WRRC and NECTAC, through their technical assistance, assisted EIS in developing new strategies for EIS programs at both their 2nd and 3rd year of not correcting their areas of non-compliance. Based on preliminary data, the new sanctions have been successful. <p>Continuing</p> <ol style="list-style-type: none"> 1. EIS will continue to monitor programs to determine if the Corrective Action Plans and increased strategies are effective in correcting the long-term non-compliance. 	
<p>Randomly verify monitoring results to assure accurate results.</p>				X	X	X	<p>Continuing</p> <ol style="list-style-type: none"> 1. As EIS completed the monitoring for all EIS programs this year, there was no need to verify the monitoring results for EIS programs 2. Randomly verifying monitoring results will be initiated next year. 	

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Applied:
 [1.1(0) + 1.1 (1) divided by 1.1] times 100
 Percent = 1/1 = 100%

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

- There was one signed written complaint during FFY 2008 that was resolved within the extended timeline.
- Data is consistent with Table 4 that was previously submitted to WESTAT.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress:

- The target of 100% was again met.

Completed Improvement Activities:

There were no activities completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Revised Improvement Activities:

The following table includes revised improvement activities that were developed to support compliance for Timely Resolution of Written Complaints.

Resources:

There were no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
<p>Design and implement various creative strategies (e.g., videotapes, DVDs, etc.) to support training on Part C requirements for families and to increase parents' awareness of their procedural safeguards.</p>		X	X	X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> The title of the "Dear Family" brochure was changed to "Family Rights" so that families would immediately know the purpose of this brochure. The "Family Rights" brochure, which provides information on family rights, was translated into 9 languages. <p>Continuing</p> <ol style="list-style-type: none"> The Public Awareness staff person will identify a group of family members (e.g., ICC parents) to use as a resource to determine the most appropriate and useful materials to develop. The funds expected to be used to create a DVD on early intervention is no longer available and it is unknown if other funds will be available. Research on other DVDs developed by other states or technical assistance will be initiated to identify public awareness strategies that are appropriate for Hawaii's Part C families. The EIS Public Awareness specialist will be responsible to create the DVD, with input from staff and families. 	

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Applied: Not applicable, as there were no due process hearing requests.

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

- There were no due process hearing requests.
- Data is consistent with Table 4 that was previously submitted to WESTAT.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress:

The data for this year is consistent with last year's data – because there was no due process requests there were no due process requests that had to be adjudicated within the applicable timeline.

Completed Improvement Activities:

There were no activities completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

New Improvement Activities:

The following table includes new improvement activities that were developed to support compliance for fully adjudicated due process hearing requests in a timely manner.

Resources:

There were changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATION
<p>Design and implement various creative strategies (e.g., videotapes, DVDs, etc.) to support training on Part C requirements for families and to increase parents' awareness of their procedural safeguards.</p>				X	X	X	<p>Completed to Date</p> <ol style="list-style-type: none"> The title of the "Dear Family" brochure was changed to "Family Rights" so that families would immediately know the purpose of this brochure. The "Family Rights" brochure, which provides information on family rights, was translated into 9 languages. <p>Continuing</p> <ol style="list-style-type: none"> The Public Awareness staff person will identify a group of family members (e.g., ICC parents) to use as a resource to determine the most appropriate and useful materials to develop. The funds expected to be used to create a DVD on early intervention is no longer available and it is unknown if other funds will be available. Research on other DVDs developed by other states or technical assistance will be initiated to identify public awareness strategies that are appropriate for Hawaii's Part C families. The EIS Public Awareness specialist will be responsible to create the DVD, with input from staff and families. 	

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Applied: Not applicable, as Part B due process procedures were not adopted.

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

- Not applicable, as Part B due process procedures were not adopted.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.
Applied: Not applicable, as there were no mediation requests.

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

- There were no mediation requests
- Data is consistent with Table 4 that was previously submitted to WESTAT.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FY 2008:

The data for this year is consistent with last year’s data – there were no mediation requests; therefore there were no mediation agreements.

Completed Improvement Activities:

The following table includes improvement activities that were completed. The Progress/Status column highlights what was done to address the improvement activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Develop and implement written guidelines to support Care Coordinators and other staff in explaining Part C procedural guidelines (including mediation procedures) to families.	<ol style="list-style-type: none"> 1. Information is provided at the Part C Orientation regarding the necessity of explaining Part C procedural guidelines, including mediation procedures, at Intake. 2. Written procedures, including forms for family member, on due process, complaints, and mediation were developed and disseminated to all Part C early intervention programs to share with families.
Revise the “Dear Family” brochure and add the Parent Training	<ol style="list-style-type: none"> 1. The title of the “Dear Family” brochure was changed to “Family Rights” so that families would immediately know the purpose of this brochure. 2. The “Family Rights” brochure was translated into 9 languages; the

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Institute as a contact if families have questions about early intervention services.	"Parent Training Institute" was added as a contact in the brochure.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Develop a statewide Part C database to replace current individual Agency databases (EIS, PHNB, HS)	<ol style="list-style-type: none"> 1. A database for Part C programs to input their self-assessment data was completed and was used by all providers to support the SAM. <ol style="list-style-type: none"> a. The data was sent to the HDOH data person who ran reports for the Part C Lead Agency Quality Assurance Specialist to review. b. The data was inputted into a data sheet which was sent back to each Program for review. c. Any errors due to a data input error, with confirmation from the Program Manager was determined appropriate and corrected. d. Any errors due to any other reason, with appropriate documentation to verify the change, were corrected. 2. EIS completed its new data system for EIS providers; it currently collects data on specific compliance indicators.
	<p>Justification: A statewide Part C data system is no longer relevant because: 1) the Hawai'i's Part C eligibility no longer includes children at environmental risk and therefore the Healthy Start programs are no longer functioning; 2) PHN will only provide service coordination to the children they currently service coordinate. Therefore once these children age out they will no longer Part C service coordinators and will not need a Part C database.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for Mediation.

Resources:

There were no changes to the resources.

APR Template – Part C (4)

IMPROVEMENT ACTIVITY	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
Regularly train Mediation Center staff on Part C requirements in case mediation is requested.			X	X	X	X	<p>Continuing</p> <ol style="list-style-type: none"> Once the Part C regulations are finalized and the Part C Orientation training is updated, the Mediation Center will be contacted to develop a process to update them on Part C requirements. Once a process is developed, training for the Mediation Center staff will be regularly implemented. 	

Part C State Annual Performance Report (APR) for FFY 2008

Overview of the Annual Performance Report Development:

Refer to Overview, pages 1-4.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

- a. Submitted on or before due dates (February 1 for child count and settings and November 1 for exiting and dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the “Indicator 14 Data Rubric” for reporting data for this indicator.

Applied:

- a. State reported data, including 618 data, State performance plan, and annual performance reports was submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution).
- b. State reported data, including 618 data, State performance plan, and annual performance reports was accurate in all areas.

Percent = 100%

FFY	Measurable and Rigorous Target
2008	100%

Actual Target Data for FFY 2008:

The following required tables demonstrate that Hawaii’s Part C program was at 100% compliance for timely and accurate data.

SPP/APR Data - Indicator 14			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2

SPP/APR Data - Indicator 14			
APR Indicator	Valid and Reliable	Correct Calculation	Total
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8a	1	1	2
8b	1	1	2
8c	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	N/A	N/A	0
13	1	1	2
Subtotal			28
APR Score Calculation	Timely Submission Points (5 pts for submission of APR/SPP by February 1, 2010)		5
	GRAND TOTAL		33

618 Data - Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/09	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/1/09	1	1	1	1	4
Table 3 - Exiting Due Date: 11/1/09	1	1	1	N/A	3
Table 4 - Dispute Resolution Due Date: 11/1/09	1	1	1	N/A	3
				Subtotal	14

618 Score	Grand Total (subtotal x 2.5)	35
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Indicator #14 Calculation	
A. APR Grand Total	33.00
B. 618 Grand Total	35.00
C. APR Grand Total (A) + 618 Grand Total (B) =	68.00
Total NA in APR	2.00
Total NA in 618	0.00
Base	68.00
D. Subtotal (C divided by Base) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Explanation of Progress:

- FFY 2005 compliance was at 84%.
- FFY 2006 compliance was at 100%.
- FFY 2007 compliance was at 100%.
- FFY 2008 compliance was at 100%

FFY 2008 compliance continued to be 100%, the same as FFY 2006 and FFY 2007.

Completed Improvement Activities:

There were no activities completed.

Improvement Activities Removed:

The following table includes improvement activities that were removed from this Indicator. The Progress/Status column highlights what was done to address the improvement activity and the justification for discontinuing the activity.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
Develop a statewide Part C database to replace current individual Agency databases (EIS, PHNB, HS)	<ol style="list-style-type: none"> 1. A database for Part C programs to input their self-assessment data was completed and was used by all providers to support the SAM. <ol style="list-style-type: none"> a. The data was sent to the HDOH data person who ran reports for the Part C Lead Agency Quality Assurance Specialist to review. b. The data was inputted into a data sheet which was sent back to each Program for review. c. Any errors due to a data input error, with confirmation from the Program Manager was determined appropriate and corrected.

IMPROVEMENT ACTIVITY	PROGRESS/STATUS
	<p>d. Any errors due to any other reason, with appropriate documentation to verify the change, were corrected.</p> <p>2. EIS completed its new data system for EIS providers; it currently collects data on specific compliance indicators.</p> <p>Justification: A statewide Part C data system is no longer relevant because: 1) the Hawai'i's Part C eligibility no longer includes children at environmental risk and therefore the Healthy Start programs are no longer functioning; 2) PHN will only provide service coordination to the children they currently service coordinate. Therefore once these children age out they will no longer Part C service coordinators and will not need a Part C database.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009.

Continuing and New Improvement Activities:

The following table includes continuing and new improvement activities that were developed to support compliance for state reported timely and accurate data (618, SPP and APR).

Resources:

There were no changes to the resources.

APR Template – Part C (4)

Improvement Activity	'05	'06	'07	'08	'09	'10	PROGRESS/STATUS	REVISION WITH JUSTIFICATIONS
Refine the monitoring data verification process (i.e., schedule, selection of records, etc)				X	X	X	<p>Continuing</p> <p>1. Once the monitoring is completed for this APR submission, the monitoring process, including the data verification process, will be reviewed to determine how it can be improved for next year's monitoring.</p>	