Overview of the Annual Performance Report Development:

The Part C Annual Performance Plan was developed by the Maryland Infants and Toddlers Program (MITP) staff in the Maryland State Department of Education (MSDE)/Division of Special Education/Early Intervention Services, in collaboration with the State Interagency Coordinating Council (SICC) and representatives of local Infants and Toddlers Programs (LITPs). In preparation for submission of the APR in February 2007, MITP staff collected and analyzed data on Monitoring Priority Indicators #1, 2, 5, 6, 7, 8, 9, 10, 11, 13, and 14 for FFY 2005 (July 1, 2005-June 30, 2006) from the statewide Part C database, LITP program reports and corrective action plans, on-site monitoring activities, and State-level complaint investigations. Data and analysis on new indicators #3 and 4 are reported in the State's revised State Performance Plan (SPP). The State is not required to report on Indicator #12 (Resolution Sessions) because it established Part C policies and procedures related to due process hearing requests.

The State's Part C database is a web-based system that was specifically developed to collect and track data on the participation of infants and toddlers with disabilities and their families in the monitoring priority areas identified by the State and the Office of Special Education Programs. Data collected at referral and IFSPs for every eligible child and family is entered into the database by local staff. MSDE and LITP staff generate reports on a regular basis to monitor compliance and performance and audit for data validity and reliability. Sampling was not used to collect and report data on any indicators in the State's Part C SPP and APR.

Stakeholder Input

Throughout FFY 2005, MSDE staff provided information and preliminary data on the Part C SPP/APR indicators and multiple opportunities for questions, comments, and recommendations from multiple stakeholders. Updates on SPP/APR federal reporting requirements and State/local performance data were provided at all SICC meetings in 2005-2006. In addition to the SICC membership documented in the SPP, representatives of LITPs, local Interagency Coordinating Councils (LICCs), preschool programs, family support services, and other community-based partners regularly attend monthly meetings of the SICC. SICC subcommittees assisted with the implementation of improvement activities for selected indicators in the SPP.

The July, September, and October 2006 SICC meetings focused on the State's performance on the provision of services in natural environments, transition from Part C at age three, and referral of infants from Neonatal Intensive Care Units and other referral sources that identify infants from birth to age one. These meetings included data review and panel presentations from parents and local administrators and providers to illustrate the impact of improvement strategies and describe ongoing challenges. Preliminary APR data was reviewed and analyzed in small group discussions at the November SICC Meeting and a draft of the APR and revised SPP was shared at the January 2007 meeting. Recommendations related to the presentation and analysis of APR data and improvement activities were incorporated into the APR and revised SPP.

In October 2006, MSDE held its annual Early Intervention/Special Education Leadership Conference for LITP Directors, local Directors of Special Education, local Family Support parent representatives, and Chairs of the SICC and State Special Education Advisory Committee. The three-day conference focused on the IDEA 2004 accountability requirements for State and local agencies involved in the provision of early intervention and special education services, and a review of preliminary data to be submitted in the State's Part C and Part B APRs in February 2007. Alan Coulter from the National Center for Special Education Accountability and Monitoring (NCSEAM) presented the new federal reporting requirements and impact on States and local early intervention programs, and worked with State and local program representatives to review and analyze State and local data and improvement strategies. This conference provided a comprehensive overview of current State and local accountability requirements and was responsible for a significant improvement in the understanding and involvement of local stakeholders in the improvement of outcomes for infants and toddlers, preschoolers, and students with disabilities and their families.

Public Reporting

MSDE will make the APR and revised SPP available to the public on the MSDE website at www.marylandpublicschools.org, shortly after submission to the Office of Special Education Programs on February 1, 2007. Copies of the APR and revised SPP will be provided to LITPs, the SICC, and other stakeholders simultaneously.

As required in IDEA2004, MSDE will report to the public on the performance of LITPs on Part C Indicators # 1,2, 5,6,7, and 8 for FFY 2005 (July 1, 2006-June 30, 2006). Performance data in numbers and percentages will be reported for each LITP, along with the State target, State performance data, and a narrative description of the indicator. In partnership with the Johns Hopkins University Center for Technology in Education (JHU/CTE), MSDE has developed an accessible and state-of-the-art format for local and State performance data that will be available on the MSDE website in April 2007. Through a map of the State, the public can click on the desired jurisdiction and see the performance data of the LITP in that jurisdiction on all the APR indicators, compared to the State targets and performance. In addition, the public will be able to select a particular indicator and view the performance of all LITPs for that indicator against the State target and performance. The SPP/APR website will be linked to related reports and data on MSDE's website to provide a context for early intervention and special education performance data.

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
2005	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.

Actual Target Data for FFY 2005:

96%

To report the percent of infants and toddlers with IFSPs who received early intervention services on their IFSPs in a timely manner between 7/1/05-6/30/06, MSDE generated a report from the statewide Part C database comparing the IFSP meeting date and the projected service initiation date for all services on initial IFSPs and any service added during the time period with the State's criteria for timely service delivery: not later than 30 days from the date of parent's signature on the IFSP. The

target data reported for this indicator includes data for all children from all 24 LITPS. MSDE and LITPs verified family-related reasons or IFSP team decision making for the legitimate initiation of services outside the 30-day timeline, and the electronic report was modified based on the results of the State and local review and validation.

Number of eligible children	Number/Percent of children with services within timelines	Number/Percent of family-related reasons for delays	Number/Percent of children with timely delivery of services
8680	8236	98	8334
	95%	1%	96%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

To increase the number of infants and toddlers receiving timely services and ensure that the data reported is accurate and valid, MSDE completed the following activities:

	service delivery are applied. After consultation with the OSEP Project Officer, MSDE clarified that consultation services or other services that are intended to assess or support a child's progress on an annual or other periodic basis would not be subject to the State's 30 day criteria, and that MSDE would be developing database reports that would track the timeliness of these services based on a comparison between the projected and actual initiation dates.	
Modification of the State Part C database	MSDE worked with the database developer to add new fields for the actual service initiation date and the reasons for untimely service delivery and to create new reports that will allow MSDE and LITPs to monitor the timely service delivery data on a regular basis. These new features in the database will be fully implemented in the next reporting and will used to generate data reported in the FY 08 Annual Performance Report.	MSDE staff JHU/CTE Datalab, Inc.
Data reporting and validation	The database developer generated summary and child-level timely services reports for the reporting period from the Part C database using the criteria described above. A local data report including all child records with services that were not delivered within the 30-day period was provided to each LITP for review and verification. LITPs corrected data entry errors and where possible provided reasons for untimely service delivery. MSDE staff conducted a thorough review of database records to validate the electronic reports. Following local verification and State-level validation, MSDE generated a final Timely Services Report, which included documented family-related reasons for delays	MSDE staff JHU/CTE Datalab, Inc. LITPs

	in service delivery.	
Data analysis/intervention	MSDE analyzed data from the database and local semi-annual and final program reports to determine if untimely service delivery was related to system capacity or other systemic reasons. On-site technical assistance was provided immediately to jurisdictions with suspected systemic issues, and improvement/corrective action plans will be required in 2006-2007 based on current data.	MSDE staff
Strategies to identify and address system capacity issues	Meeting compliance and performance targets in Maryland is affected by staffing shortages and federal, State, and local funding which has not kept pace with the increasing numbers of children and families referred to and served by LITPs.	MSDE staff SICC LITPs Parents, community partners
	In FFY 05, MSDE requested an additional \$6 million in State funding for LITPs to support the needs of a Part C eligible population that has increased by over 50% since SFY 01. This amount was based on an existing, non-mandatory statutory funding formula, which would generate 20% of the cost of early intervention in the State annually. In the 2006 General Assembly session, the SICC, parents, advocates, LITPs, and community partners supported legislation to mandate the statutory funding formula for the Maryland Infants and Toddlers Program.	
	Despite sustained efforts by stakeholders at every level, \$217,000 was added to the SFY 06 budget, while the SFY 07 budget was increased by only \$610,782. These funding levels are not sufficient to address system capacity issues in many LITPs. The legislation that passed was modified to ensure maintenance of effort funding by	

the Governor, rather than mandatory funding based on the numbers of children served annually.

With decreases in federal funding and minimal increases in State funding, LITPs intensified their efforts to secure increased local funding and community support. Some jurisdictions were successful in gaining increased funding for new staff, while others struggled with level funding to provide the services and supports to which eligible children and their families are entitled. In Maryland, over 60% of the cost of early intervention comes from local sources.

To meet compliance and performance targets and address staffing shortages, LITPs continued efforts to recruit and retain staff and to purchase services from private providers when they can be found and funding is available.

Prior to OSEP's issuance of the Part C monitoring indicators and the SPP/APR templates, MSDE was not able to track timely service delivery through the statewide database data to identify LITPs in need of assistance and intervention, as has been done with other compliance indicators. Baseline data reported in the SPP for this indicator was collected through a special summary report generated by the database developer, but local child-level data was not available at that time for review and validation. The baseline percentage of 86% did not include children whose services were not provided in a timely manner because of family-related reasons or reasons related to IFSP decision making based on the needs of the child.

The percent of infants and toddlers who received timely early intervention services increased from SPP Baseline of 86% to 96%, including 1% of children whose services were delayed due to family-related reasons. While the State did not meet the 100% compliance target for this indicator, progress toward meeting the target can be attributed to improved data review and reporting, the development and initial implementation of a system to track and monitor improvement in this area, and increased local efforts to monitor timely service delivery and document reasons for services delivered outside the timeline.

With the focus on timely service as a State priority and the system for tracking and monitoring local performance data, MSDE will have the capacity to assist LITPs to analyze their data, and implement improvement activities and corrective action plans, when required. During this reporting period, MSDE was able to identify and correct findings of non-compliance in other priority areas, such as the 45-Day timeline and Early Childhood transition, when local data was tracked, reported, and analyzed as the basis for improvement and correction. (See Indicator #9) Assisting LITPS to monitor and analyze their own data has been successful in improving both State and local performance in other areas, and is having the same effect in this area.

Local review and validation of the Timely Services Report has resulted in a better understanding at the State and local levels about the range of reasons why services may not be initiated within 30 days. State and local staff have discussed how decisions about when services will be delivered are made by IFSP teams to meet the needs of eligible children, and that many of these decisions are based on the fluid nature of the IFSP process and the needs of individual children. Local teams, including parents, often make decisions about when to begin services based on a sequence of service delivery that is directly related to the developmental needs of children. For example, special instruction may begin within the 30 days of the IFSP meeting, but speech/language services may be intentionally scheduled to begin two weeks later to maximize benefit for the child and build a better understanding of the child's needs for the family and providers. Another and more common example is the addition of services to an IFSP that are intended to be delivered once or periodically to assess a child's developmental status and/or as consultation to strengthen the delivery of other services to meet a child's identified needs.

In the next reporting period, LITPS who do not achieve substantial compliance will be required to implement specific activities to correct non-compliance in this area through corrective action plans. In December 2006, LITPs began entering the actual service initiation date and the reasons for the delivery of services outside the 30-day time period. Data reports will be generated and analyzed on a regular basis at the State and local levels, rather than at the end of the reporting period as is done currently. State and local review of records will continue to be done in the next reporting period to ensure that IFSP decision making is based on the needs of children and not lack of system capacity to meet those needs.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 06: In addition to the ongoing State monitoring and other improvement activities in the Part C SPP, MSDE will initiate the following:

Improvement Activities	Timeline/Resources	Justification
Identify State/local strategies to recruit and retain adequate numbers of service providers	2007-2011 MSDE/MITP staff, SICC Training and Recruitment Committee, LITP representatives, external consultant	Need to address long-term staffing shortages through varied and sustained strategies that target specific disciplines and regions of the State based on available data
Provide TA on flexible service delivery models	2007-2011 MSDE/MITP staff, external consultant	Need to meet needs of increased numbers of eligible children and families
Strengthen data collection and analysis as basis for targeting resources and accelerating progress toward full compliance	2007-2008 MSDE/MITP staff, database developer, LITP staff	Need to enhance database reporting for improved State and local analysis and improvement
Requesting additional State funding to support LITPs based on the statutory funding formula in the Annotated Code of Maryland	2006-2011 MSDE, SICC, LITPs, parents, and other stakeholders	Need to ensure that State funding for early intervention in Maryland keeps pace with the increased numbers of Part C eligible children and families

Part C State Annual Performance Report for FFY 05 (OMB NO: 1820-0578 / Expiration Date: 12/31/2009)

Monitoring Priority_____ - Page 7_

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Part C database, verified by LITPs, validated by MSDE, and reviewed by the SICC.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

FFY	Measurable and Rigorous Target
2005	88.5% of active eligible children will receive early intervention services primarily in natural environments (e.g., home and community settings)

Actual Target Data for FFY 05:

To report the percent of infants and toddlers who receive early intervention services primarily in natural environments, MSDE generated a report from the statewide database, which calculated the frequency of services delivered in all settings for all eligible children with IFSPs on 6/30/06. In addition, MSDE reviewed a report of all services that were not provided in natural environments to determine the presence of justifications on IFSPS.

Number and Percent of children whose Primary Setting is a Natural Environment (n=6712)

Home	Community Setting	Total in NE
5548	478	6026
82.6%	7.1%	89.7%

686 or 100% of children had justifications on the IFSP when services were not provided in natural environments.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

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

Part C State Annual Performance Report for FFY 05

Monitoring Priority _____ – Page 8_

(OMB NO: 1820-0578 / Expiration Date: 12/31/2009)

To meet the State's target for the percent of children primarily receiving services in natural environments, MSDE completed the following activities:

Improvement Activities	Activities Completed	Resources
State Monitoring and Technical Assistance	MSDE issues semi-annual local data profiles, which includes trend data on the number and percent of children served primarily in natural environments and the number and percent of children with justifications on their IFSPs when services are not provided in natural environments. Through the local profiles MSDE provides comments, technical assistance, and requires action based on the most current data reported on each of the State's priority indicators. During the reporting period, MSDE focused its monitoring efforts on ensuring that all children who were not receiving services in natural environments had justifications on their IFSPs and in the Part C database, and requested that all LITPs monitor the justifications to ensure that justifications are based on the needs of children.	MSDE staff
	MSDE monitors the results of local Improvement Plans through semi-annual and annual program reports submitted by each LITP as a condition of the local grant award. Technical assistance is provided on request or when the need is identified through local data or program reports.	
	At the end of the reporting period, there were 4 of 24 LITPS that did not meet the State performance target of 88.5% of children receiving services in natural environments, but all were in compliance with the requirement to include a justification on the IFSP that is entered into the Part C database.	
Local Improvement Planning	For the reporting period, MSDE required LITPs to implement activities to ensure that 100% of	MSDE staff LITPs

		Glate
	eligible children received services primarily in natural environments or had a justification on the IFSP based on the child's needs. All LITPs were required to implement local improvement plans to maintain or improve performance in this area as part of the annual local application for federal and State funding. Local improvement activities included training of local staff on IFSP decision making which incorporates evidence-based practices, increasing the inclusion of infants and toddlers with disabilities in local child care, library and other community programs, and regular review of settings data and justifications on IFSPs.	
Training on Evidence-Based Practices	MSDE's web-based IFSP tutorial focuses on evidence-based practices and IFSP decision making which support the provision of services in natural environments. LITP Directors and teams received training and TA on how to use the tutorial to support improvement planning related to providing services in natural environments, and incorporated the use of the tutorial into local CSPD plans.	MSDE staff JHU/CTE External Consultant

In the next reporting period, MSDE will focus on the following improvement activities identified in the SPP:

- •LITPs who have not met the State performance target will be required to implement specific activities to increase the percent of infants and toddlers receiving services primarily in natural environments and to ensure that justifications are based on the needs of children when services are not provided in these environments.
- •Focused monitoring of the justifications entered into the database and identification of LITPs in need of targeted improvement activities or corrective action plans if justifications are not clearly related to the needs of children.
- •Provision of targeted technical assistance and training to support evidence-based practices and IFSP decision making that supports the provision of services in natural environments.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY)
[If applicable]

Part C State Annual Performance Report (APR) for _____ (Insert FFY)

NEW INDICATOR – STATUS AT ENTRY DATA REPORTED IN REVISED SPP

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

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

FFY	Measurable and Rigorous Target
(Insert FFY)	(Insert Measurable and Rigorous Target.)

Actual Target Data for (Insert FFY):

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for (Insert FFY):

Part C State Annual Performance Report (APR) for _____ (Insert FFY)

NEW INDICATOR – BASELINE DATA REPORTED IN REVISED SPP

Overview of the Annual Performance Report Development:

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.

FFY	Measurable and Rigorous Target
(Insert FFY)	(Insert Measurable and Rigorous Target.)

Actual Target Data for (Insert FFY):

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for (Insert FFY):

APR Template – Part C (4)

Maryland State

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY) [If applicable]

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Part C database, verified by LITPs, validated by MSDE, and reviewed by the SICC.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2005	The percent of infants and toddlers birth to one with IFSPs will be equal to or greater than 1.33% of the infants and toddlers of the same age in the general population.

Actual Target Data for FFY05:

Based on data provided by OSEP on the WESTAT website, Maryland served 1.24% of its 2005 resident birth to one population in the reporting period.

- A. Of the 23 States and 3 territories classified by OSEP as having a broad eligibility definition in 2005, Maryland ranks 9th.
- B. Compared to national data, Maryland served .23% more children birth to one than the national baseline and ranked 17th among the 50 States, the District of Columbia, and five territories. When the number of infants and toddlers at risk are excluded, Maryland ranks 16th and the difference above the national baseline is .29%

Maryland's FFY 05 target data is based on the State's 2005 Child Count (618 data) submitted in February 2006 and the State's 2005 resident population reported by the U.S. Census Bureau. Using a snapshot count of the number of children from birth to one served as of 6/30/06 generated from its Part C database, the State can report that it is serving 1.35% of its 2005 resident population, which exceeds the target for the reporting period. Prior to 2005, Maryland was tracking the percent of the birth-one and birth-three populations served using the number of births in the State and each jurisdiction, rather than the resident population now required by OSEP.

The charts below provide a comparison of the FFY 05 target data for this indicator using Maryland's 2005 618 data, 6/30/06 snapshot data, and the 2005 birth data obtained from State Vital Statistics.

Birth-One Population Served	2005 Resident Population	Percent Served
951 (618 Data)	76,493	1.24%
1030 (6/30/06 Snapshot)	76,493	1.36%

Birth-One Population Served	2005 Births*	Percent Served
951 (618 Data)	74,880	1.27%
1030 (6/30/06 Snapshot)	74,880	1.38%

^{*}This chart is for comparison purposes because the State has been using the most recent State and local birth data for over five years to report and track the percent of children served in this age range. The number of births in the State was lower than the birth—one resident population in 2005, and therefore the percent served using birth data is higher. In compliance with the measurement criteria required by OSEP, birth data will no longer be used to calculate the percents served for the child find indicators 5 and 6.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY05:

To increase the number of children from birth to age one receiving early intervention services and ensure that the data is valid and reliable, MSDE and LITPs completed the following activities:

Improvement Activities	Activities Completed	Resources
State and Local Child Find and	MSDE focused on State interagency child find activities 5	MSDE staff
Public Awareness	to ensure the identification of	DHMH staff
	eligible infants and their families, including:	DHR staff
	•Collaboration with the State Department of Health and Mental Hygiene (DHMH) to ensure that infants with hearing loss identified through universal newborn hearing screening are referred to local single points of entry.	LITPs
	Participation in the State-level Work Group on Improving Early Identification of Children with Developmental Disorders to plan implementation of the 2006	

	American Academy of Pediatrics Policy Statement on Developmental Surveillance and Screening.	
	•Development of joint policies and procedures with the Department of Human Resources (DHR) in compliance with CAPTA and IDEA for the referral of children who are abused, neglected, or drugaffected to local single points of entry.	
	As required under the annual local grant award from MSDE, LITPs completed the following activities related to ensuring the identification of eligible infants and their families:	
	•Implemented jointly developed local policies and procedures with local departments of social services for the new referral requirements under CAPTA and IDEA.	
	•Implemented data-driven public awareness plans targeting referral sources for children birthone and required improvement activities and tracked/reported progress data in semi-annual and final program reports. Sustained outreach and collaborative efforts with hospitals, especially NICUs, and physicians, as well as coordinated efforts with local early childhood programs have been most successful in increasing the number of children in this age range receiving services.	
State tracking and monitoring	Through State and local profiles, MSDE reports annually to stakeholders on the percent of children from birth-one and birth-three receiving services in Maryland and through the LITP in each of Maryland's 24 jurisdictions. The State data profile ranks LITPs in order of	MSDE staff

	performance, while the individual local profiles provide trend data and direction from MSDE related to required activities. Until the submission of the SPP, MSDE had set a local performance target for this indicator of at least 1% of the most recent number of births. Those LITPs that did not meet this target and were not making progress were required to examine public awareness and child find activities and local eligibility procedures and to develop and implement strategies to improve performance.	
SICC/MSDE joint activities	Members of the SICC Outreach Committee and MSDE staff established outreach to homeless shelters, and revisions to the Physician's Guide as priority activities, and planned implementation.	MSDE staff SICC

By the end of the reporting period, the State had met its FFY 05 target, serving 1.35% of the 0-1 resident population. Since 2002, there has been a gradual, but steady increase in the State percent of infants served, and this is the primarily the result of targeted State and local outreach and coordinated child find. In FFY 05, referrals of children from birth-one increased by 175, but referral rates from most referral sources remained consistent, with increased referrals from child care providers and local departments of social services.

Local percents of children in this age range must be analyzed over time and in the context of local demographics to determine if low-performing LITPs are experiencing natural fluctuations in referrals or are in need of targeted improvement activities to increase referrals of children under age one. At the end of the reporting period, 16 of the 24 jurisdictions were exceeding, meeting, or making significant progress toward meeting the new State target. Of the eight LITPs that were not making significant progress toward the State target, four would be characterized as rural jurisdictions serving the fewest children and families with snapshot counts of less than 25. Three of the four remaining jurisdictions are consistently serving increased percentages of the birth-three population. In the analysis of referral patterns and eligibility procedures for this reporting period there was no evidence of non-compliance.

In the next reporting period, MSDE will focus on the following improvement activities identified in the SPP:

- 1) Publication and distribution of the revised Physician's Guide to health care professionals in the State.
- 2) Strengthening requirements in the local application for sustained collaboration with local child care providers, physicians, hospitals, audiologists, and local departments of social services.

- 3) Working with low-performing LITPs to improve analysis of trend data, referral patterns, and impact of targeted public awareness and improvement activities.
- 4) Continuing State-level interagency activities to facilitate data exchange with the Universal Newborn Hearing Screening Program, implementation of the Autism Screening Pilot, planning with the AAP to implement its policy statement on developmental surveillance, and monitoring of the State/local CAPTA/IDEA referral procedures.
- 5) Implementation of new database report that will allow the State and LITPs to track age at referral by referral source on regular basis.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY)

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Part C database, verified by LITPs, validated by MSDE, and reviewed by the SICC.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2005	The percent of infants and toddlers birth to three with IFSPs will be equal to or greater than 2.88% of the infants and toddlers of the same age in the general population.

Actual Target Data for FFY 05:

Based on data provided by OSEP on the WESTAT website, Maryland met its target of 2.88% of its 2005 resident birth to three population in the reporting period.

- C. Of the 24 States and 3 territories classified by OSEP as having a broad eligibility definition in 2005, Maryland ranks 9th.
- D. Compared to national data, Maryland served .48% more children birth to three than the national baseline and ranked 19th among the 50 States, the District of Columbia, and five territories. When the number of infants and toddlers at risk are excluded, Maryland ranks 18th and the difference above the national baseline is .54%

Maryland's FFY 05 target data is based on the State's 2005 Child Count (618 data) submitted in February 2006 and the State's 2005 resident population reported by the U.S. Census Bureau. Using a snapshot count of the number of children from birth to three served as of 6/30/06 generated from its Part C database, the State can report that it is serving 2.93% of its 2005 resident population, which exceeds the target for the reporting period. Prior to 2005, Maryland was tracking the percent of the

birth-one and birth-three populations served using the number of births in the State and each jurisdiction, rather than the resident population now required by OSEP.

The charts below provide a comparison of the FFY 05 target data for this indicator using Maryland's 2005 618 data, 6/30/06 snapshot data, and the 2005 birth data obtained from State Vital Statistics.

Birth-Three Population Served	2005 Resident Population	Percent Served
6607(618 Data)	229,517	2.88%
6725 (6/30/06 Snapshot)	229,517	2.93%

Birth-Three Population Served	2003-2005 Births*	Percent Served
6607 (618 Data)	224,245	2.95%
6725 (6/30/06 Snapshot)	224,245	3.0%

^{*}This chart is for comparison purposes because the State has been using the most recent State and local **birth** data for over five years to report and track the percent of children served in this age range. The number of births in the State between 2003-2005 was lower than the birth—three resident population in 2005, and therefore the percent served using birth data is higher. In compliance with the measurement criteria required by OSEP, birth data will no longer be used to calculate the percents served for the child find indicators 5 and 6.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

To increase the number of children from birth to three receiving early intervention services and ensure that the data is valid and reliable, MSDE completed the following activities:

Improvement Activities	Activities Completed	Resources
State and Local Child Find and Public Awareness	MSDE completed State interagency child find activities to ensure the identification of eligible infants and toddlers and their families. In addition to the activities described in Indicator #5 which are also applicable to the birth-three population, MSDE focused on the following: •Planning and implementation of a pilot project to study and improve screening practices for Autism Spectrum Disorder, with an emphasis on early identification by pediatricians and primary care physicians.	MSDE staff DHMH staff DHR staff Autism Pilot Advisory Committee LITPs
	Collaboration with the	

	(-)	State
	Department's new Office of Child Care in the Division of Early Childhood Development to implement the Inclusive Child Care Action Plan, which includes integration of guidelines, educational materials, and professional development activities to assist child care providers to identify and support the needs of young children with disabilities in inclusive settings in partnership with LITPs and local preschool special education programs.	
	In addition to the activities described in Indicator #5, LITPs implemented data-driven public awareness plans targeting referral sources for children birth-three and required improvement activities and tracked/reported progress data in semi-annual and final program reports. Sustained outreach through ongoing dissemination of materials, presentations, and joint professional development with the child care providers, the military community, local public and private agencies and organizations, and parent/family support groups have been most successful in increasing the number of children and families receiving services.	
State tracking and monitoring	Through State and local profiles, MSDE reports annually to stakeholders on the percent of children from birth-three receiving services in Maryland and through the LITP in each of Maryland's 24 jurisdictions. The State data profile ranks LITPs in order of performance, while the individual local profiles provide trend data and direction from MSDE related to required	MSDE staff

activities. Until the submission of the SPP, MSDE had set a local performance target for this indicator of **at least** 2% of the most recent three years of births. Those LITPs that did not meet

performance.	
SICC/MSDE joint activities Members of the SICC Outreat Committee and MSDE staff established partnerships with community organizations, outreach to homeless shelter and revisions to the Physicial Guide as priority activities, ar planned initial implementation	mSDE staff n SICC rs, in's nd

By the end of the reporting period, the State was serving 2.95% of its birth-three resident population. Since SFY 01, the numbers of infants and toddlers and their families served by LITPs has increased 51%, with annual increases throughout the time period. In FFY 05, referrals of children from birth to age three increased by 405, and referral rates from most referral sources remained consistent, with increased rates from local departments of social services and health. These increased referral rates are primarily attributed to the implementation of local CAPTA/IDEA procedures and tracking of premature/at-risk infants and subsequent referral by local health department nurses.

Local percents of children served must be analyzed over time (trend data) and in the context of local demographics to determine if low-performing LITPS are experiencing natural fluctuations in referrals or are in need of targeted improvement activities. During this reporting period, 15 LITPs were exceeding or meeting the new State target, four LITPs were above 2.5% and making progress, and four LITPs were below 2% and were not making significant progress. Of the four low-performing LITPs, three are rural jurisdictions serving the fewest children in the State, with snapshot counts of less than 25. In the analysis of referral patterns and eligibility procedures for this period, there was no evidence of non-compliance.

In the next reporting period, MSDE will focus on the following improvement activities identified in the SPP:

- 1) Publication and distribution of the revised Physician's Guide to health care professionals in the State.
- 2) Strengthening requirements in the local application for sustained collaboration with local child care providers, physicians, hospitals, audiologists, and local departments of social services.
- 3) Working with low-performing LITPs to improve analysis of trend data, referral patterns, and impact of targeted public awareness and improvement activities.
- 4) Continuing State-level interagency activities to facilitate data exchange with the Universal Newborn Hearing Screening Program, implementation of the Autism Screening Pilot, planning with the AAP to implement its policy statement on developmental surveillance, and monitoring of the State/local CAPTA/IDEA referral procedures.

APR Template - Part C (4)

Maryland State

5) Implementation of new database report that will allow the State and LITPs to track age at referral by referral source on regular basis.

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Part C database, verified by LITPs, validated by MSDE, and reviewed by the SICC.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2005	Evaluation and assessment and the initial IFSP meeting are conducted within 45 days of the referral for 100% of eligible children.

Actual Target Data for FFY 05:

92%

To report the target data for this indicator, MSDE generated State and local reports throughout the reporting period from the statewide Part C database. The reports are based on the calculation of the number of days between the date of referral and the date of the initial IFSP meeting for each child referred in a selected time period, and provide the number/percent of meetings held within the timelines and the reasons why IFSP meetings were not held within timelines. For this calculation, the referral date is considered Day #1 and an untimely IFSP meeting would be any meeting held on Day #46 or later. When the date of an untimely IFSP meeting (46 days or later from the referral date) is entered into the database, a prompt appears requesting that the reason for the late meeting be entered. Summary and individual child record data generated by the 45 day timeline is validated by State and local staff.

Referral Range	Number/Percent within 45 days	Number/Percent delayed due to family- related reasons	Total Number/Percent in compliance with timeline
7/1/05-12/30/05	2271	490	2761
n=3259	70%	15%	85%
1/1/06-6/30/06	2811	350	3161
n=3421	82%	10%	92%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

To meet the compliance target for Indicator #7 and ensure that the data reported is accurate and valid, MSDE and LITPs completed the following improvement activities:

Improvement Activities	Activities completed	Resources
State monitoring and TA	MSDE monitored compliance with the 45-day timeline through the Part C database and the dissemination of semi-annual State and local data profiles which report the % of children for whom timely initial IFSP meetings were held. MSDE addressed the % of children for whom timelines were not met as reported in the SPP baseline data by requiring corrective actions or targeted improvement strategies to ensure achievement or maintenance of local compliance in this indicator.	MSDE staff
	Using the baseline data reported in the SPP and data collected in the first quarter of FFY 05, MSDE required five LITPs that were not in substantial compliance with this timeline and were not making significant progress to implement a Corrective Action Plan to correct the noncompliance within 12 months and submit quarterly data to demonstrate progress. All five LITPs corrected the noncompliance in this indicator within the 12-month period beginning October 2005.	
	All other LITPs were required to implement improvement strategies and track data regularly to ensure that strategies were resulting in ongoing and improved compliance with the timeline. MSDE provided technical assistance on request or when systemic issues were identified in program or data reports.	
Local Corrective Action and Improvement Planning	As required through State monitoring and by the annual grant award for federal and State funding, LITPs developed and implemented corrective action and improvement strategies to ensure that the 45-day timeline was met for 100% of infants and toddlers and their families. LITPs reported progress in semi-annual and final program reports, and quarterly corrective action reports.	MSDE staff LITPs
	Successful strategies implemented by LITPS to improve compliance included:	

	Addition of new staff and flexible use of staff; improved evaluation and assessment procedures; more efficient scheduling; professional development to improve communication between service coordinators and families; improved data collection and analysis of reasons for missed timelines; sharing data and reasons for missed timelines to engage local stakeholders in interagency problem solving; and proactive tracking of upcoming IFSP meeting dates to identify resources to meet timelines for individual children.	
Improved data collection and analysis	FFY 05 was the first full year for which data on the reasons for missed timelines was available from the database for analysis and development of improvement strategies. Many of the successful strategies implemented by LITPs were identified by looking at patterns in the reasons for missed timelines and following up with service coordinators and providers to eliminate any simple barriers to improving compliance in this area. It was also possible to begin to document the impact of short-term and long-term staffing shortages and system capacity issues through regular review of the reasons for missed timelines and the reports which summarize the number of days late initial IFSP meetings were held.	MSDE staff LITPs
Strategies to identify and address system capacity issues	See Indicator #1	

In FFY 05, the Maryland Infants and Toddlers Program made progress toward meeting the 100% compliance target for this indicator by conducting evaluations and assessments and initial IFSP meetings within timelines or documenting family-related reasons for 92% of eligible children referred in the time period. This represents an increase of 7% over the SPP baseline data. State and local analysis and validation of the 45 day timeline data indicates:

- •All LITPs increased their percent of compliance in the reporting period except for three, in which there was only one child fewer for whom timelines were met;
- •Several jurisdictions made significant increases as a result of corrective action plans and improvement strategies, e.g., One jurisdiction went from 74% to 94% with an increase of 100 children with timely meetings, another increased from 74% to 90% with 40 more children in compliance, and the jurisdiction serving the largest number of children reached 100% compliance by increasing the number of children with timely meetings by 168.
- •One jurisdiction with a corrective action plan reached compliance during the reporting period but documented staffing shortages caused slippage subsequently. MSDE staff provided ongoing technical assistance to interagency representatives to implement short-term and long-term corrective action and improvement strategies.

Through data analysis and targeted State and local improvement strategies, LITPs have corrected many of the procedural problems that were barriers to compliance and are working to resolve the more difficult issues related to short-term and long-term staffing shortages. Analysis of the reasons why 8% of eligible children (n=260) did not have timely evaluation and assessments and initial IFSP meetings in the reporting period indicates the following:

- •Staff shortages/unavailability @ 44% or 114 children
- •Difficulty scheduling appointments @ 23% or 60 children; 40 of these delays appear to be family-related, but data needs further validation.
- •Reason not entered in database @ 21% or 55
- •Delay in receiving paperwork to document need for surrogate parent @ 6% or 15
- •Provider cancellation due to sickness, emergency @ 5% or 13
- •Inclement weather 1% or 3 children

Unavailability of staff was a barrier to conducting timely evaluations and assessments and initial IFSP meetings in some jurisdictions. Short-term shortages (e.g., staff on extended sick leave) were resolved in some cases by purchasing contractual services, but rural areas and regions which are not financially competitive have more difficulty finding adequate staff in certain disciplines to meet this timeline on a consistent basis. LITPs that have identified staffing shortages develop and implement strategies to recruit or contract with staff, deploy staff temporarily from other responsibilities, and schedule the earliest possible dates for evaluation and assessment and initial IFSP meetings.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 06:

In addition to the ongoing improvement activities in the Part C SPP, MSDE will complete the following:

Improvement Activities	Timeline/Resources	Justification
Develop and implement State/local strategies to recruit and retain adequate numbers of service providers	2007-2011 MSDE/MITP staff, SICC Training and Recruitment Committee, LITP representatives	Need to address long-term staffing shortages through varied and sustained strategies that target specific disciplines and regions of the State based on available data
Strengthen data collection and analysis as basis for targeting resources and accelerating progress toward full compliance	2007-2008 MSDE/MITP staff, database developer	Need to enhance database reports by linking the number of days that an IFSP meeting is late to the identified reason for lateness
Request additional State funding to support LITPs based on the statutory funding formula in the Annotated Code of Maryland	2006-2011 MSDE, SICC, LITPs	Need to ensure that State funding for early intervention in Maryland keeps pace with the increased numbers of Part C eligible children and families

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Part C database, verified by LITPs, validated by MSDE, and reviewed by the SICC.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

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

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
2005	100% of children exiting Part C receive timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including: A. IFSPS with transition steps and services
	B. Notification to LEA, and
	C. Transition planning meetings within timelines

Actual Target Data for FFY 05: To report the target data for this indicator, MSDE generated State and local reports throughout the reporting period from the statewide Part C database, and validated data in conjunction with LITPs. Data reported for Indicator 8A is based on monitoring results for 12 LITPS through review of IFSP outcomes and transition plans entered in the database and in early intervention records for children who transitioned during the reporting period.

Data for Indicator 8B and C were collected from the database from which reports on the timeliness of transition planning meetings are generated. The reports for Indicators 8B and C are based on the calculation of the number of days between the date of the transition planning meeting and the child's third birthday, and provide the number/percent of meetings held within the timelines and the reasons why meetings were not held within timelines. When the date of an untimely transition planning

meeting (date later than 90 days before the child's third birthday) is entered into the database, a prompt appears requesting that the reason for the late meeting be entered.

- **A.** During the reporting period, 97.6% (696) of records reviewed by MSDE and LITPs had transition steps and services. (n=713)
- **B.** Between 1/1/06-6/30/06 local school systems were notified of 98.9% (1754) of children who transitioned during the time period. (n=1773)
- **C.** Between 1/1/06-6/30/06, 92% of children who transitioned had a transition planning meeting within the timelines or there was a documented family-related reason for the delay. See table below.

Transition Date Range	Number/Percent within timelines	Number/Percent delayed due to family- related reasons	Total Number/Percent in compliance with timelines
7/1/05-12/30/05	1199	278	1477
n=1690	71%	16%	87%
1/1/06-6/30/06	1265	371	1636
n=1773	71%	21%	92%

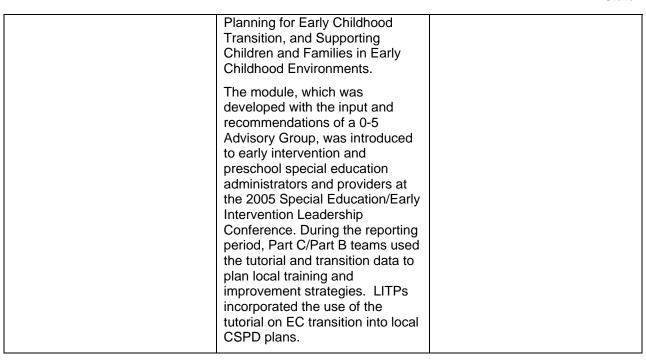
Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

To meet the compliance target for Indicator #8 and ensure that the data reported is accurate and valid, MSDE and LITPs completed the following improvement activities:

Improvement Activities	Activities Completed	Resources
State monitoring and TA	MSDE monitored compliance with the Transition Planning Meeting timeline through the Part C database and the dissemination of semi-annual State and local data profiles which report the % of children for whom timely meetings were held. MSDE addressed the % of children for whom timelines were not met as reported in the SPP baseline data by requiring corrective actions or targeted improvement strategies to ensure achieving or maintaining local compliance in this indicator.	MSDE staff
	Using the baseline data reported in the SPP and data collected in the first quarter of FFY 05, MSDE required 12 LITPs that were not in substantial compliance with	

		State
	the transition timeline and were not making significant progress to implement a Corrective Action Plan to correct the noncompliance within 12 months and submit quarterly data to demonstrate progress. All 12 LITPs, in addition to the 7 LITPs that had not corrected noncompliance at the end of the baseline period, corrected the noncompliance in this indicator within the 12-month period beginning October 2005.	
	All other LITPs were required to implement improvement strategies and track data regularly to ensure that strategies were resulting in ongoing and improved compliance with the timeline. MSDE provided technical assistance on request or when systemic issues were identified in program or data reports.	
	MSDE revised the Statewide Transition Policies and Procedures to clarify issues related to Part C's responsibility to invite the Part B representative to the transition planning meeting, Part B's responsibility to participate, and Part C's responsibility to hold the meeting even if Part B does not attend.	
Local Corrective Action and Improvement Planning	As required through State monitoring and by the annual grant award for federal and State funding, LITPs developed and implemented corrective action and improvement strategies to ensure that the transition planning meeting was timely for 100% of infants and toddlers transitioning at age three. LITPs reported progress in semi-annual and final program reports, and quarterly corrective action reports.	MSDE staff LITPs
	Successful strategies implemented by LITPS to improve compliance included: improved collaboration and	

	scheduling with Part B preschool staff, joint Part C/Part B professional development on revised local transition policies and procedures, proactive teambased tracking of upcoming meeting dates to ensure timeliness, regular data tracking, monitoring, and validation by record reviews, and immediate correction of individual noncompliance when identified in data review.	
Improved data collection and analysis	MSDE and LITPs tracked transition compliance data regularly throughout the reporting period, identifying reasons for untimely meetings, and implementing strategies for correction and improvement. LITPs completed record reviews to monitor the inclusion of transition outcomes and activities and to validate the % of children with timely transition meetings.	MSDE staff LITPs
	MSDE and LITPs identified the need for enhanced database reports, which would allow LITPs to track the following: •Reasons why transition planning meetings were not held at all, including late referrals or families	
	•Transition planning meetings that were late because the child was referred after 31.5 months and may not have been determined eligible until after the 90 day period before the child's third birthday.	
Implementation of the Transition module of the online Early Childhood (EC) tutorial	During the reporting period, MSDE launched its online EC transition module designed to provide guidance and professional development strategies for a smooth transition for children and families exiting Part C to preschool special education and/or other community services. This web- based training tool includes sessions on Legal Requirements,	MSDE staff JHU/CTE LITPs



In FFY 05, MSDE/MITP made progress toward meeting the 100% compliance target for Indicator 8C by holding 92% of required transition planning meetings within timelines or documenting family-related reasons for delays. This represents a 23% increase over SPP baseline data. State and local analysis and validation of the transition data indicates:

- •All LITPs significantly increased their percent of compliance in the reporting period. For example, one LITP improved from 19% to 96% compliance, holding 23 of 26 meetings within timelines, with two meetings delayed for family-related reasons and one meeting delayed because of scheduling problems; another LITP increased from 75% to 99%, holding 355 of 357 meetings within timelines or documenting family-related reasons, with only two meetings delayed for other reasons.
- •The number of children for whom no meeting dates were entered into the data system decreased from 89 from 1/1/05-6/30/05 to 19 during 1/1/06-6/30/06.

Through data analysis and targeted State and local improvement strategies, LITPs have corrected many of the procedural problems that were barriers to scheduling and holding timely transition meetings and are working to resolve issues related to staff availability and collaboration with Part B colleagues.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 06

In addition to the improvement activities identified in the SPP, MSDE will initiate the following:

Improvement Activities	Timeline/Resources	Justification
Alignment of Part C and Part B transition data collection and analysis	2007-2011 Part C/Part B Data staff	Need to ensure that data on children transitioning from Part C to Part B is accurate and reliable across systems
Joint Part C/Part B monitoring of	2007-2011	Need to ensure that the transition

LITPs and LSSs on early childhood transition indicators	Part C/Part B Monitoring staff	planning, determination of Part B eligibility, and development of timely IEPs result in smooth transition for children and families exiting early intervention and entering preschool special education
Modification of Part C database to include expanded reasons for late transition planning meetings or meetings that are not held at all.	2007 MSDE data staff	Need for improved tracking and analysis of transition compliance data
Dissemination of updated transition handbook, Stepping Ahead to Success	2007 MSDE staff, SICC Outreach Committee	Need for sustained guidance and technical assistance on early childhood transition to parents and early childhood professionals

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Part C database, onsite visits, record reviews, and complaint investigations. Data was verified by LITPs, validated by MSDE, and reviewed by the SICC.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2005	Maryland's general supervision system (including monitoring, complaints, hearings, etc.) will identify and correct 100% of noncompliance as soon as possible but in no case later than one year from identification.

Actual Target Data for FFY 05:

MSDE identified October 2005 - October 2006 as the time frame for identification and correction of noncompliance and issued local data profiles in October 2005, which served as the notice of identification of noncompliance to LITPs for each priority indicator. MSDE required LITPs notified of noncompliance to develop and implement corrective action plans to correct the noncompliance within 12 months, and to submit quarterly reports including analysis of data and impact of corrective actions on progress toward compliance. Through the online Part C database, MSDE tracked the progress of LITPs with corrective action plans and was able to document the correction of noncompliance by looking at data throughout the time frame, rather than just at the end of the designated period.

The number of findings reported in FFY 05 includes those that were reported as uncorrected for the baseline period, as well as those identified during the reporting period. Corrected findings reported below were documented through the Part C database and local corrective action and program reports during the 12 month period beginning October 2005.

Percent of Noncompliance Corrected within One Year of Identification

Total Number of Findings of	Total Number of	Percent of Findings
Noncompliance	Findings Corrected	Corrected
46	45	98%

Findings and Corrections by Monitoring Priorities

Priority indicator	Number of findings	Number of corrections	Percent corrected
Timely Service Delivery	11	11	100%
45-day Timeline	11	10	91%
Timely Transition Planning Meetings	19	19	100%
Evaluation/Assessment Results in All Areas	5	5	100%

Timely Service Delivery – Summary of Correction of 11 findings

To report baseline data for Indicator #1, MSDE contracted with the database developer to generate a special report comparing the dates of the IFSP meetings and the projected service initiation with the State's 30-day timeline for the time period 7/1/04-6/30/05. The baseline report included the number and percent of timely services for all children meeting the criteria in each LITP, but did not include family-related reasons for delays or child-level data for verification. MSDE reported the baseline data to LITPs through the next local data profile and required all LITPs to include improvement strategies in local improvement plans to meet the 100% compliance target. To report target data for FFY 05, the database developer generated a timely services report with summary and child-level data for the time period data validation and record reviews. The number of corrections reported for this indicator is the result of comparing the percent of timely service delivery in the reports generated by the database developer for the two time periods and reporting correction for those LITPs in substantial compliance.

Of the 11 findings of noncompliance that were identified in 12/05, 11 were corrected by 6/30/06.

45-day Timeline - Summary of Correction of 11 findings

Of the 6 findings of noncompliance that had not been corrected for Indicator #7 in the 6/30/05 baseline data:

- 3 were corrected by 9/30/05
- 1 was corrected by 3/31/06
- 1 was corrected by 6/30/06

• 1 was corrected by 9/30/06, but was not included in the % of correction for this indicator because the period of correction was outside the reporting period.

Of the 5 findings of non-compliance for Indicator #7 in 10/05 that were required to be corrected by 10/06:

- 2 were corrected by 3/31/06
- 2 were corrected by 6/30/06
- 1 was corrected by 9/30/06; this finding was included in the % of correction because it was corrected within one year of identification.

Timely Transition Planning Meetings – Summary of Correction of 19 findings

Of the 7 findings of non-compliance that had not been corrected for Indicator #8 in the 6/30/05 baseline data:

- 2 were corrected by 9/30/05
- 2 were corrected by 10/30/05
- 2 were corrected by 12/31/05
- 1 was corrected by 3/31/06

Of the 12 findings of non-compliance for Indicator #8 in 10/05 that were required to be corrected by 10/06:

- 8 were corrected by 12/31/05
- 1 was corrected by 3/31/06
- 2 were corrected by 6/30/06
- 1 was corrected by 9/30/06; this finding was included in the % of correction because it was corrected within one year of identification.

Initial Evaluation and Assessment Results in all Developmental Domains – Summary of Correction of 5 findings

Of the 5 findings of non-compliance for this State monitoring indicator in 10/05 that were required to be corrected by 10/06:

- 1 was corrected by 12/31/05
- 2 were corrected by 3/30/06
- 2 were corrected by 6/30/06

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

Improvement Activities	Activities Completed	Resources
State monitoring and TA	During the reporting period, MSDE monitored all 24 LITPs through data extracted from the statewide Part C database for the federal/State priority indicators, verified the accuracy and completeness of the data collaboratively with LITPs, and issued semi-annual State/local data profiles displaying trend data, current percentages of performance/compliance for each indicator, and number of	MSDE staff LITPs

	complaints received. Through the local data profiles, MSDE notified LITPs of the level of State monitoring for the monitoring time period (desk audit, periodic monitoring, TA, and follow up, or Active monitoring, TA, and follow up) and the requirement for corrective action plans for each priority indicator in which LITPs were not in substantial compliance and were not showing significant improvement.	
	Corrective action plans were integrated into local improvement plans that are required for all LITPs as part of the local grant award for federal and State funding. LITPs with corrective action plans were required to submit quarterly reports analyzing progress and updating improvement strategies as needed. MSDE provided technical assistance on request or when indicated through review of data reports.	
Evaluation of effectiveness of SPP improvement activities	In FFY 05, the percentage of correction of non-compliance significantly increased over the baseline of 62%, primarily because of the effectiveness of the State and local focus on corrective action plans and targeted data tracking and analysis.	MSDE staff LITPs
	MSDE was unable to add additional monitoring/TA staff during the reporting period, and staffing was further reduced by the retirement of the Section Chief for Program Improvement midway through FFY 05. Monitoring activities were primarily conducted by the Technical Assistance and Data Specialists, limiting the amount of support that could be provided to LITPs in their efforts to correct compliance and improve performance.	
	In addition, without increases in federal and State funding to keep	

pace with the increasing numbers of eligible children and families, there is concern about State and local capacity to sustain its current level of effectiveness in the correction of noncompliance and improvement of performance.	
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Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 06

In addition to the ongoing monitoring activities in the Part C SPP, MSDE will initiate the following:

Improvement Activities	Timeline/Resources	Justification
Develop alternative strategies to sustain comprehensive monitoring, correction of noncompliance and technical assistance, such as contracting with external consultants and streamlining data tracking and analysis	2006-2011 MSDE staff, LITP staff, external consultants	Need to increase State capacity to maintain effectiveness of general supervision system, if adequate full-time State-level positions cannot be filled.
Request additional State funding to support LITPs based on the statutory funding formula in the Annotated Code of Maryland	2006-2011 MSDE, SICC, LITPs	Need to ensure that State funding for early intervention in Maryland keeps pace with the increased numbers of Part C eligible children and families to support local system capacity to achieve compliance and improve performance.

Overview of the Annual Performance Report Development: Data for this indicator was collected through the Complaint Investigations Branch database, and verified by Part C staff.

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
2005	100% of all complaint investigations are completed within the required timelines

Actual Target Data for FFY 05: 100%

Number of Complaints Received	Number of Complaints Investigated within Timelines	% of Complaints Investigated within Timelines
7	7	100%

Seven signed written Part C complaints were received during the reporting period, 7/1/05-6/30/06., and were investigated with reports issued within 60 days. No complaints were dismissed or withdrawn. No complaints are pending.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

As described in the Part C SPP, the Complaint Investigation Branch within MSDE's Division of Special Education/Early Intervention Services has the responsibility for investigating Part C complaints with the consultation and assistance of State Part C staff. Systemic findings of noncompliance identified through complaint investigations are incorporated into the Part C monitoring process. Complaint findings are taken into consideration when decisions are made about the level of monitoring and degree of State technical assistance and intervention for individual LITPs.

MSDE has met its compliance target of 100% for FFY 05 and will continue its collaborative approach to ensure that complaint investigations are thorough and timely.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY)

Overview of the Annual Performance Report Development: Data for this indicator was provided by the Office of Administrative Hearings, and verified by Part C staff.

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
2005	100% of fully adjudicated due process hearing requests are fully adjudicated within the timeline.

Actual Target Data for FFY 05: No fully adjudicated due process requests

One due process request was received and withdrawn by the parent before adjudication. A mediation session and hearing were scheduled within the timelines for this, but the parent withdrew the request before either was held. Documentation of the parent letter of withdrawal is in the file created by the Office of Administrative Hearings.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

MSDE will continue to work with the Office of Administrative Hearings to ensure that Part C policies, procedures, and timelines are followed when parents file a request for due process under Part C of IDEA.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY)
[If applicable]

NO REPORTING REQUIRED BECAUSE STATE HAS ADOPTED PART C DUE PROCESS POLICIES AND PROCEDURES

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
(Insert FFY)	(Insert Measurable and Rigorous Target.)

Actual Target Data for (Insert FFY):

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for (Insert FFY):

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY)
[If applicable]

Overview of the Annual Performance Report Development: Data for this indicator was provided by the Office of Administrative Hearings and verified by Part C staff.

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
2005	No target required because fewer than 10 mediation sessions were requested.

Actual Target Data for FFY 05: No mediation sessions were held.

During the reporting period, one request for mediation was submitted by a parent who also requested a due process hearing. As described in Indicator #10, the parent withdrew the request for the mediation and due process hearing before the scheduled sessions were held. In the withdrawal letter, the parent indicated that the family and the local Infants and Toddlers Program had resolved the issues in dispute.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for (Insert FFY):

No improvement activities required because fewer than 10 mediation sessions were requested.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for (Insert FFY)
[If applicable]

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 (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2005	100% of State reported data (618, SPP, and APR) is timely and accurate.

Actual Target Data for FFY 05: 100% of MSDE's Part C State-reported data is timely and accurate.

a. For the reporting period, all Part C 618 data tables and the Part C SPP were submitted on or before the due dates.

Report	Date Due	Date Submitted	WESTAT Flag	MSDE response
Table 1 Child Count	February 1, 2006	February 1, 2006	Yes	Submitted data notes as requested to explain % increases
Table 2 Program Settings	November 1, 2006	November 1, 2006	Yes	Submitted data notes as requested to explain % increases
Table 3 Reasons for Exit	November 1, 2006	November 1, 2006	Yes	Submitted data notes as requested to explain % increases
SPP	December 2, 2005	December 2, 2005		

b. All State-reported Part C data is accurate, including data reported through the 618 data tables, State Performance Plan, and Annual Performance Report.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 05:

MSDE and LITPs completed all SPP Improvement activities on an ongoing basis to ensure that Part C State-reported data are timely and accurate. With electronic edits built into the Part C database and systematic procedures for data verification and validation, MSDE has met its target of 100% for this indicator.

618 Data Accuracy

All Part C 618 data is collected through the statewide web-based Part C data system. LITPs enter data into individual child records from referral and intake forms and the statewide IFSP document. Predefined reports with child-level and summary data for each of the 618 tables have been programmed into the database. The following procedures are in place to ensure the accuracy of 618 data collection and reporting:

- •MSDE provides an online data dictionary with definitions of data fields. The Data Specialist provides regular updates to LITP Program and Data managers when new data fields and reports are added to the database.
- •MSDE and LITPs generate individual child and aggregate data reports throughout the reporting period to track changes and verify data accuracy. Electronic data edits have been programmed into the database to prohibit the entry of out-of-range data or inconsistent cross-field relationships.
- •Prior to data collection for the annual 618 data reports, MSDE's Data Specialist requests that all LITPs run local audit reports developed to identify inconsistent or incomplete data, correct data errors, and enter missing data.
- •Following the local auditing and verification, MSDE runs statewide audit reports and notifies LITPs of inconsistent or missing data and provides a final timeline for the data entry and correction before generating the final 618 data tables.
- •Prior to the submission of the 618 data tables, the Part C Program Manager and Data Specialist compare the current State and local data with the previous year's submission, identify significant increases or decreases, and contact the LITP Program and Data Managers for clarification, when necessary. This information is used to respond accurately to data that WESTAT flags for explanation after the data tables are submitted to OSEP.
- •Year-to-year comparisons of 618 data are provided to LITPs and are used as part of State monitoring for relevant indicators.

SPP/APR Data Accuracy

MSDE developed the web-based Part C data system to allow for comprehensive monitoring of State and local data in Federal/State monitoring priorities as a major component of its Part C general supervision system. With a real-time data system, MSDE and LITPs can monitor data accuracy and performance against the priority indicators on a regular basis, and can adjust strategies for improvement and correction based on current data analysis. Since 2003, MSDE has modified the database by adding data fields and reports in response to OSEP's monitoring priorities and State targeted priorities. MSDE generates and disseminates semi-annual State and local data profiles, which include trend and current data on each of the federal/State compliance indicators. In addition to the procedures described above, MSDE ensures the accuracy of the SPP/APR data through the following:

- •MSDE provides the OSEP measurement criteria for all monitoring indicators to the database developer to ensure that child-level and summary reports provide accurate data for federal, State, and local reporting.
- •MSDE generated reports from the Part C database to report baseline and actual target data for Indicators 1, 2, 5, 6, 7, 8, and 9. Throughout the reporting period, MSDE and LITPs generate child-level and summary data and analyzes the data for inconsistencies and trends. Prior to the

submission of SPP and APR data, MSDE provides child-level data reports for each indicator and requests that LITPs validate the accuracy of data through review of the database and paper early intervention records. MSDE integrates data collected from onsite monitoring and complaint investigations to further validate the electronic results. Based on the results of State and local validation, MSDE modifies the electronic data reports to accurately and reliably report SPP/APR data.

- •For indicator #3, MSDE created an electronic algorithm using the Present Levels of Development entered into the Part C database from IFSPs to report status at entry data. Child-level and summary data was reviewed and verified by MSDE and LITPs throughout the reporting period prior to the submission of data in the SPP. In the next reporting period, MSDE will be validating the electronic data results through use of the Child Outcome Summary Form.
- •To report baseline data for Indicator #4, MSDE selected the NCSEAM Early Intervention Family Survey, which has been calibrated using a valid and reliable measurement scale and has been piloted with documented results that are accurate and consistent across States. To aggregate and analyze baseline data for Indicator #4, MSDE contracted with a vendor that was involved in the development and piloting of the NCSEAM Family survey, and is working with that vendor to provide the data to stakeholders in understandable formats.
- •To report data on Indicators 10, MSDE maintains a database which tracks compliance and corrective action data on all State-level complaint investigations and findings. Data for indicators 11 and 13 comes directly from the Office of Administrative Hearings, which conducts Part C mediation and due process hearings. All data from these sources is verified before it is reported in the SPP or APR.
- •MSDE provides ongoing technical assistance and clarification through statewide meetings, onsite visits, and phone consultations on all aspects of data entry and reporting, especially those related to the federal/State monitoring priorities.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 06:

In addition to the SPP improvement activities designed to ensure timely and accurate Part C State-reported, MSDE will initiate the following:

Improvement Activities	Timeline/Resources	Justification
MSDE will evaluate the accuracy and reliability of data reported for new monitoring indicators and implement procedures for data verification and validation as needed	2007-2011 MSDE staff, JHU/CTE, LITP staff	Need to ensure that data collection and reporting mechanisms for new indicators yield 100% accurate data