

NEW YORK STATE
DEPARTMENT OF HEALTH
DIVISION OF FAMILY HEALTH
BUREAU OF EARLY INTERVENTION

Annual Performance Report for the NYS Early Intervention Program

2011 - 2012

May 2013



New York State Department of Health

Division of Family Health

Bureau of Early Intervention

Part C

Annual Performance Report (APR) for

FFY 2011 – July 1, 2011 through June 30, 2012

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Overview of the Annual Performance Report Development:

Development of the Annual Performance Report:

Data used in this Annual Performance Report (APR) and New York’s revised State Performance Plan (SPP) were collected through the following process, which is described in greater detail in the SPP. Data necessary to meet the 618 reporting requirements are generated primarily from the Kids Integrated Data System (KIDS), which is used by municipalities to collect, maintain and update local data regarding the statewide Early Intervention Program (EIP). Required data are submitted by municipalities to the New York State Department of Health (Department) five times each year by all 58 localities on or before specified timeframes required through the Department’s contract with municipalities for funds to administer the EIP.

KIDS data submissions are monitored to ensure that they are submitted by municipalities with sufficient time for the Department to follow up late submissions, complete data analyses, and submit timely reports. The submissions are then reviewed for accuracy, completeness, potential problems with the data, and/or inconsistencies from one data transfer to the next. Problems with file transfers and data submissions are identified, investigated and corrected with municipalities, as appropriate.

Starting in mid-2010, New York State began deploying the New York Early Intervention System (NYEIS). NYEIS is a state-of-the-art, web-based data system. NYEIS was initially launched in two municipalities in October 2010. Since then, several municipalities have begun using NYEIS each month. As of December 2012, all 58 municipalities are using the NYEIS system. Upon launch, most municipalities began entering data for new referrals to the EIP into NYEIS, while data for infants and toddlers who were already entered into KIDS, continued to be entered into KIDS.

Additional data used in the SPP and APR come from other Department software applications, including those used to process claims from municipalities for reimbursement of the State share of the costs for early intervention services (the Fiscal System – “EIFS”), a provider approval application which maintains data on provider information and status, and data obtained from the Department’s monitoring contractor resulting from on-site monitoring reviews. Collectively, these data sets provide the Department with a wealth of data on New York State’s EIP. Data submitted in this report reflect Federal Fiscal Year (FFY) 2011, from July 1, 2011 through June 30, 2012.

In addition to submitting an APR, IDEA requires each State to annually report on the performance of local programs. In New York, local programs are defined as the 57 counties and New York City, which are responsible for the local administration of the EIP. Sampling or monitoring data are being used for Indicators #3, 4 and 8. For these sampled indicators, each municipality's performance will be examined and reported to the public at least once during the eight-year period covered by the SPP.

Data analysis, monitoring, technical assistance/training, and other quality improvement activities are being implemented on an ongoing basis with all local programs required to improve local performance. These improvement activities are further described in the SPP and APR.

The FFY 2011 APR was presented to the New York State Early Intervention Coordinating Council (EICC) at its quarterly meeting on December 4, 2012. Details regarding the APR development were explained, targets reviewed, and statewide rates for the indicators were discussed. The data for New York State's FFY 2011 APR were approved by the EICC, which has agreed to use the APR in lieu of its required annual report. The appropriate form, signed by the New York State EICC's chairperson, is included in New York State's submittal to the Office for Special Education (OSEP).

SPP/APR Dissemination and Reporting on Local Program Performance:

The APR is the mechanism that New York will use to report on progress in meeting the measurable and rigorous targets established in its SPP.

The APR will be distributed in print to members of the EICC, provider representatives and municipalities for dissemination to EIP providers and parents. Public notice of the revised SPP and APR, in print and media format, will also be promulgated by the Department. Printed and electronic copies of the revised SPP and APR will be available at no cost to any citizen of the State requesting the document. The revised SPP and APR will be posted on the Department's public web site at: http://www.nyhealth.gov/community/infants_children/early_intervention/index.htm. The web page is easily located through a search of the website or by following content-specific links.

Local performance data for FFYs 2005, 2006, 2007, 2008, 2009, and 2010 are available on the Department's public web site at the following address: (http://www.nyhealth.gov/statistics/community/infants_children/early_intervention/).

Local programs were also issued determinations indicating their compliance with the requirements of IDEA for the FFY 2010 reporting period on February 1, 2013. Each municipality received one of the following determinations: "meets requirements," "needs assistance," "needs intervention," or "needs substantial intervention." The determinations were based upon each local program's performance with the required federal indicators. New York requires correction for every instance in which local programs are not fully compliant at the 100 percent level, and this correction is required to occur within one year.

Technical Assistance Obtained by New York

At the direction of OSEP, as part of its determination that New York needs assistance for the fourth consecutive year in order to comply with the requirements of IDEA, New York is required to report on the technical assistance sources from which the State received assistance and the actions New York has taken as a result. New York has obtained technical assistance as part of its efforts to improve Indicators # 1, 7, 8 A-C, and 9. New York has obtained technical assistance from the following sources in the last two years:

Data Accountability Center (DAC)
Northeast Regional Resource Center (NERRC)
U.S. Department of Education, Office of Special Education Programs (OSEP)
Numerous websites including <http://www.rfcnetwork.org/>

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The following chart details focused occasions on which technical assistance was provided by one or more of these sources:

2011

Date	Sponsor	Description
1/10/11	WESTED	State Special Educ Advisory Panels (SAPs) & State Interagency Coordinating Councils (SICCs)
1/13/11	NERRC	Teleconf: NY Part C's Ann'l Calendar of SPP/APR General Supervision Activities
1/31/11	OSEP	APR/SPP TA Conf Call w/Hillary Tabor
2/25/11	OSEP	APR/SPP TA Conf Call w/Hillary Tabor
3/10/11	OSEP	APR/SPP TA Conf Call w/Ruth Ryder
3/21/11	WESTED	State Agency & Parent Ctr Collaboration increasing ID of under-served Infants, Toddlers & Young Children
4/15/11	OSEP	Conf Call w/Alma McPherson: NYS Part C State's Opportunity for Clarification of SPP/APR Data
5/16/11	WESTED	ESEA Reauthorization & Implications for Students w/Disabilities
6/15/11	OSEP	Conf Call w/Hillary Tabor: Use of ARRA EI NYS Funds for Direct Services
6/22/11	NECTAC	ECO Webinar: Analyses of 2009-10 Child Outcomes Data for Pt C (C3)
7/13/11	CADRE Dispute Resolution Ctr	Teleconf: Engaging w/Stakeholders: Exemplary Practices
7/25/11	NERRC	On-site Visit: Dialogue w/Part C Coordinators & Staff Re: Local EIPs & Budgets
7/26/11	Div for Early Childhood	Webinar for Part C Coordinators: Role of Spec Instruction in EI
8/1-3/11	OSEP	Attend OSEP Leadership Mega Conference, Arlington VA
9/6/11	OSEP	Conf Call w/Educ Sec'y: IDEA Part C Final Regs
9/22/11	ICAAP	Conf Call: Part C Coord Nat'l Training-Coordinating Care between EI & Primary Care Medical Home
9/22/11	ITCA	Conf Call: New Finance Regulations
9/23/11	ITCA	Conf Call: RTT Early Learning Challenge
9/26/11	ITCA	Conf Call: Child Find/Public Awareness & Evaluation & Assessment New Regulations
10/3/11	ITCA	IFSP & Transition New Regulations
10/4/11	NERRC & NEPACT	Joint Webinar for Lead Agency Coord on New Part C Regulations
10/13/11	OSEP	Conf Call for Lead Agency Coord
10/19/11	AMCHP	Conf Call for Region II: Updates-Legislative, Operations, Autism
10/26/11	OSEP	Conf Call: Implementing New Part C Regs: Use of Public Benefits or Insurance & Private Insurance
11/2/11	NERRC	Conf Call: State to Local Monitoring Workgroup
11/10/11	OSEP	TA Conf Call to Part C Coordinators
11/14/11	OSEP	APR/SPP TA Conf Call w/ Hillary Tabor
11/16/11	OSEP	All Day Webinar: Part C Regs
12/6/11	OSEP	APR/SPP TA Conf Call w/Hillary Tabor
12/8/11	OSEP/MSIP	Conf Call: Changes FFY 2010 Part C&B SPP/APR Pkgs
12/16/11	NERRC	Teleconf: Discuss Part C Requirements

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2012

Date	Sponsor	Description
01/10/2012	OSEP	Conference Call w/ Hillary Tabor - Clarification on APR
1/19/2012	OSEP	Conference Call w/ Hillary Tabor - Clarification on APR
1/20/2012	DAC/ NECTAC	Discussion of Child Count Comparison of Cumulative and Point in Time Counts
1/15/2012	OSEP	OSEP TA Call on Part C Application
3/2/2012	OSEP	OSEP Brief Conference Call
3/8/2012	OSEP	OSEP Monthly Conference Call
3/28/2012	NERRC	NERRC Part C TA- Application and Part C regulations re: Child Find
4/10/2012	SPP/APR	NY (Part C)- State's Opportunity for Clarification of SPP/APR Data
4/12/2012	OSEP	OSEP Clarification Call
4/25/2012	NERRC	NERRC Part C TA Support call Part C Regulations re Transition and- Move to Eval/ Assessment & IFSP
5/18/2012	NERRC	NERRC Conference Call- Results Driven Accountability Process
6/6/2012	OSEP	Conference Call w/ Hillary Tabor -Clarification on Part C Regulations
6/13/2012	ITCA	Lunch Meeting w/ Jamie Kilpatrick and Maureen Greer
6/14/2012	OSEP/MISP	Monthly Conference Call w/ OSEP/MISP
6/27/2012	ITCA	Conference Call w/ Maureen Greer Re: Information on State Fiscal Agents
7/11/2012	OSEP	Preparations for OSEP Call on 7/12
7/12/2012	OSEP	Conference Call w/OSEP for review of AIM
7/12/2012	OSEP/MISP	OSEP/MISP Conference Call
7/26/2012	OSEP	Discussion of OSEP Presentation
7/30/2012	OSEP	OSEP Conferences Washington DC
7/31/2012	OSEP	OSEP Conferences Washington DC
8/1/2012	OSEP	OSEP Conferences Washington DC
8/1/2012	CADRE	Provider Approval and Due Process unit staff access web based resources available through the National Center on Dispute Resolution in Special Education.
8/16/2012	OSEP	Call w/ Hillary Tabor to discuss the Fiscal CrEAG
8/28/2012	NERRC	NERRC State Visit
9/13/2012	OSEP/MISIP	Monthly Conference Call
9/14/2012	OSEP	Conference Call w/Hillary- Clarification on Part C Regulations
10/11/2012	OSEP/MSIP	OSEP/MSIP Conference Call
10/18/2012	OSEP	Call w/ Hillary Tabor - Part C Regulations
11/8/2012	OSEP/MSIP	Monthly Conference Call
12/3/2012	OSEP	Call w/ Hillary Tabor re: Clarification Part C re Third Party Billing and Consent
12/19/2012	OSEP	OSEP call on SPP/APR
12/21/2012	OSEP	Conference Call w/ Hillary Tabor Re: Clarification Part C Reg

As a result of technical assistance, New York has made several modifications, including modifying data collection strategies for Indicator 8, revising the method of reporting findings of noncompliance as part of Indicator 9, and revising and maintaining a two-pronged verification of correction of non-compliance

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system, which includes a self-assessment process, on-site follow-up reviews, provision of individualized technical assistance, and submission of a subsample of child records. New York has also assessed the process to review complaints and prioritized the timely resolution of complaints.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	100%

Actual Target Data for FFY 2011:

63.0% (20,697/32,857)
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Infants and Toddlers with IFSPs who receive Early Intervention Services in a Timely Manner:

a. Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	20,697
b. Total number of infants and toddlers with IFSPs	32,857
Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (Percent = [(a) divided by (b)] times 100)	63%

These data include infants and toddlers with new services authorized on a non-interim Individualized Family Service Plan (IFSP) within the reporting period of July 1, 2011 to June 30, 2012, based on services entered in the Kids Integrated Data System (KIDS) and New York Early Intervention System (NYEIS).

There were 32,857 infants and toddlers with IFSPs with new services authorized. Of these infants and toddlers, 20,697 (63%) received timely services.

KIDS does not capture reasons for delayed services. NYEIS captured reasons for some of the services that were delayed. There were 219 infants and toddlers whose services were delayed due to an exceptional family circumstance. These infants and toddlers have been included in the numerator and denominator as allowed by OSEP.

In addition to the delays due to exceptional family circumstances, non-discountable delays included difficulty assigning a service provider and other local program administrative reasons.

All 32,857 infants and toddlers with new services authorized on their IFSPs received those new services within one year of the date of authorization of the service.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

There was a decrease of twenty-two percentage points for this indicator from FFY 2010 (85%) to FFY 2011 (63%). New York State did not achieve the 100% compliance target.

Because of a strong commitment to ensure early intervention services are delivered as early as possible, New York has set a high standard for timely delivery of services: 30 days from the date the parent signs the IFSP. An analysis of a representative subset of the data for this indicator revealed that the median number of days late for 3,090 late services was 54.5 days. These data indicate that the majority of children receive new services within two months of an identified need for the service. As discussed above, all 32,857 infants and toddlers with new services authorized on their IFSPs received those new services within one year of the date of authorization of the service.

During this APR reporting period, data for timeliness of services is from both the legacy KIDS and NYEIS. There is no capacity in KIDS to collect reasons for delay in service delivery. Although business requirements for NYEIS include the collection of reasons for delay in services, these data are currently being collected intermittently due to a system bug recently identified in NYEIS. The Department is working with its contractor/systems integrator, CMA Consulting Services, to fix the bug in NYEIS to ensure that reasons for delay in new services are captured for every instance where such a delay has occurred.

Of the 321 infants and toddlers with late services for whom a reason for delay was collected, 219 infants and toddlers (68%) had a delay due to exceptional family circumstances. There were 12,160 infants and toddlers with delayed services and no reason for delay captured. The State's overall performance on this indicator would improve to 88% if delay reasons had been captured and two-thirds of those infants and toddlers for whom this information is not available experienced a delay in receipt of services due to exceptional family circumstances.

The Department presented the FFY 2011 data to the Early Intervention Coordinating Council (EICC) at the EICC quarterly meeting on December 4, 2012. The EICC has prioritized the discussion of this compliance indicator. In-depth discussion on this indicator, including presentation of additional data and discussion on improvement activities will be included on the agenda for the June 2013 EICC meeting.

The Department is continuing to analyze State and local data and to work with the local programs to understand and analyze capacity shortages among specific qualified professionals.

Local determinations based on FFY 2010 local data have been made and local programs have been notified of their status. The Department's method for issuing local determinations is heavily weighted toward compliance indicators. Local programs that do not meet requirements are required to take corrective actions based on their determination status, as follows:

- All local programs that do not meet requirements must participate in Department-sponsored all-county conference calls.
- Local programs with a determination of “Needs Assistance” are required to examine, revise, and upon request submit to the Department, revised policies and procedures with respect to the relevant indicators, including indicator 1.
- Local programs with a repeat determination of “Needs Assistance” are required to contact an assigned Bureau of Early Intervention (BEI) staff member to obtain technical assistance on revising policies and procedures related to the relevant indicators, including indicator 1. These local programs must convene a meeting of their Local Early Intervention Coordinating Council (LEICC) to review the determination and obtain input on revising policies and procedures related to the relevant indicators. The LEICC meeting agenda, list of attendees and meeting minutes must be submitted to the Department within 90 days, with an assurance that policies and procedures were revised in order to improve performance and comply with federal requirements within one year.
- Local programs with a determination of “Needs Intervention” are required to submit to BEI within 60 days a corrective action plan (CAP) including revised policies and procedures and the steps to be taken to comply with federal requirements within one year.

The State received technical assistance from DAC and NERCC, including a timeline to notify local programs of these findings. Notification of findings based on noncompliance in FFY 2007 and 2008 local data was initially delayed. There were 3 instances of local programs with noncompliance for timely services based on local data for FFYs 2007, 2008, and 2009. Notifications of these findings were sent to the local programs in December 2011. These findings, which were made in FFY 2011, will be addressed in the FFY 2012 APR.

NYEIS provides the Department with real-time data on service delivery by integrating service authorization, billing, and payment information in one database. In comparison, data from legacy KIDS must be analyzed in conjunction with claiming data submitted by municipalities on a time-lag basis. Slippage in this indicator may in part be attributed to more timely and complete data on service utilization now available for increasing number of infants and toddlers, including all infants and toddlers residing in New York City, whose data reside in NYEIS. The timely and rich data set available through NYEIS will assist the Department and local programs in the prevention of delays in service delivery, and timely identification of delays and rapid response by local programs to secure services for infants and toddlers and their families.

In addition, the Department reviewed data analyses completed for this indicator for FFY 2010 and determined that all services on infants’ and toddlers’ IFSPs were included in the analyses. The OSEP measurement table requires that only new services on IFSPs be included in the analyses. Department staff has determined that had the analysis for FFY 2010 been limited to new services on IFSPs, the percent of infants and toddlers receiving timely services for FFY 2010 would have been 76%.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2010 for this indicator:

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2009, through June 30, 2010)	4
2. Number of FFY 2010 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the local program of the finding)	3
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

N/A

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Systemic noncompliance is identified and correction is verified at the local program level by monitoring reviews, analysis of local data, and dispute resolution. For Indicator #1, there were 4 findings of noncompliance issued in FFY 2010. Three of these findings were verified to have been corrected within one year. One was corrected, but verification of correction was later beyond the one year timeline. The methods used to verify the correction of these 4 findings are discussed in the next section.

The findings were verified as corrected at 100% compliance at the systemic level based on a subset of child records reviewed. Additionally, for each child with the original finding of noncompliance identified, it was also verified that this child received all of their EI services, although beyond the 30 day timeline.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

New York State has fully implemented its rigorous verification of correction process which consists of the following:

- Identification of findings of noncompliance with IDEA requirements are determined during on-site monitoring reviews conducted by New York State’s contractor;
- All findings of noncompliance are identified and formal reports of findings are issued within 90 days of the on-site review;
- While conducting the on-site review, the contractor determines that each individual case of noncompliance, unless the child is no longer within the jurisdiction of the local program, has been corrected within one year, for example, that the CPSE was notified within 120 days of the child’s potential transition to preschool services; or the child is no longer within the jurisdiction of the EI program;
- Providers who have findings of noncompliance identified, are required to submit a CAP within 45 days of receipt of their monitoring report, which requires all information that is described earlier in this section, including root cause of noncompliance and activities they will implement to correct the noncompliance;
- All CAPs are reviewed and approved by New York State staff within 60 days of receipt, and providers are notified in writing, if their CAP is approved or not;

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- Written technical assistance is provided by New York State staff which is included in CAP response letters, as needed;
- Targeted technical assistance is provided via phone call by New York State staff for providers or municipalities who demonstrate difficulty in providing sufficient activities to correct their noncompliance;
- New York State contract staff conducted on-site verification reviews within 60-90 days subsequent to approval of the CAP for those providers with significant findings of noncompliance, to determine if CAP activities have been fully implemented and correction of noncompliance at 100% can be verified. A subset of additional child records were reviewed to verify correction of noncompliance;
- New York State also requires submission of a subset of child records within 90-100 days of approval of the CAP, for those providers who have minimal findings of noncompliance, to determine if CAP activities have been fully implemented and correction of noncompliance can be verified at 100%.

Correction of FFY 2009 Findings of Noncompliance (if applicable):

There are no outstanding findings of noncompliance from FFY 2009.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

1. Number of remaining uncorrected FFY 2008 findings of noncompliance noted in OSEP's June 2011, FFY 2008 APR response table for this indicator	54
2. Number of remaining FFY 2008 findings the State has verified as corrected	43
3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)]	11

Verification of Correction of Remaining FFY 2008 findings:

All infants and toddlers received new services on their IFSP within one year. The infants and toddlers from the FFY 2008 findings are no longer within the jurisdiction of the Part C Early Intervention Program.

There were 54 findings of noncompliance in FFY 2008 that remained uncorrected as of the FFY 2010 APR. Forty three of these findings have been verified as subsequently corrected (i.e. they were corrected, but not within one year of notification); 11 remain uncorrected at this time.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

All infants and toddlers received services on their IFSP within one year. The infants and toddlers from the FFY 2007 findings are no longer within the jurisdiction of the Part C Early Intervention Program.

There were 54 findings of noncompliance in FFY 2007 that remained uncorrected. These findings were for the same local programs as reported in FFY 2008. Of these 54 findings, 43 have been verified as subsequently corrected (i.e. corrected, but not within one year of notification). The remaining FFY 2007 findings for timely service in 11 local programs remain uncorrected at this time.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 or earlier:

The Department verified correction of findings by first confirming that all of the infants and toddlers received the services authorized on the IFSP within one year. All of the infants and toddlers did receive services within one year. For findings from FFY 2008 and 2007, the infants and toddlers are no longer within the jurisdiction of the Part C Early Intervention Program.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in the FFY subsequent to the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected, but had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the State is in compliance with the timely service provision requirements in 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1).*

NY's Response: While 100% compliance with timely service provision was not achieved, the State is dedicated to providing timely, high quality services to all eligible infants and toddlers. The reasons for delays were not collected in KIDS or NYEIS. Therefore, the calculated compliance indicator is potentially lower than the OSEP defined indicator, which allows for discounting for exceptional family circumstances.

2. *OSEP's Request: Because the State reported less than 100% compliance for FFY2010, the State must report on the status of correction of noncompliance reflected in the data the State reported for this indicator.*

NY's Response: There were four findings of noncompliance for FFY 2010. Three findings were corrected within one year, and one was corrected but not within one year. The Department will continue its efforts to monitor and analyze data from local programs to improve the timeliness of services.

3. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the remaining 54 uncorrected noncompliance findings identified in FFY 2008 and the remaining 54 uncorrected noncompliance findings identified in FFY 2007 were corrected.*

NY's Response: Forty-three of the 54 previous uncorrected findings of noncompliance have been corrected. There are eleven noncompliance findings from FFY 2007 and 2008 that have not been corrected. The Department is prioritizing working with the 11 programs in FFY 2012 to correct the systemic noncompliance. The correction of noncompliance in these 11 programs will be reviewed and reported in the FFY 2012 APR.

4. *OSEP's Request: When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010, and remaining noncompliance identified in FFY 2008: (1) is correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has initiated services, although late, for any child whose services were not initiated in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.*

NY's Response: These findings have been verified through a combination of data collected through on-site monitoring or through the State data system, depending on how the finding was determined.

Regardless of the method of determining the finding, all infants and toddlers received the services on their IFSP received the service within one year of the date on the IFSP. For the findings of noncompliance from FFY 2008 and earlier, the infants and toddlers are no longer within the jurisdiction of the EIS program.

5. *OSEP's Request: If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.*

NY's Response: Since 100% compliance for timely services was not achieved in FFY 2011, the State has reviewed its improvement activities and revised them to improve compliance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

The State does not propose any revisions to proposed targets and timelines.

New York is dedicated to providing timely, high quality services to eligible infants and toddlers. As part of the State 2012-2013 budget, New York enacted significant reforms to the Early Intervention Program (EIP) which will improve the efficiency and effectiveness of the service delivery system while reducing administrative burdens for local programs. As part of this reform, local programs will no longer be responsible for contracting with EIP providers approved by the Department. Instead, providers will enter directly into agreement with the Department to deliver EIP services, increasing the stability and availability of the EIP provider base. It is anticipated that when implemented beginning April 1, 2013, these reforms will improve the timeliness with which new services authorized in IFSPs are delivered to infants and toddlers and their families.

In addition, the following activities and resources are part of the State's FFY 2012 quality improvement efforts for timeliness of services:

The Department will first engage the 11 local programs with remaining noncompliance from FFY 2007 and 2008 that has not been corrected. The system for service authorization, referral for services, and scheduling of services by providers will be examined. Any corrections to the system that need to be made will be instituted and data for those municipalities will be re-examined in the FFY 2012 APR to assure that they achieve 100% compliance in delivering timely new services on the IFSP.

The reasons for delay of service are not collected in the Kids Integrated Data System. As the State moves forward with collecting data through NYEIS, NYEIS will be revised to ensure that reasons for delay are captured for every instance in which a delay occurs, and the data validation functionality will be routinely monitored to ensure that the delay reason can and is being captured correctly. In addition, the State will provide training and targeted resources to the NYEIS user community, to ensure users enter information completely and correctly.

One reason for the delay in timely services is a lack of capacity of qualified personnel to provide the services. The Department will work with the municipalities to examine capacity of qualified professionals in each municipality. Where shortages are identified, the Department will work to engage professionals in neighboring areas. The Department will evaluate whether NYEIS functionality to improve the flow of information between the local program and qualified professionals helps to reduce the delays, or if there are training needs on how to best use the new online system to improve timeliness of the services. The Department will also seek technical assistance from national experts through NERCC and DaSy to assess capacity of allied professionals providing EI services, and develop a needs assessment survey. Given the tremendous diversity of New York, assessing capacity has been challenging. The results of this

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needs assessment survey combined with data on timeliness of services will advise the State on how to best ease capacity shortages.

The Department will send new local data findings to local programs for timely correction within one year. Local data findings for 2007-2009 data were sent in December 2011 and will be reported in the FFY 2012 APR.

The Department will provide technical assistance to municipalities, services coordinators, and providers to address delays in those local programs with the greatest delays.

The Department will present data to NYS EICC at the upcoming June, 2013 meeting. During this meeting, the Department will engage members, who represent the municipalities, providers, and families to develop a set of recommendations to improve timeliness of services.

In addition to sending data findings, the Department will present statewide data to all municipalities on an all-county call. The Department will engage the local municipality representatives on developing and implementing a plan to improve timeliness of services, including engaging municipalities with 100% compliance to review their systems.

The Department will continue to provide technical assistance to municipalities, services coordinators, and providers to address delays in delivering services to infants and toddlers.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011 - 2012)	89.97%

Actual Target Data for FFY 2011:

Based on the October 1, 2011 child count of 28,645 infants and toddlers with IFSPs, 26,872 (93.3%) infants and toddlers received services primarily in natural environments (the home or programs for typically developing infants and toddlers). New York State’s performance for this indicator (93.3%) exceeded the target (89.97%).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2011:

Not applicable, per guidance from OSEP.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2012:

[If applicable]

The State does not propose any revisions to proposed targets and timelines. The target of 89.97% was met.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

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

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

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

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

nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

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

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

C. Use of appropriate behaviors to meet their needs:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

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

Measurable and Rigorous Targets and Actual Target Data for FFY 2011:

Summary Statements	Targets FFY 2011 (% of infants & toddlers)	Actual FFY 2011 (% of infants & toddlers)
Outcome A: Positive social-emotional skills (including social relationships)		
1. Of those infants and toddlers who entered or exited early intervention below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	63.5%	65%
2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	54.4%	48%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1. Of those infants and toddlers who entered or exited early intervention below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	73.4%	69%
2. The percent of infants and toddlers who were functioning within age expectations Outcome B by the time they turned 3 years of age or exited the program.	51.7.5%	44%
Outcome C: Use of appropriate behaviors to meet their needs		
1. Of those infants and toddlers who entered or exited early intervention below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	68.6%	75%
2. The percent of infants and toddlers who were functioning within age expectations in Outcome 3 by the time they turned 3 years of age or exited the program.	45.7%	41%

APR Template – Part C (4)

New York
State

A. Positive social-emotional skills (including social relationships):	Number of infants & toddlers	% of infants & toddlers
a. Percent of infants and toddlers who did not improve functioning	27	3%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	241	25%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	234	24%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	265	28%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	195	20%
Total	962	100%
A. Acquisition and use of knowledge and skills (including early language/communication):		
a. Percent of infants and toddlers who did not improve functioning	36	4%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	226	23%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	283	29%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	299	31%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	118	12%
Total	962	100%
C. Use of appropriate behaviors to meet their needs:		
a. Percent of infants and toddlers who did not improve functioning	26	3%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	187	19%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	349	36%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	319	33%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	81	8%
Total	962	100%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

The State partially met its target for FFY 2011 for outcome 1 (positive social-emotional skills, including social relationships) and outcome 3 (use of appropriate behaviors to meet needs), but did not meet its target for outcome 2 (acquisition and use of knowledge and skills, including early language/communication).

The collection of early childhood outcomes data is a collaborative effort among the New York State Department of Health Bureau of Early Intervention (BEI), municipal administrators of the EIP, service coordinators, evaluators, service providers, and families. New York uses a sampling methodology approved by OSEP to collect child outcomes data for children enrolled in child outcomes samples at their initial IFSP meetings and at exit from the EIP (exit data are collected only for children who receive early intervention services for at least six months). The National Early Childhood Outcomes Center's child outcome summary form (COSF) is used to collect these data. . A detailed description of the procedures for collection of COSF data is described in New York's State Performance Plan, pages 34-36. Developmental assessment instruments used to conduct evaluation and assessment data used to complete the COSF are selected from a list of instruments issued by the Department, which includes instruments such as Assessment, Evaluation, and Programming System for Infants and Children (AEPS), Battell Developmental Inventory, Bayley Scales of Infant Development III, Brigance Inventory of Infant Development, and Communication and Symbolic Behavior Scales. The complete list of developmental assessment instruments is posted on the Department's website at http://www.health.ny.gov/community/infants_children/early_intervention/memoranda/docs/interim_devel_assessment_instruments.pdf

Summary statement and progress data presented here are for the 962 children included in child outcomes samples who exited the EIP between July 1, 2011 and June 30, 2012.

The Department maintains a memorandum of understanding (MOU) with the University at Buffalo, School of Public Health and Health Professions (UB-SPH), to assist the BEI in management of child outcomes data, including data cleaning, entry, and analyses. The University at Buffalo subcontracts with the Institute for Child Development, University at Binghamton (ICD-UBN), to provide technical assistance to municipalities, providers, and families on child outcomes data collection.

The Department and University at Buffalo use a tracking and reporting system to help ensure that COSF exit forms are completed and submitted for all children in outcomes samples who receive early intervention services for at least six months. For those children for whom COSF exit forms have not been completed and returned, municipalities report reasons why no exit data are available for the child. This reporting system is assisting BEI and the university team in identifying municipalities who are in need of technical assistance to improve the completeness of child outcome data.

The UB-SPH maintains its partnership with the ICD-UBN, to continue to provide technical assistance and support to municipalities, EIP providers, and families related to the collection of entry and exit child outcome data in each of the three outcome areas, including: maintaining a website, 800 number support line, and email support for the "Guiding Progress... Shaping Futures" outcomes reporting initiative; refining COSF training materials based on feedback from municipalities, families, and providers; refining and expanding the developmental milestones checklists; and, developing an in-service training package on the COSF for use by municipalities in training their staff and providers.

The State partially met its target for FFY 2011 for outcome 1 (positive social-emotional skills, including social relationships) and outcome 3 (use of appropriate behaviors to meet needs), but did not meet its target for outcome 2 (acquisition and use of knowledge and skills, including early language/communication).

For outcomes 1 and 3, targets were exceeded for Summary Statement 1, which measures the percent of children who substantially increased their rate of growth by the time they turned three years of age or exited the program.

The State's eligibility criteria for the EIP are moderate in terms of the severity of delay and diagnosed conditions required for program participation. Children must be experiencing substantial delays in development or diagnosed conditions that significantly impact their development to receive early intervention services. As with all states, New York's experience data collection and analyses of child outcomes is relatively new and evolving. As discussed in New York's State Performance Plan, there was concern in setting performance targets about an upward bias due to (1) under-reporting by New York City combined with worse outcomes in New York City and (2) the increase in the length of time for children exiting the program in years subsequent to baseline (children with more severe problems/diagnosed conditions that are less amenable to successful intervention enter the program at younger and exit at older ages compared with children with less significant delays). Although the calculations used to set targets for this outcome attempted to adjust for this upward bias, assumptions used may need to be revised based on current experience.

In 2010, the State's regulations were revised to implement a more rigorous definition of communication delay in an effort to ensure that only those children who require intervention (i.e. are not experiencing a normal variation in development) receive EIP services. The lower than expected performance in Outcome 2 may in part be attributable to an overall change in the population of children receiving EIP services in comparison to the population on which targets were set.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

The State does not propose any revisions to proposed targets and timelines.

The Department will work with its collaborators at the University at Buffalo to conduct additional analyses to examine the extent to which factors such the change in eligibility criteria for the EIP are impacting on New York's ability to achieve its performance targets in the area of child outcomes.

In addition to the COSF data, the NYS Impact on Child Scale, created as part of New York's General Supervision Enhancement Grant, has been incorporated into the annual family survey. The scale measures the extent to which early intervention services have helped infants and toddlers to achieve a range of developmental outcomes, based on parent report. Thus, New York now has two sources of data on child outcomes that can be used for program evaluation and quality improvement purposes.

The Department, in collaboration with UB-SPH, ICD-UBN, and Dr. Batya Elbaum, University of Miami, will analyze child outcome and service delivery parameters to determine whether specific factors can be identified as important to achieving improved outcomes for infants and toddlers in each of the three child outcome areas for use in quality improvement efforts.

The Department, in collaboration with the UB-SPH, ICD-UBN, and Dr. Batya Elbaum, University of Miami, will use data from the COSF and family survey to develop and issue child and family outcomes performance reports for local programs for use in quality improvement efforts.

The Department, in collaboration with UB-SPH, ICD-UBN, and Dr. Batya Elbaum, University of Miami, successfully competed for a R-40 Research Grant, funded by the federal Maternal Child Health Bureau, to evaluate the impact of early intervention services on children with autism spectrum disorders and their families. The overarching goal of the three-year research project is to model an approach to evaluating the impact of participation in early intervention programs that can be used for program evaluation and quality improvement. The project was initiated in September, 2010 and is funded through August 31, 2013. There are 274 families enrolled and actively participating in this study. Data are being collected on a variety of child and family measures, including the COSF and NYS Impact on Child scale and an extensive record review protocol. It is anticipated that results from this study will significantly contribute to

APR Template – Part C (4)

New York
State

New York's efforts to identify parameters that influence the impact of early intervention services on child and family outcomes and to use this information to work with local programs to improve child and family outcomes.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

As recommended by the National Center for Special Education Accountability Monitoring (NCSEAM), analyses were completed using the WINSTEPS Rasch Model statistical software package, which yields person measures for each family participating in the family survey. Person measures are aggregated across all families for reporting purposes. The NCSEAM standards, used to derive percentages, are as follows:

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

- A. Know their rights: NCSEAM standard is the percent of families with a person measure at or above 539 (95% likelihood of a response across the three categories of “agree”, “strongly agree”, and “very strongly agree” to the item “Know about my child’s and family’s rights concerning Early Intervention Services”)
- B. Effectively communicate their children’s need: NCSEAM standard is the percent of families with a person measure of 556 (95% likelihood of a response across the three categories of “agree”, “strongly agree”, and “very strongly agree” to the item “Communicate more effectively with the people who work with my child and family”)
- C. Help their children develop and learn: NCSEAM standard is the percent of families with a person measure of 516 (95% likelihood of a response across the three categories of “agree”, “strongly agree”, and “very strongly agree” to the item “Understand my child’s special needs”)

FFY	Measurable and Rigorous Target
<p>FFY 2011 (2011-2012)</p>	<p>4 A. The percent of respondent families participating in Part C who report that early intervention services have helped the family know their rights will increase by 1% to 77.2%.</p> <p>4 B. The percent of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children’s needs will increase by 1% to 71.69%.</p> <p>4 C. The percent of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn will increase by 1% to 88.4%.</p>

Actual Target Data for FFY 2011:

Indicator	Percent of Families At or Above NCSEAM standard [95% Confidence Intervals]
<p>A. Percent of respondent families participating in Part C who report that early intervention services have helped their family know their rights.</p>	<p>75.2% (434/577) [95%CI:71.5%, 78.7%]</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.</p>	<p>70.0% (404/577) [95%CI:66.1%, 73.7%]</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.</p>	<p>83.0% (479/577) [95%CI:79.7%, 86.0%]</p>
<p>NYS Person Mean on the NCSEAM Family Impact Scale</p>	<p>638.88 [95% CI: 627.22, 650.54]</p>

In accordance with the sampling procedures described in the SPP, a random sample of 3,238 families whose children exited the EIP between July 1, 2011 – December 31, 2012, and those who were not closed but turned three years of age between January 1, 2011 and June 30, 2012 and would be exiting the program by August 31, 2012, were selected to receive the New York State modified version of the (*NCSEAM Family Survey/Family Impact Scale*), developed under the Department’s General Supervision Enhancement Grant (GSEG) on enhancing Part C outcome indicators and methods for analyzing Part C outcome indicators. A total of 577 families responded to the survey (for a response rate of 18%, which is a decrease from last year’s response rate of 23%). When comparing respondents to all children and families participating in and who exited the EIP in the relevant program year, the sample was found to be

representative of the program's population. No significant differences were found in race/ethnicity, language, gender, or developmental delay or disability status.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

Although New York did not meet its targets for the three family outcomes for FFY 2011, when considering confidence intervals targets could be considered to be met for indicators A and B, and nearly met for indicator C.

The Department will work with its collaborators at the Universities at Buffalo and Binghamton and the University of Miami to conduct further analyses of the family outcomes data to identify factors contributing to this performance indicator and will present these data to the Early Intervention Coordinating Council (EICC) at its June, 2013 meeting to discuss opportunities for improvement.

The NYS Family Survey developed under the GSEG project completed in 2008, including New York's *Impact on the Child Scale*, modified NCSEAM Impact on the Family Scale, and NCSEAM family-centered services scale, continues to be used to collect family outcome data. This process involves families in a meaningful way in measuring family outcomes, the extent to which early intervention services have helped children participating in the program to attain developmental outcomes, and the extent to which early intervention services are family-centered. The combined data set gives New York State a powerful tool to examine the relationship between child and family outcomes; family-centered services and child and family outcomes; and, the impact of service delivery parameters (e.g., type of service, intensity of services, service provider) on family and child outcomes.

In addition, the NYS Family Survey has enabled the Department to supplement ongoing data collection efforts to meet OSEP reporting requirements to include family and child outcomes of special interest to NYS stakeholders.

Department staff, in collaboration with staff from the University at Buffalo, will continue to work on additional analyses of the data from the NYS Family Survey to guide State and local program improvement efforts. When completed, these analyses will examine the extent to which child, family and service delivery characteristics influence family outcomes, and identify specific areas where program improvements can be made to assist NYS and its localities in meeting family outcome targets for next year.

The Department received support from the Maternal Child Health Block Grant for a graduate assistant to work on the development of local performance reports using family outcome data from the New York State Family Survey. These reports include performance on the Impact on Family scale by local programs and EIP providers. The reports are being finalized and will be widely disseminated, including through the Department's website. Local programs and EIP providers will be encouraged to use these data to identify and implement quality improvement activities that will increase positive family outcomes.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP's Request: The State reported that the data for this indicator were based on a response group that was not representative of the population. In the FFY 2011 APR, the State must report whether its FFY 2011 data are based on a response group that is representative of its population, and if not, the actions the State is taking to address this issue.*

NY's Response: The FFY 2011 data are based on a response group that is representative of the population of children and families in the program.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

There are no proposed revisions to targets and timelines.

As mentioned under Indicator # 3, the Department, in collaboration with UB-SPH, ICD-UBN, and Dr. Batya Elbaum, University of Miami, successfully competed for an R-40 Research Grant funded by the federal Maternal Child Health Bureau to evaluate the impact of early intervention services on children with autism spectrum disorders and their families. The overarching goal of the three-year research project is to model an approach to evaluating the impact of participation in early intervention programs that can be used for program evaluation and quality improvement. The project was initiated in September, 2010 and is funded through August 31, 2013, and will examine the impact of early intervention services on both child and family outcomes. In the first year of this project, concept mapping was used with State and national stakeholders to identify child and family outcomes expected to result from early intervention services for children with ASDs and their families. Data generated from the concept mapping project are being used to develop a modified version of the New York Family Survey which will incorporate child and family outcomes specific to ASD. There are currently 274 families actively participating in the study.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011 - 2012)	1.22%

Actual Target Data for FFY 2011:

Using the October 1, 2011 child count, 2,662 infants under the age of one had IFSPs in the New York EIP. The number of infants under the age of one in the entire New York State population for that time period was 242,280. The percentage of infants under age one with IFSPs in the State is 1.1%.

The State is above the percent of infants under the age of one with an IFSP (1.03%) for the U.S. and outlying areas.

The rate of 1.10% for this indicator is below the FFY 2011 target of 1.22%.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

This represents a slight decrease from FFY 2010 when 1.16% of infants under the age of one in NYS had IFSPs. New York State is committed to Child Find efforts for infants.

In FFY 2010, 2,692 infants under the age of 1 had an IFSP compared to 2,662 infants in FFY 2011, which represents a decrease of 30 infants. The population denominator increased from 231,872 in FFY 2010 to 242,280 in FFY 2011.

During FFY 2011, there were a total of 5,618 infants under the age of one with an IFSP compared to the point in time count of 2,662 on October 1st.

The Department was awarded a grant from the Centers for Disease Control and Prevention to design, develop, and implement a tracking and surveillance system for NYS's Early Hearing Detection and

Intervention (EHDI) program. The online data system began collecting individual level hearing screening and follow-up data for all birthing hospitals outside of New York City in December 2012. This will be the first time that NYS has collected individualized data on newborn hearing screening results, as well as results on follow-up for those infants who do not pass their newborn screening. Both the EHDI information system and the early intervention system contain fields that will facilitate linkage and allow analysis to decrease the loss of follow-up of infants with suspected hearing loss. The Part C data manager has been working with the EHDI program, which is within the same bureau at the Department of Health, to make a linkage between the two programs.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

The State does not propose any revisions to proposed targets and timelines.

The State has reviewed its improvement activities and is not proposing any changes or revisions.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	<p style="text-align: center;">4.095%</p>

Actual Target Data for FFY 2011:

Using the October 1, 2011 child count, 28,645 infants and toddlers birth to three had IFSPs. The number of infants and toddlers aged birth to three in the general population for that time period was 700,010. The percentage of infants and toddlers from birth to three with IFSPs in FFY 2011 is 4.09%.

The State exceeds the percent of the birth to three population with an IFSP (2.79%) for the U.S. and outlying areas. The State also is on track with its FFY 2011 target (4.095%) for this indicator.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

The State reports a rate of 4.09% for this indicator in FFY 2011. There was a decrease of 0.38 percentage points from 4.47% in FFY 2010.

In 2010, the State’s regulations were revised to implement a more rigorous definition of communication delay in an effort to ensure that only those children who require intervention (i.e. are not experiencing a normal variation in development) receive EIP services. New York expected, and experienced, a decline in the number of children receiving EIP services as a result of this change in eligibility criteria.

During FFY 2011, there were a total of 48,020 infants and toddlers from birth to three with an IFSP compared to the point in time count of 28,645 on October 1st.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

The State does not propose any revisions to proposed targets and timelines.

The State has reviewed its improvement activities and is not proposing any changes or revisions.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Account for untimely initial evaluations, initial assessments, and initial IFSP.

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	100%

Actual Target Data for FFY 2011:

<p>82.9% (23,768/28,675)</p>
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Infants Evaluated and Assessed and provided an Initial IFSP meeting Within Part C’s 45-day timeline:

a. Number of infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline	23,768
b. Number of infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	28,675
Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline (Percent = [(a) divided by (b)] times 100)	82.9%

These data include infants and toddlers who were newly referred to the EIP within the reporting period of July 1, 2011 to June 30, 2012, based on data entered in the Kids Integrated Data System (KIDS) and New York Early Intervention System (NYEIS).

KIDS and NYEIS capture reasons for delayed IFSP meetings. There were 7,432 infants and toddlers with a documented delay due to exceptional family circumstances. These infants and toddlers are included in the numerator and denominator, as allowed by OSEP.

Of the 4,907 infants and toddlers with a late IFSP that were delayed due to non-discountable reasons: 1,883 were late due to a full municipal representative schedule; 1,707 were due to an evaluator backlog or delayed receipt of an evaluation; 1,317 were late due to other local program administrative reasons.

All of the 4,907 infants and toddlers, who did not have an initial IFSP meeting within 45 days, had an initial IFSP meeting within one year of referral to the EIP, representing full timely correction of the instances of noncompliance.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011:

There was a decrease of 2.3 percentage points for this indicator from FFY 2010 (85.2%) to FFY 2011 (82.9%). New York State did not achieve the 100% compliance target.

The State is dedicated to conducting timely IFSP meetings for infants and toddlers who have been evaluated and determined to be eligible for Part C services. The Department has presented the FFY 2011 data to the State Early Intervention Coordinating Council (EICC).

The Department has also begun working with the local programs to understand and analyze capacity shortages among evaluators and other members of the IFSP team. A survey of municipality officials was administered in August 2011. The information from that survey has been analyzed in relation to the local program performance on timeliness of IFSP meetings for eligible infants and toddlers.

Local determinations based on FFY 2010 local data have been made and local programs have been notified of their status. The Department's method for issuing local determinations is heavily weighted toward compliance indicators. Local programs that do not meet requirements are required to take corrective actions based on their determination status, as follows:

- All local programs that do not meet requirements must participate in Department-sponsored all-county conference calls.
- Local programs with a determination of "Needs Assistance" are required to examine, revise, and upon request submit to the Department, revised policies and procedures with respect to the relevant indicators, including indicator 7.
- Local programs with a repeat determination of "Needs Assistance" are required to contact an assigned Bureau of Early Intervention (BEI) staff member to obtain technical assistance on revising policies and procedures related to the relevant indicators. These local programs must convene a meeting of their Local Early Intervention Coordinating Council (LEICC) to review the determination and obtain input on revising policies and procedures related to the relevant indicators. The LEICC meeting agenda, list of attendees and meeting minutes must be submitted to the Department within 90 days, with an assurance that policies and procedures were revised in order to improve performance and comply with federal requirements within one year.
- Local programs with a determination of "Needs Intervention" are required to submit to BEI within 60 days a corrective action plan (CAP) including revised policies and procedures and the steps to be taken to comply with federal requirements within one year.

The State received technical assistance from DAC and NERCC, including a timeline to notify local programs of these findings. Notification of findings based on noncompliance in FFY 2007 and 2008 local data was initially delayed. There were 9 instances of local programs with noncompliance for timely IFSP,

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based on local data for FFYs 2007, 2008, and 2009. Notifications of these findings were sent to the local programs in December 2011. These findings, which were made in FFY 2011, will be addressed in the FFY 2012 APR.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) State reported for FFY 2010 for this indicator: 85.2%

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	6
2. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the local program of the finding)	6
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

N/A

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Systemic noncompliance is identified and correction is verified at the local program level by monitoring reviews, analysis of local data, and dispute resolution. For Indicator # 7, there were 6 findings of noncompliance issued in FFY 2010. All of these findings were verified to have been corrected within one year. The methods used to verify correction of these 6 findings are discussed in the next section.

The 6 findings were verified as corrected at 100% compliance at the systemic level based on a subset of child records reviewed. Additionally, for each child with the original finding of noncompliance identified, it was also verified that an IFSP was conducted, although beyond the 45-day timeline.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

New York State has fully implemented its rigorous verification of correction process which consists of the following:

- Identification of findings of noncompliance with IDEA requirements are determined during on-site monitoring reviews conducted by New York State's contractor;

- All findings of noncompliance are identified and formal reports of findings are issued within 90 days of the on-site review;
- While conducting the on-site review, the contractor determines that each individual case of noncompliance, unless the child is no longer within the jurisdiction of the local program, has been corrected within one year, for example, that the CPSE was notified within 120 days of the child’s potential transition to preschool services; or the child is no longer within the jurisdiction of the EI program;
- Providers who have findings of noncompliance identified, are required to submit a CAP within 45 days of receipt of their monitoring report, which requires all information that is described earlier in this section, including root cause of noncompliance and activities they will implement to correct the noncompliance;
- All CAPs are reviewed and approved by New York State staff within 60 days of receipt, and providers are notified in writing, if their CAP is approved or not;
- Written technical assistance is provided by New York State staff which is included in CAP response letters, as needed;
- Targeted technical assistance is provided via phone call by New York State staff for providers or municipalities who demonstrate difficulty in providing sufficient activities to correct their noncompliance;
- New York State contract staff conducted on-site verification reviews within 60-90 days subsequent to approval of the CAP for those providers with significant findings of noncompliance, to determine if CAP activities have been fully implemented and correction of noncompliance at 100% can be verified. A subset of additional child records were reviewed to verify correction of noncompliance;
- New York State also requires submission of a subset of child records within 90-100 days of approval of the CAP, for those providers who have minimal findings of noncompliance, to determine if CAP activities have been fully implemented and correction of noncompliance can be verified at 100%.

Correction of FFY 2009 Findings of Noncompliance (if applicable):

There are no outstanding findings of noncompliance from FFY 2009.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator	30
2. Number of remaining FFY 2008 findings the State has verified as corrected	27
3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)]	3

Verification of Correction of Remaining FFY 2008 findings:

All eligible infants and toddlers had an IFSP meeting within one year of referral. The infants and toddlers from the FFY 2008 findings are no longer within the jurisdiction of the Part C Early Intervention Program.

There were 30 findings of noncompliance in FFY 2008 that remained uncorrected as of FFY 2010. Twenty seven of these findings have been verified as subsequently corrected (i.e. they were corrected, but not within one year of notification). Three findings remain uncorrected.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

All eligible infants and toddlers had an IFSP meeting within one year of referral. The infants and toddlers from the FFY 2007 findings are no longer within the jurisdiction of the Part C Early Intervention Program. There were 29 findings of noncompliance in FFY 2007 that remained uncorrected. Twenty six have been corrected. Three remain uncorrected.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 or earlier:

The Department verified correction of findings by first confirming that the IFSP occurred within one year of referral. All of the infants and toddlers did have an IFSP within one year. For findings from FFY 2008 and 2007, the infants and toddlers are no longer within the jurisdiction of the Part C Early Intervention Program.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the State is in compliance with the 45-day timeline requirements in 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a).*

NY's Response: While 100% compliance was not achieved, the State is dedicated to conducting evaluating and assessing infants and toddlers and conducting IFSP meetings in a timely manner.

2. *OSEP's Request: Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.*

NY's Response: There were six findings of noncompliance in FFY 2010. All six findings were corrected within one year. The Department will continue its efforts to monitor and analyze data from local programs to improve the timeliness of IFSP meetings.

3. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the remaining 30 uncorrected noncompliance findings identified in FFY 2008 and the remaining 29 uncorrected noncompliance findings identified in FFY 2007 were corrected.*

NY's Response: Twenty-seven of the 30 uncorrected findings in FFY 2008 and twenty six of the 29 findings in FFY 2007 have been verified as corrected. There are three programs that have not corrected the findings of noncompliance based on data collected for those programs. The Department is prioritizing working with these three programs in FFY 2012 to correct the remaining systemic noncompliance. The correction of noncompliance will be reported in the FFY 2012 APR.

4. *OSEP's Request: When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010, and remaining noncompliance identified in FFY 2008: (1) is correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has conducted the initial evaluation, assessment, and IFSP meeting, although late, for any child for whom the 45-day timeline was not met, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.*

NY's Response: These findings have been verified through a combination of data collected through on-site monitoring or through the State data system, depending on how the finding was determined.

Regardless of the method of determining the finding, all infants and toddlers had an IFSP meeting within one year of referral. For findings of noncompliance from FFY 2008 and earlier, the infants and toddlers are no longer within the jurisdiction of the program.

5. *OSEP's Request: If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.*

NY's Response: Since 100% compliance for timely IFSP was not achieved in FFY 2011, the State has reviewed its improvement activities and revised them to improve compliance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

The State does not propose any revisions to proposed targets and timelines.

The following activities and resources are part of the State's FFY 2012 quality improvement efforts for timeliness of IFSP:

The Department will provide additional technical assistance and oversight to the three municipalities with remaining noncompliance from FFY 2007 and 2008 that has not been corrected. The system for referral, evaluation, and IFSP will be examined. Any corrections to the system that need to be made will be instituted and data for those municipalities will be reexamined in the FFY 2012 APR to assure that they achieve 100% compliance for timely IFSP.

There was a high percentage (29.3%) of missing or invalid reasons for IFSP delay entered in the data systems. The Department will provide training and targeted resources to local programs to assist users in entering these reasons completely and correctly.

One identified reason for the delay in IFSP is lack of capacity of qualified personnel to provide the evaluations necessary to determine a child's eligibility. There were a high percentage of delays due to evaluator backlog (16.4%) or a late report from an evaluator (23.1%). The Department will work with the municipalities to examine capacity of evaluators in each municipality. If shortages are identified, the BEI will work to engage professionals in neighboring areas. The Department will assess whether NYEIS functionality to improve the flow of information between the local program and evaluators helps to reduce the delays, or if there are training needs on how to best use the new online system to improve timeliness of the evaluations and IFSP meetings.

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The Department will send new local data findings to local programs for timely correction within one year. Local data findings for 2007-2009 data were sent in December 2011 and will be reported in the FFY 2012 APR.

The Department will provide technical assistance to municipalities, services coordinators, and evaluators to address delays in those local programs with the greatest delays.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8A: Percentage of toddlers with disabilities exiting Part C with timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;

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

Measurement:
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.

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	100%

Data Collection for Indicators 8A, 8B, and 8C

New York State collected data for Indicators # 8 A-C by using a stratified sample of 899 toddlers who exited the Part C program between July 1, 2011 and June 30, 2012. These children were selected from the 27,890 toddlers who exited the program during this reporting period and had an IFSP.

Sample cases were selected at different rates in different municipalities using stratified sampling. The purpose of using stratified sampling is to have sufficiently large samples for local programs, which results in statistically valid rates for selected local programs as well as for the state as a whole. Each local program was scheduled to be oversampled according to the plan outlined in the SPP for FFY 2005-2012. Analysis was conducted to ensure the sample was representative of the population. The sample was representative of the population exiting the Part C program based on gender, race/ethnicity and age.

Local programs either completed a self-assessment tool developed by the Department for the toddlers who exited with their information entered in KIDS, or transition information, which was previously collected on the self-assessment tool, was analyzed directly from NYEIS for toddlers who exited with their information entered in NYEIS. The questions asked on the self-assessment tool to calculate Indicators #8 A-C have been incorporated into NYEIS, and are collected for toddlers as they exit the Part C Early Intervention Program.

Actual Target Data for FFY 2011:

Of the 899 toddlers in the sample, 796 had an IFSP with documentation of transition steps and services. An additional 20 toddlers without documentation of timely transition steps and services were due to exceptional family circumstances. These toddlers are included in the numerator and denominator for a final rate of 90.8% (816/899).

New York State did not achieve the 100% compliance target.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011:

There was a 1.2 percentage increase in the rate in this indicator from FFY 2010 (89.6%) to FFY 2011 (90.8%).

The Department engaged local programs to understand the process and the barriers that exist in working with families to transition to Part B Preschool Special Education. The Department provided training and targeted resources to the local programs, including the service coordinators, on how to enter information about transition steps discussed during the IFSP in the online data system, NYEIS.

Local determinations based on FFY 2010 local data have been made and local programs have been notified of their status. The Department's method for issuing local determinations is heavily weighted toward compliance indicators. Local programs that do not meet requirements are required to take corrective actions based on their determination status, as follows:

- All local programs that do not meet requirements must participate in Department-sponsored all-county conference calls.
- Local programs with a determination of "Needs Assistance" are required to examine, revise, and upon request submit to the Department, revised policies and procedures with respect to the relevant indicators, including indicator 8A.
- Local programs with a repeat determination of "Needs Assistance" are required to contact an assigned Bureau of Early Intervention (BEI) staff member to obtain technical assistance on revising policies and procedures related to the relevant indicators. These local programs must convene a meeting of their Local Early Intervention Coordinating Council (LEICC) to review the determination and obtain input on revising policies and procedures related to the relevant indicators. The LEICC meeting agenda, list of attendees and meeting minutes must be submitted to the Department within 90 days, with an assurance that policies and procedures were revised in order to improve performance and comply with federal requirements within one year.
- Local programs with a determination of "Needs Intervention" are required to submit to BEI within 60 days a corrective action plan (CAP) including revised policies and procedures and the steps to be taken to comply with federal requirements within one year.

The State received technical assistance from DAC and NERCC, including a timeline to notify local programs of these findings. Notification of findings based on noncompliance in FFY 2007 and 2008 local data was initially delayed. There were 15 instances of local programs with noncompliance based on local data for FFYs 2007, 2008, and 2009. Notifications of these findings were sent to the local programs in December 2011. Due to the date of notification, these findings are considered FFY 2011 findings and will be addressed in the FFY 2012 APR.

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Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	4
2. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the local program of the finding)	4
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

N/A

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Systemic noncompliance is identified and correction is verified at the local program level by monitoring reviews, analysis of local data, and dispute resolution. For Indicator # 8A, there were 4 findings of noncompliance issued in FFY 2010. All 4 of these findings were verified to have been corrected within one year. The methods used to verify correction of these findings are discussed in the next section.

Additionally, for each child for whom the original finding of noncompliance was made, it was verified that they were no longer in the jurisdiction of the Part C Early Intervention Program.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

New York State has fully implemented its rigorous verification of correction process which consists of the following:

- Identification of findings of noncompliance with IDEA requirements are determined during on-site monitoring reviews conducted by New York State’s contractor;
- All findings of noncompliance are identified and formal reports of findings are issued within 90 days of the on-site review;
- While conducting the on-site review, the contractor determines that each individual case of noncompliance, unless the child is no longer within the jurisdiction of the local program, has been corrected within one year, for example, that the CPSE was notified within 120 days of the child’s

potential transition to preschool services; or the child is no longer within the jurisdiction of the EI program;

- Providers who have findings of noncompliance identified, are required to submit a CAP within 45 days of receipt of their monitoring report, which requires all information that is described earlier in this section, including root cause of noncompliance and activities they will implement to correct the noncompliance;
- All CAPs are reviewed and approved by New York State staff within 60 days of receipt, and providers are notified in writing, if their CAP is approved or not;
- Written technical assistance is provided by New York State staff which is included in CAP response letters, as needed;
- Targeted technical assistance is provided via phone call by New York State staff for providers or municipalities who demonstrate difficulty in providing sufficient activities to correct their noncompliance;
- New York State contract staff conducted on-site verification reviews within 60-90 days subsequent to approval of the CAP for those providers with significant findings of noncompliance, to determine if CAP activities have been fully implemented and correction of noncompliance at 100% can be verified. A subset of additional child records were reviewed to verify correction of noncompliance;
- New York State also requires submission of a subset of child records within 90-100 days of approval of the CAP, for those providers who have minimal findings of noncompliance, to determine if CAP activities have been fully implemented and correction of noncompliance can be verified at 100%.

Correction of FFY 2009 Findings of Noncompliance (if applicable):

There are no outstanding findings of noncompliance from FFY 2009.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP’s June 2010, FFY 2008 APR response table for this indicator	2
2. Number of remaining FFY 2008 findings the State has verified as corrected	2
3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)]	0

Verification of Correction of Remaining FFY 2008 findings:

There were 2 findings of noncompliance in FFY 2008 that remained uncorrected as of FFY 2010. These findings have been verified as subsequently corrected.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

There were 3 findings of noncompliance in FFY 2007 that remained uncorrected as of FFY 2010. All of these findings have been verified as corrected.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 or earlier:

The Department verified correction of findings by first confirming that the toddler, for whom the finding of noncompliance was originally made, was no longer under the jurisdiction of the Part C Early Intervention Program. All of the infants and toddlers who had exited the program have been confirmed as no longer within the jurisdiction of the Part C Early Intervention Program. Noncompliance at the toddler-level cannot be corrected, because the toddlers have left the jurisdiction of the Part C Early Intervention Program by the time the noncompliance has been detected.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the State is in compliance with the IFSP transition content requirements in 34 CFR §§303.148(b)(4) and 303.344(h) and 20 U.S.C. 1436(a)(3) and (d)(8).*

NY's Response: While 100% compliance of timely transition planning for toddlers with disabilities exiting Part C was not achieved, the State is committed to assuring a timely transition to Part B without interruption of services for all potentially eligible toddlers. The Department is working with local programs to assure that transition steps and services are discussed with every child at every IFSP meeting that occurs after the age of two years old, and that the information is entered into the online data system, NYEIS. The Department is also working with local programs to close records for toddlers who have transitioned and to capture the appropriate information, such as reasons for exiting the Part C program.

2. *OSEP's Request: Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.*

NY's Response: There were four findings of noncompliance for transition planning in FFY 2010. All four of these findings were verified as corrected within one year.

3. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the remaining two uncorrected noncompliance findings identified in FFY 2008 and the remaining three uncorrected noncompliance findings identified in FFY 2007 were corrected.*

NY's Response: The two remaining findings of noncompliance in FFY 2008 and the remaining three findings of noncompliance in FFY 2007 have been verified as corrected.

4. *OSEP's Request: When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010, and remaining noncompliance identified in FFY 2008: (1) is correctly implementing 34 CFR §§303.148(b)(4) and 303.344(h) and 20 U.S.C. 1436(a)(3) and (d)(8) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has developed an IFSP with transition steps and*

services for each child, unless the child is no longer within the jurisdiction of the EIS program (i.e., the child has exited the State's Part C program due to age or other reasons), consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.

NY's Response: The findings of noncompliance have been verified through a combination of data collected through on-site monitoring or through the State data system, depending on how the finding was determined. All infants and toddlers for whom the original findings of noncompliance were made had left the jurisdiction by the time the findings were made.

5. *OSEP's Request: If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.*

NY's Response: Since 100% compliance for timely IFSP was not achieved in FFY 2011, the State has reviewed its improvement activities and revised them to improve compliance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

The State does not propose any revisions to proposed targets and timelines.

The following activities and resources are part of the State's FFY 2012 quality improvement efforts for effective transition (Indicators 8A, 8B, and 8C):

The State is dedicated to providing a timely transition to Part B without interruption of services for all potentially eligible toddlers. The Department has presented the FFY 2011 data to the State Early Intervention Coordinating Council (EICC).

Based on feedback from the municipalities, the Department developed guidance for the municipalities, and presented this guidance on a bimonthly call in the fall of 2012. The Department reviewed how to enter transition steps and services discussed during the IFSP, and emphasized the importance of entering this information completely and accurately for each toddler. Additionally, the Department has provided guidance and training about making timely notification to local educational agencies (LEA) and conducting transition conferences.

The Department is working on developing an online training and targeted resources to demonstrate how to correctly enter transition information during the IFSP and the importance of entering transition information for all infants and toddlers who exit the Part C Early Intervention Program.

The Department will analyze data for the federal fiscal year 2012. Any municipality not achieving 100% compliance will receive a finding of noncompliance which will need to be addressed. Local programs that cannot demonstrate compliance will need to develop steps to ensure that all IFSPs for toddlers over the age of two years old include transition steps and services, and that these steps and services are recorded accurately in NYEIS.

The Department will continue to provide technical assistance to municipalities and service coordinators to address performance in assuring effective transitions for all infants and toddlers who exit the Part C Early Intervention Program.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

- B. Notification to LEA, if child potentially eligible for Part B;

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

Measurement:

Percent = [(# of infants and toddlers exiting Part C and potentially eligible for Part B where the notification to the LEA occurred) divided by the (# of infants and toddlers exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	100%

Actual Target Data for FFY 2011:

Of the sample of 899 toddlers, there were 94 families who chose to opt out of the transition process. There were an additional 257 toddlers who were not eligible for Part B Preschool Special Education.

Of the remaining toddlers in the sample, there were 548 who were potentially eligible for Part B Preschool Special Education, so notification should have been sent to the LEA. Of these 548 toddlers, 493 (90.0%) had documentation of notification to the LEA.

New York State did not achieve the 100% compliance target.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011:

Indicator 8b decreased by 5 percentage points from FFY 2010 (95.0%) to FFY 2011 (90.0%).

Of the toddlers without notification to the LEA, 18 toddlers exited the Part C Early Intervention Program for exceptional family circumstances. These toddlers were included in the denominator only for the calculation of Indicator 8b.

The State is dedicated to assuring notification to the LEA in a timely manner. The Department has worked with municipalities on all county conference calls to try to understand the barriers to notification. The Department has worked with the State Education Department to determine how to facilitate the notification process at the local level as well as to establish the transmission of children who are transitioning between the State agencies. The Department has presented the FFY 2011 data to the State Early Intervention Coordinating Council (EICC) for advice and assistance in improving the timeliness of transition notices to LEAs.

Local determinations based on FFY 2010 local data have been made and local programs have been notified of their status. The Department’s method for issuing local determinations is heavily weighted toward compliance indicators. Local programs that do not meet requirements are required to take corrective actions based on their determination status, as follows:

- All local programs that do not meet requirements must participate in Department-sponsored all-county conference calls.
- Local programs with a determination of “Needs Assistance” are required to examine, revise, and upon request submit to the Department, revised policies and procedures with respect to the relevant indicators, including indicator 8B.
- Local programs with a repeat determination of “Needs Assistance” are required to contact an assigned Bureau of Early Intervention (BEI) staff member to obtain technical assistance on revising policies and procedures related to the relevant indicators. These local programs must convene a meeting of their Local Early Intervention Coordinating Council (LEICC) to review the determination and obtain input on revising policies and procedures related to the relevant indicators. The LEICC meeting agenda, list of attendees and meeting minutes must be submitted to the Department within 90 days, with an assurance that policies and procedures were revised in order to improve performance and comply with federal requirements within one year.
- Local programs with a determination of “Needs Intervention” are required to submit to BEI within 60 days a corrective action plan (CAP) including revised policies and procedures and the steps to be taken to comply with federal requirements within one year.

The State received technical assistance from DAC and NERCC, including a timeline to notify local programs of these findings. Notification of findings based on noncompliance in FFY 2007 and 2008 local data was initially delayed. There were 15 instances of local programs with noncompliance of the notification of the LEA about potentially eligible toddlers, based on local data for FFYs 2007, 2008, and 2009. Notifications of these findings were sent to the local programs in December 2011. These findings, which were made in FFY 2011, will be addressed in the FFY 2012 APR.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	0
2. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the local program of the finding)	0
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3))	0
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APR Template – Part C (4)

New York
State

above)	
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

N/A

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Systemic noncompliance is identified and correction is verified at the local program level by monitoring reviews, analysis of local data, and dispute resolution. For Indicator # 8b, there were no new findings of noncompliance issued for FFY 2010. The Department continued to work with the local program with outstanding FFY 2007 finding of noncompliance that had not been verified as corrected, as well as the findings that were issued to local programs in December 2011.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

There were no new findings of noncompliance issued for FFY 2010 for this indicator. The Department continued to work with the local program with findings of noncompliance that have not been verified as corrected.

Correction of FFY 2009 Findings of Noncompliance (if applicable):

No new findings of noncompliance were issued for FFY 2009. The Department continued to work with the outstanding 2007 finding of noncompliance that had not been verified as corrected.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

There are no outstanding findings of noncompliance from FFY 2008.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

There was 1 finding of noncompliance in FFY 2007 that remained uncorrected as of the FFY 2010 APR. This finding has not been verified as subsequently corrected (i.e. corrected, but not within one year of notification).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 or earlier:

The Department verified correction of findings by first confirming that the toddler, for whom the finding of noncompliance was originally made, was no longer under the jurisdiction of the Part C Early Intervention Program. All of the infants and toddlers who had exited the program have been confirmed as no longer within the jurisdiction of the Part C Early Intervention Program. Noncompliance at the toddler-level cannot be corrected, because the toddlers have left the jurisdiction of the Part C Early Intervention Program by the time the noncompliance has been detected.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100%

in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP's Request: Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010 for this indicator: (1) is correctly implementing 34 CFR §303.148(b)(1) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has provided notification to the LEA for each child, unless the child is no longer within the jurisdiction of the EIS program (i.e., the child has exited the State's Part C program due to age or other reasons), consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.*

NY's Response: While 100% compliance of timely transition planning for toddlers with disabilities exiting Part C was not achieved, the State is committed to assuring a timely transition to Part B without interruption of services for all potentially eligible toddlers. The Department is working with local programs to assure that notification is sent to the LEA, and that the information is entered into the online data system, NYEIS. The Department is also working with local programs to close records for toddlers who have transitioned and to capture the appropriate information, such as reasons for exiting the Part C program.

2. *OSEP's Request: If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.*

NY's Response: Since 100% compliance for notification to LEA was not achieved in FFY 2011, the State has reviewed its improvement activities and revised them to improve compliance.

3. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the one remaining uncorrected noncompliance finding identified in FFY 2007 was corrected. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction. The State's failure to correct longstanding noncompliance raises serious questions about the effectiveness of the State's general supervision system. The State must take the steps necessary to ensure that it can report, in the FFY 2011 APR, that it has corrected this noncompliance.*

NY's Response: The one remaining finding of noncompliance has not been verified as corrected. The Department continues to work with the local program, and has provided technical assistance. The Department will continue to work with the local program until 100% compliance is achieved.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

The State does not propose any revisions to proposed targets and timelines.

APR Template – Part C (4)

New York
State

The State has reviewed its quality improvement activities for FFY 2012. Improvement activities for effective transition have been outlined in the previous section under Indicator 8A.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

C. Transition conference, if child potentially eligible for Part B.

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

Measurement:

Percent = [(# of infants and toddlers exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of infants and toddlers exiting Part C who were potentially eligible for Part B)] times 100.

Data Collection:

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	<p style="text-align: center;">100%</p>

Actual Target Data for FFY 2011:

Of the sample of 899 toddlers, there were 257 toddlers who were not eligible for Part B Preschool Special Education. An additional 432 families declined the transition conference.

There were 210 toddlers who were potentially eligible for Part B and their parents did not decline the transition conference. Of these toddlers, 137 have documentation of a transition conference. An additional 31 toddlers who did not have a transition conference had exceptional family circumstances; these toddlers were included in the numerator and denominator. The final rate was 80.0% (168/210).

New York State did not achieve the 100% compliance target.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011:

The rate increased by 2.5 percentage points for this indicator from FFY 2010 (77.5%) to FFY 2011 (80.0%).

APR Template – Part C (4)

New York
State

Local determinations based on FFY 2010 local data have been made and local programs have been notified of their status. The Department’s method for issuing local determinations is heavily weighted toward compliance indicators. Local programs that do not meet requirements are required to take corrective actions based on their determination status, as follows:

- All local programs that do not meet requirements must participate in Department-sponsored all-county conference calls.
- Local programs with a determination of “Needs Assistance” are required to examine, revise, and upon request submit to the Department, revised policies and procedures with respect to the relevant indicators, including indicator 8C.
- Local programs with a repeat determination of “Needs Assistance” are required to contact an assigned Bureau of Early Intervention (BEI) staff member to obtain technical assistance on revising policies and procedures related to the relevant indicators. These local programs must convene a meeting of their Local Early Intervention Coordinating Council (LEICC) to review the determination and obtain input on revising policies and procedures related to the relevant indicators. The LEICC meeting agenda, list of attendees and meeting minutes must be submitted to the Department within 90 days, with an assurance that policies and procedures were revised in order to improve performance and comply with federal requirements within one year.
- Local programs with a determination of “Needs Intervention” are required to submit to BEI within 60 days a corrective action plan (CAP) including revised policies and procedures and the steps to be taken to comply with federal requirements within one year.

The State received technical assistance from DAC and NERCC, including a timeline to notify local programs of these findings. Notification of findings based on noncompliance in FFY 2007 and 2008 local data was initially delayed. There were 16 instances of local programs with noncompliance based on local data for FFYs 2007, 2008, and 2009. Notifications of these findings were sent to the local programs in December 2011. These findings, which were made in FFY 2011, will be addressed in the FFY 2012 APR.

New York State’s rate for this indicator continues to reflect the difficulty encountered by local EI programs when coordinating transition with the myriad of local school districts which are responsible for the 619 Preschool Special Education Program and fall under the purview of the New York State Education Department (SED). Previous low rates were influenced by the unavailability of LEA staff to participate in the EI transition conference, which was not within the control of the local EI program. The Department worked with SED and clarified that the LEA representative must be invited to, but does not have to attend, the EI transition conference in order for the conference to be considered viable for this indicator. The Department continues to monitor the effectiveness of the guidance provided to local programs based on effective transition strategies learned in working with the National Early Childhood Technical Assistance Center (NECTAC) as well as NERRC.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	0
2. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the local program of the finding)	0
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

N/A

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Systemic noncompliance is identified and correction is verified at the local program level by monitoring reviews, analysis of local data, and dispute resolution. For indicator #8c, there were no new findings of noncompliance issued in FFY 2010. The Department continued to work with the local programs with outstanding FFY 2007 and FFY 2008 findings of noncompliance that have not been verified as corrected, as well as the findings that were issued to local programs in December 2011.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

There were no new findings of noncompliance issued for FFY 2010 for this indicator. The Department continued to work with the local program with findings of noncompliance that have not been verified as corrected.

Correction of FFY 2009 Findings of Noncompliance (if applicable):

No new findings of noncompliance were issued for FFY 2009. The Department continued to work with the local programs with outstanding FFY 2007 and 2008 finding of noncompliance that have not been verified as corrected.

Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2008 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator	2
2. Number of remaining FFY 2008 findings the State has verified as corrected	0
3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)]	2

Verification of Correction of Remaining FFY 2008 findings:

There were two findings of noncompliance in FFY 2008 that remained uncorrected as of the FFY 2010 APR. These outstanding FFY 2008 findings for Indicator # 8 C remain uncorrected at this time.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 or Earlier (if applicable):

There were 3 findings of noncompliance in FFY 2007 that remained uncorrected as of the FFY 2009 APR. The remaining 3 FFY 2007 findings for Indicator # 8 C remain uncorrected.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 or earlier:

The Department verified correction of findings by first confirming that the toddler, for whom the finding of noncompliance was originally made, was no longer under the jurisdiction of the Part C Early Intervention Program. All of the infants and toddlers who had exited the program have been confirmed as no longer within the jurisdiction of the Part C Early Intervention Program. Noncompliance at the toddler-level cannot be corrected, because the toddlers have left the jurisdiction of the Part C Early Intervention Program by the time the noncompliance has been detected.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP's Request: Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.*

NY's Response: While 100% compliance of timely transition planning for toddlers with disabilities exiting Part C was not achieved, the State is committed to assuring a timely transition to Part B without interruption of services for all potentially eligible toddlers. The Department is working with local programs to assure that transition conferences are held, and that the information is entered into the online data system, NYEIS. The Department is also working with local programs to close records for toddlers who have transitioned and to capture the appropriate information, such as reasons for exiting the Part C program.

2. *OSEP's Request: The State must demonstrate, in the FFY 2011 APR, that the remaining two findings of noncompliance identified in FFY 2008 and the remaining three uncorrected noncompliance findings identified in FFY 2007 were corrected. When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010, and remaining noncompliance identified in FFY 2008: (1) is correctly implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(III)) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has conducted a transition conference, although late, for any child potentially eligible for Part B whose transition conference was not timely, unless the child is no longer within the jurisdiction of the EIS*

program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.

NY's Response: The remaining findings of noncompliance have not been verified as corrected. The Department continues to work with the local programs, and has provided extensive technical assistance. The Department will continue to work with the local programs until 100% compliance is achieved.

- 3. OSEP's Request: If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.*

NY's Response: Since 100% compliance for transition conferences was not achieved in FFY 2011, the State has reviewed its improvement activities and revised them to improve compliance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

The State does not propose any revisions to proposed targets and timelines.

The State has reviewed its quality improvement activities for FFY 2012. Improvement activities for effective transition have been outlined in the previous section under Indicator 8A.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

FFY	Measurable and Rigorous Target
2011	100%

Actual Target Data for FFY 2011:

FFY	Actual Target Data
2011	98.3% (399/406)

Describe the process for selecting EIS programs for monitoring:

For this reporting period, select approved providers in the State had a comprehensive on-site monitoring review conducted. A total of 593 providers, including municipalities who are approved to directly provide EI services, were monitored. Of the 593 providers, 385 providers had findings that were violations of IDEA requirements. The providers were selected for this reporting period, based on past monitoring performance (greater than or equal to 20% regulatory violations in previous monitoring), last date of on-site monitoring, or were selected because they were never monitored. The State approves over 20,000 providers who only subcontract with larger provider agencies, therefore, many of these subcontracted providers may be newly approved by the State and/or have never been monitored. Providers were also

monitored if concerns regarding the provision of early intervention services were brought to the attention of the Department by stakeholders, such as parents or municipalities.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

For this reporting period, information used for Indicator 9 to demonstrate the rate of correction of noncompliance as soon as possible but in no case later than one year of identification, was obtained from the Department's comprehensive on-site monitoring data and from findings of noncompliance identified through due process activities, specifically, investigations of written complaints.

For monitoring, out of 593 providers who received on-site monitoring reviews, 329 providers were issued 385 findings that related to a violation of IDEA requirements, as noted in the Indicator 9 Worksheet. Of the 385 findings, 379 findings had correction that was verified no later than one year of identification, at the systemic level and all 385 findings had correction verified for each individual child, unless the child was no longer within the jurisdiction of the EI program. For 6 of these findings, correction was verified later than one year of identification, at the systemic level. Providers with 3 findings that were corrected later than one year of identification, decided to discontinue providing EI services to infants and toddlers and withdrew their New York State approval. For system complaints, there were 21 with findings of noncompliance issued.

There was a 1.8 percent improvement for this indicator from FFY 2010 (96.5%) to FFY 2011 (98.3%).

The following improvement activities for monitoring were conducted. On site comprehensive monitoring is conducted using monitoring tools that include multiple methods of evaluation of an early intervention program. The monitoring protocol includes the following:

- Review of child records;
- Evaluation and approval of written policies and procedures regarding confidentiality requirements, describing how the provider will implement program requirements to correct confidentiality practices (See Indicator C-9 Worksheet under "Other areas of noncompliance" for specific programs that were issued findings regarding confidentiality practices and correction of noncompliance verified);
- Review of other documents related to the early intervention program administration, including, personnel records, billing and fiscal records, forms and reports;
- Review of child records to ensure that any finding of noncompliance for an individual child is corrected as soon as possible, or the child is no longer in the jurisdiction of the Early Intervention System;
- Requires a rigorous immediate remediation process to be followed when serious noncompliance relating to use of unqualified personnel or other health and safety issues are identified;
- For every finding of noncompliance regarding a violation of IDEA requirements or NY State requirements, each provider and municipality must submit a Corrective Action Plan (CAP) which includes the following items:
 - Identification of the root cause which produced the noncompliance
 - Identification of Action Steps and Strategies to make improvements
 - Revision of written policies and procedures
 - Discussion of organizational changes that are required to correct the noncompliance
 - Describe a plan to provide updated training
 - Describe supervision and oversight to assure staff will carry out changes in policy correctly

- Describe documentation which will be maintained to provide evidence of corrected practices
- Describe quality assurance method that will be used to ensure corrections are being implemented
- Caps are reviewed and approved by New York State Department of Health staff no later than 60 days of receipt. A written CAP response letter which includes suggestions for revision of the CAP and technical assistance is sent to each entity monitored, subsequent to review of their CAP.
- Conducting follow-up verification of correction reviews when a finding of noncompliance is made to ensure that correction is achieved at the individual child level and the systemic level;
- Requiring attendance at Department-sponsored EI training, if numerous or repeat findings of noncompliance are determined during subsequent monitoring reviews;
- Participation in targeted technical assistance calls with Department staff to discuss recurrent findings of noncompliance and to brainstorm for root cause of noncompliance and strategies to improve compliance;
- Implementation of a two- pronged verification of correction process to verify correction of all findings of noncompliance related to a violation of IDEA requirements at the child-specific level and at the systemic level, through multiple methods, as follows:
 - Having our monitoring contractor conduct subsequent follow-up on-site visits to review the child-specific record and a subsequent subset of child records (including IFSPs, session notes, transition plans, etc.) identified through the Department’s data system;
 - Conducting interviews with providers to determine understanding of implementation of policies and procedures;
 - Review of revised policies and procedures;
 - Self-assessment reviews based on a subset of child records identified through the Department’s data system;
 - After acceptance of a corrective action plan (CAP); submission of a subset of child records identified through the Department’s data system to review for correction of noncompliance at the systemic level and to ensure that ongoing compliance is maintained for each individual child.

Based on this protocol, findings of violations of federal and state regulations are made no later than 90 days from the on-site review. For 2010-11, 592 providers, or 99% of providers were issued reports of violations of IDEA requirements and State early intervention regulations within 90 days of their on-site review. One provider monitoring report for a municipality was delayed due to significant findings that required review and approval of the monitoring report by higher approving authority within the Department, and required discussion with the Department’s legal counsel. The report for that provider was issued 256 days after their on-site review.

The State demonstrated additional progress for a second consecutive program year with Indicator 9 compliance based on continuing to implement the rigorous verification of correction of noncompliance process. New York State staff has participated in conference calls with OSEP technical assistance resources, including Northeast Regional Resource Center (NERRC) and participated in periodic State to Local Monitoring Workgroup conference calls to obtain technical assistance in this area. State staff worked diligently with its contractor to implement protocols to conduct on-site visits to review additional child records and systems in place, to ensure correction of noncompliance was verified for each individual child’s finding of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, and that every program is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on review of child records and other documents. Corrective Action Plans

APR Template – Part C (4)

New York
State

(CAPs) were required to be submitted from providers where determinations of violations of State regulations and violations of IDEA requirements were made. The CAPs were reviewed and CAP response letters were prepared which contained written technical assistance to assist each provider with strategies for improvement of the noncompliance. If the CAP submitted by the provider was significantly lacking appropriate steps to implement correction, a phone conference was held with the provider to assist them with developing appropriate steps and strategies to correct a finding. Subsequent to the verbal and written TA provided by State staff, providers were required to submit a subset of child records that were identified by the Department's data system to review to ensure correction of noncompliance was achieved. This rigorous process maintained a diligent effort of technical assistance and working closely with providers on their findings of noncompliance. This effort has been successful in the continued progress made by the State's general supervision system.

Note: For this indicator, report data on the correction of findings of noncompliance the State made during FFY 2010 (July 1, 2010 through June 30, 2011) and verified as corrected as soon as possible and in no case later than one year from identification.

Timely Correction of FFY 2010 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

7. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011) (Sum of Column a on the Indicator C 9 Worksheet)	406
8. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	399
9. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	7

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

10. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	7
11. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	7
12. Number of FFY 2010 findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

New York State uses several different methods to detect noncompliance by local programs:

- Municipalities/local programs and service providers receive on-site monitoring reviews by the Department's contractor. These reviews entail monitoring of a subset of child records for a wide range of issues, including compliance with IDEA, adherence to requirements relating to the compliance indicators, and accuracy of reported data. Additionally, the Department's contractor conducts follow-up verification of correction reviews to ensure that all noncompliance identified is corrected at 100% compliance at the systemic level and to ensure correction at the individual child level.
- As required by OSEP, New York State publishes local data on performance of local programs for many of the APR indicators, including Indicators # 1, 7, and 8A-C. Any local program that

performs at less than 100% for any of Indicators # 1, 7, and 8A-C is notified of this noncompliance.

- When a system complaint indicates that a local program is in violation of IDEA, the local program is issued a finding of noncompliance.

For each of these different types of findings, the local program is notified of the finding in writing and of the need to correct the finding within one year of notification, and the Early Intervention Program takes steps, indicated in the next section, to verify that the noncompliance is corrected in accordance with OSEP memo 09-02. Although the specific methods used to verify correction for different types of findings may vary, these methods always ensure that both child-specific and systemic findings of noncompliance are corrected.

Verification of Correction for findings of noncompliance identified in FFY 2010 (either timely or subsequent):**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):**

The State was successful in verification of correction of monitoring findings of noncompliance that were corrected one year from identification of the noncompliance with the exception of 6 findings, which were corrected subsequent to one year of identification. For 3 of these 6 findings, which were determined based on reviews of 3 different providers, it was confirmed that all 3 providers no longer render EI services to infants and toddlers in New York State. These 3 findings are notated with an asterisk on the Indicator 9 Worksheet that follows this section. All of the findings have been corrected at the individual child level, or the child is no longer in the jurisdiction of the EI program.

The State has fully implemented its rigorous verification of correction process which consists of the following:

- Identification of findings of noncompliance with IDEA requirements are determined during on-site monitoring reviews conducted by New York State's contractor;
- All findings of noncompliance are identified and formal reports of findings are issued within 90 days of the on-site review;
- While conducting the on-site review, the contractor determines that each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, has been corrected within one year, for example, that the CPSE was notified within 120 days of the child's potential transition to preschool services; or the child is no longer within the jurisdiction of the EI program;
- Providers who have findings of noncompliance identified, are required to submit a corrective action plan (CAP) within 45 days of receipt of their monitoring report, which requires all information that is described earlier in this section, including root cause of noncompliance and activities they will implement to correct the noncompliance;
- All CAPs are reviewed and approved by New York State staff within 60 days of receipt, and providers are notified in writing, if their CAP is approved or not;
- Written technical assistance is provided by New York State staff which is included in CAP response letters, as needed;

- Targeted technical assistance is provided via phone call by New York State staff for providers or municipalities who demonstrate difficulty in providing sufficient activities to correct their noncompliance;
- New York State contract staff conducted on-site verification reviews within 60-90 days subsequent to approval of the CAP for those providers with significant findings of noncompliance, to determine if corrective action plan activities have been fully implemented and correction of noncompliance at 100% can be verified. A subset of additional child records were reviewed to verify correction of noncompliance;
- New York State also requires submission of a subset of child records within 90-100 days of approval of the CAP, for those providers who have minimal findings of noncompliance, to determine if corrective action plan activities have been fully implemented and correction of noncompliance can be verified at 100%.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

As required by OSEP, the State annually reviews its local data, which are reported in KIDS or NYEIS or by the local programs in the self-assessment tool, to detect noncompliance. This process is performed annually. Local data findings from FFYs 2007, 2008, and 2009 were sent to the local programs in December 2011. Due to the date of notification, these findings are considered FFY 2011 findings and will be addressed in the FFY 2012 APR.

Notification of findings based on noncompliance in FFY 2007, 2008 and 2009 local data was initially delayed. New York State received technical assistance from DAC and NERCC, including the development of a timeline to notify local programs of these findings. These previous local data findings have been issued. Due to the date of notification, these findings are considered FFY 2011 findings and will be addressed in the FFY 2012 APR. The State has implemented a new procedure to ensure that local data findings are issued in a timely manner, and that the two-pronged verification of correction at the child and system level can be included in the appropriate APR.

There were 21 complaint reports with findings of noncompliance issued as of 60 days following the end of the reporting period. All reports had at least one finding. Six of the 21 issued complaint reports contained violations of federal compliance indicators #1 and #7. The remaining 15 reports contained 15 violations of non-compliance of federal Part C regulations. Twenty reports with a violation of a federal compliance indicator correction were verified no later than one year from identification. For the remaining violation of a federal compliance correction was verified but it was verified later than one year from identification.

Correction of dispute resolution findings of noncompliance was verified at the child-specific and systemic level. A specific due process unit staff person is assigned to investigate the complaint and is often speaking to the complainant throughout the investigation. Specific child related issues are usually resolved immediately, occurring at the beginning of a complaint investigation. Parents are also informed of the right to request mediation and/or an impartial hearing to resolve issues which are in dispute. When noncompliance is identified through a system complaint investigation, a final response letter, issued to the complainant and all identified parties, identifies specific actions which must be taken to correct items of

noncompliance and steps to ensure continued compliance. A staff person is responsible for ensuring that municipalities and providers submit a CAP within 30 days of the letter of findings. Requests and responses are tracked in a system complaint CAP tracking system. A reminder system is in place to signal the approach of the 30 day timeline. A staff person assists the submitter of the CAP during the development of the CAP. If the CAP is received, but is deficient in some aspects, staff notifies the provider or municipality of the specific areas that the CAP is deficient, requests that a supplemental CAP be submitted and provides technical assistance until the plan is acceptable. The plans are designed to correct an immediate situation and prevent future reoccurrence. Requirements in a CAP are designed to include changes in policy & procedure, attendance at training offered by BEI, immediate and on-going staff training, and documentation through data runs that change has occurred. There may be responses that require the submission of data or records documenting implementation over a six month period of time until BEI is satisfied change has occurred.

Additionally, outcomes of a system complaint investigation are shared with Quality Assurance staff and with municipalities who contract with providers for the provision of EI services. Based on the on-site monitoring schedule, New York State's contractor is provided with a summary of a system complaint, if that provider has an upcoming monitoring review scheduled. New York State's monitoring contractor ensures that compliance has been achieved and reports this data back to New York State staff. If a systems complaint involves multiple significant issues or if a provider or municipality is the subject of multiple complaints, a request may be made to prioritize the subject for a monitoring visit. If the subject has been monitored prior to the instances leading to the complaint, a follow-up monitoring visit may be requested. If no monitoring visit is scheduled, other verification of correction methods are utilized, including review of a subset of additional child records that are requested and/or other relevant documentation and/or through interviews with providers, municipalities and parents.

Actions Taken if Noncompliance Not Corrected:

For this program year, there are 0 findings of noncompliance that have not yet been corrected. New York State implemented the following to pursue correction of noncompliance:

- Additional technical assistance has been provided by New York State staff, based on the specific finding of noncompliance. Technical assistance included working with the provider to determine what the root cause of the noncompliance was, and to provide strategies that the provider can implement to correct these findings at the systemic level;
- A second verification on-site review will be required subsequent to technical assistance provided to determine correction of noncompliance at 100%, or submission of additional and more current child records may be required for review;
- Egregious and ongoing noncompliance may be handled by withholding administrative funds, if a provider continues to have long standing noncompliance and has demonstrated minimal effort to implement activities to correct the noncompliance.

Correction of Remaining FFY 2009 Findings of Noncompliance

New York State implemented the procedures as described above to verify correction of noncompliance for the remaining 3 findings for 3 different providers who had not achieved correction of noncompliance at the systemic level, as reported in the APR for the previous program year. New York State staff provided technical assistance to each of the 3 providers who were having difficulty developing strategies to correct their noncompliance. Subsequent to the TA provided, New York State's contractor conducted an on-site visit and reviewed a subset of child records identified from the Department's data system to review for verification of correction of noncompliance. The review of the subset of child records determined that all 3 providers achieved 100% correction of noncompliance at the systemic level for the 3 old findings. Correction of noncompliance at the individual child level was previously reported in last year's APR as achieved at 100% compliance.

Correction of Remaining FFY 2008 Findings of Noncompliance

For Indicators # 1, 7, 8 A-C, there were 88 total findings of noncompliance based on local data in FFY 2008 that remained uncorrected as of the FFY 2010 APR. Seventy two of these findings have been verified as subsequently corrected (i.e. they were corrected, but not within one year of notification). The remaining sixteen FFY 2008 noncompliance findings remain uncorrected at this time.

The Department verified correction of findings by first confirming that either the services were delivered, the IFSP meeting was conducted within one year, or the toddler was no longer under the jurisdiction of the Part C Early Intervention Program.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

Correction of Remaining FFY 2007 Findings of Noncompliance

For Indicators # 1, 7, 8 A-C, there were 90 total findings of noncompliance based on local data in FFY 2007 that remained uncorrected as of the FFY 2010 APR. Seventy two of these findings have been verified as subsequently corrected (i.e. they were corrected, but not within one year of notification). The remaining eighteen FFY 2008 noncompliance findings remain uncorrected at this time. These findings of noncompliance are for the same local programs with findings of noncompliance in FFY 2008.

The Department verified correction of findings by first confirming that either the services were delivered, the IFSP meeting was conducted within one year, or the toddler was no longer under the jurisdiction of the Part C Early Intervention Program.

For the verification of systemic correction for local data findings, data for local programs that did not achieve 100% compliance in a given federal fiscal year are notified in writing of their noncompliance. Local data for subsequent years are checked, and local programs that are found to have a rate of 100% in a subsequent year for that compliance indicator are counted as having corrected the noncompliance. The finding is counted as timely corrected (within one year of notification) if the 100% rate was in any FFY up to one year after the date of notification. The finding is counted as subsequently corrected (i.e. corrected, but not timely) if the local program has a rate of 100% in a later FFY, but had not been timely corrected. If a finding is found to be corrected at one point, but later had a rate less than 100% in a FFY after the correction, the later noncompliance will result in a finding in the FFY in which notification occurred, and will be addressed in the appropriate APR.

The FFY 2007 due process finding that remains uncorrected as of the FFY 2010 APR will continue to be tracked, and will be reported on in future a APR. The local program continues to address their transition issues. The local program that was issued the finding of noncompliance for due process was also issued a data finding. The Department continues to work with the local program, and continues to provide technical assistance

At the time that the FFY 2007 and FFY 2008 data findings were issued, guidance on what was considered a finding, how and when notification should take place, and what was required to verify correction was not available. Specifically, it was not clear that findings to the same local program for the same issue in the subsequent FFY were not required to be reissued. As a result, New York State

reissued many “duplicate” local data findings (findings to the same local program for the same issue) in FFYs 2007 and 2008.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

New York State’s new data system, New York State Early Intervention System (NYEIS) will enable the Department to compile and review more real time data from municipalities and providers so that the labor intensive process of continuous on-site verification of correction reviews and continuous submission of child records may not be needed to determine if correction for all areas of noncompliance identified, was achieved. Data will be accessible through NYEIS for many items and topic areas that New York State monitors. The Department has provided access to its contractor, so that they may review the data in NYEIS to make determinations of correction of noncompliance. The Department plans to continue the rigorous verification of correction process, as needed, dependent upon the level of noncompliance, however, will also use NYEIS to supplement verification of correction activities.

Additional Information Required by the OSEP APR Response Table for this Indicator:

1. *OSEP’s Request: OSEP appreciates the State’s efforts regarding the timely correction in FFY 2010 of findings identified in FFY 2009 and looks forward to reviewing in the FFY 2011 APR, the State’s data demonstrating that the State timely corrected findings of noncompliance identified in FFY 2010 in accordance with IDEA section 635(a)(10)(A), 34 CFR §303.501, and OSEP Memo 09-02.*

NY’s Response: The State has effectively identified and addressed findings of noncompliance in FFY 2010.

2. *OSEP’s Request: The State must demonstrate, in the FFY 2011 APR, that the remaining three findings of noncompliance identified in FFY 2009, the remaining 88 findings of noncompliance identified in FFY 2008, and the remaining 90 findings of noncompliance identified in FFY 2007 that were not reported as corrected in the FFY 2010 APR were corrected.*

NY’s Response: The three findings of noncompliance in FFY 2009 have been verified as corrected. Seventy two of the 88 findings in FFY 2008 have been verified as corrected; 16 remain uncorrected as of the FFY 2011 APR. Seventy two of the findings in FFY 2007 have been verified as corrected; 18 remain uncorrected. The Department has prioritized working with local programs that have outstanding findings of noncompliance to revise systems and procedures, so that 100% compliance can be achieved.

3. *OSEP’s Request: When reporting on correction of findings of noncompliance in the FFY 2011 APR, the State must report that it verified that each EIS program with noncompliance identified in FFY 2010: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.*

NY’s Response:

4. *OSEP’s Request: If the State does not report 100% compliance for this indicator in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary.*

NY’s Response: The State has reviewed its improvement activities. No revisions have been made.

5. *OSEP’s Request: In addition, in reporting on Indicator 9 in the FFY 2011 APR, the State must use the Indicator 9 Worksheet.*

APR Template – Part C (4)

New York
State

NY's Response: The worksheet for Indicator # 9 is below.

6. OSEP's Request: In addition, in responding to Indicators 1, 7, 8A, 8B, and 8C in the FFY 2011 APR, the State must report on correction of the noncompliance described in this table under those indicators.

NY's Response: Correction of noncompliance for Indicators #1, 7, 8A, 8B, and 8C that is reported in the table below are described in those sections.

Indicator/Indicator Clusters General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 to 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 to 6/30/11)	(b) # of findings of noncompliance from (a) for which correction was verified no later than one year from identification	(c) # of findings of noncompliance from (a) for which correction was verified later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 0	Provider Monitoring 0	Provider Monitoring 0	Provider Monitoring 0
Dispute Resolution: Complaints, Hearings	System Complaints 4	System Complaints 4	System Complaints 3	System Complaints 1
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other				
Dispute Resolution: Complaints, Hearings				
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other				
Dispute Resolution:				

APR Template – Part C (4)

New York
State

Indicator/Indicator Clusters General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 to 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 to 6/30/11)	(b) # of findings of noncompliance from (a) for which correction was verified no later than one year from identification	(c) # of findings of noncompliance from (a) for which correction was verified later than one year from identification
Complaints, Hearings				

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

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other				
Dispute Resolution: Complaints, Hearings				

5. Percent of infants and toddlers birth to 1 with IFSPs

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other				
Dispute Resolution: Complaints, Hearings				

6. Percent of infants and toddlers birth to 3 with IFSPs

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other				
Dispute Resolution: Complaints, Hearings				

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. (PI14)

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 4	Provider Monitoring 4	Provider Monitoring 4	Provider Monitoring 0
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APR Template – Part C (4)

New York
State

Dispute Resolution: Complaints, Hearings	System Complaints 2	System Complaints 2	System Complaints 2	System Complaints 0
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8. Percent of all toddlers 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; (PI27)

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 4	Provider Monitoring 4	Provider Monitoring 4	Provider Monitoring 0
Dispute Resolution: Complaints, Hearings	System Complaints 0	System Complaints 0		

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

B. Notification to LEA, if child potentially eligible for Part B

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0		
Dispute Resolution: Complaints, Hearings	0	0		

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

C. Transition conference, if child potentially eligible for Part B.

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0		
Dispute Resolution: Complaints, Hearings	0	0		

Other Areas of Noncompliance:

PI25– The ongoing service coordinator coordinated and monitored delivery of services.

Monitoring Activities: Self-	Provider Monitoring	Provider Monitoring	Provider Monitoring	Provider Monitoring
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APR Template – Part C (4)

New York
State

Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1	0
Dispute Resolution: Complaints, Hearings	System Complaints 3	System Complaints 3	System Complaints 3	System Complaints 0
Other Areas of Noncompliance:				
PI 36 – All early intervention service coordinators shall fulfill those functions and activities necessary to assist and enable an eligible child and parent to receive the rights, procedural safeguards and services that are authorized to be provided under State and federal law, including other services not required under EI, but for which the family may be eligible.				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 5	Provider Monitoring 5	Provider Monitoring 4	Provider Monitoring 1
Dispute Resolution: Complaints, Hearings	System Complaints 1	System Complaints 1	System Complaints 1	System Complaints 0
Other Areas of Noncompliance:				
PI 42 - Requirements of Title 34 of Code of Federal regulations and other legal requirements for confidentiality were followed.				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 293	Provider Monitoring 293	Provider Monitoring 293	Provider Monitoring 0
Dispute Resolution: Complaints, Hearings	System Complaints 5	System Complaints 5	System Complaints 5	System Complaints 0
Other Areas of Noncompliance:				
PI 45– Providers maintain current appropriate license and certification as qualified personnel to provider EI services.				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 65	Provider Monitoring 65	Provider Monitoring 62	Provider Monitoring 3*
Dispute Resolution: Complaints, Hearings	System Complaints 3	System Complaints 3	System Complaints 3	System Complaints 0
Other Areas of Noncompliance:				

APR Template – Part C (4)

New York
State

PI 41 – The provider delivered services as authorized in the IFSP.

Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 13	Provider Monitoring 13	Provider Monitoring 11	Provider Monitoring 2
Dispute Resolution: Complaints, Hearings	System Complaints 2	System Complaints 2	System Complaints 2	
Other Areas of Noncompliance:				
At the initial contact with the parent, the initial service coordinator ensures that the parent has a copy of “The Early Intervention Program: A Parent's Guide,” which informs parents about the multidisciplinary evaluation and IFSP process, and parent rights and procedural safeguards, and reviews this guide with the parent, and documents this review in the child’s record.				
Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	Provider Monitoring 0	Provider Monitoring 0	Provider Monitoring 0	Provider Monitoring 0
Dispute Resolution: Complaints, Hearings	System Complaints 1	System Complaints 1	System Complaints 1	System Complaints 0
Sum the numbers down by column (a - c)	Provider Monitoring 385	Provider Monitoring 379	Provider Monitoring 6	
	System Complaints 21	System Complaints 20	System Complaints 1	
	Total 406	Total 399	Total 7	
Percent of noncompliance corrected within 1 year of identification [(b) / (a) x 100]	98.3%			

Notes: *These findings that were verified as corrected based on three provider agencies that have discontinued providing EI services to children.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
(20 U.S.C. 1416(a)(3)(B) and 1442)

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	Not required

Actual Target Data for FFY 2011:

Not required per instructions from OSEP.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	Not required

Actual Target Data for FFY 2011:

Not required per instructions from OSEP.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011 - 2012)	n/a

Indicator # 12 does not apply to New York State.

Actual Target Data for FFY 2011:

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	82% of mediation requests will result in mediation agreements

Actual Target Data for FFY 2011:

92.1% (93 out of 101) of mediations held resulted in mediation agreements.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

The FFY 2011 target of 82% was met. There were 168 requests for mediation and of those, 67 were withdrawn. Of the remaining 101 requests, 93 (92%) reached agreement

During FFY 2010, there were 208 requests for mediation and, of those, 71 (34.13%) requests were withdrawn. Of the remaining 137 requests, 130 (94.89%) reached agreement.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

The State does not propose any revisions to proposed targets and timelines. The target of 82% was met.

Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

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

FFY	Measurable and Rigorous Target
FFY 2011 (2011-2012)	100%

Actual Target Data for FFY 2011:

100% of the data, including 618 data, the SPP, and the APR were submitted on time and were accurate.

Regarding the collection and reporting of valid, reliable data, all data provided in the indicated SPP, APR, and 618 tables:

- cover the correct time period
- are consistent with the specified measurement
- are consistent within and between data sources
- are consistent with prior year's data, or have differences from prior year's data explained
- use the correct calculation, per OSEP's instructions
- include all required data for all programs
- passed all edit checks
- included written explanation of significant year-to-year changes to be included as data notes

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

The State does not propose any revisions to proposed targets and timelines. The target of 100% was met.