

# KY Part C

## FFY2015 State Performance Plan / Annual Performance Report

#### Executive Summary:

The Kentucky Early Intervention System (KEIS) continues to operate with fifteen (15) regional lead agencies, known as Points of Entry (POE). Many POEs are funded through contracts with Local Health Departments and Community Mental Health Centers. One POE is jointly funded through a Community Mental Health Center and private hospital. In FFY15, the largest POE, the Kentuckiana or KIPDA POE, moved to a state office for operation, the Commission for Children with Special Health Care Needs (CCSHCN). POEs are responsible for all referrals, initial evaluations and assessments, eligibility determination, service coordination, and child find activities. Early intervention services are provided through contracts with over 1000 service providers, representing a variety of professional disciplines. The Department for Public Health is the administrative lead agency within the Cabinet for Health and Family Services. Kentucky uses an online data management system known as the Technology-assisted Observation and Teaming Support system (TOTS). TOTS provides an electronic early intervention record for each child referred to the early intervention system along with financial and management data.

The results for compliance indicators in the FFY15 Annual Performance Report (APR) are lower than previously reported findings. The change in vendors for the KIPDA region had significant impact to the system. This was the first new vendor for this region in over twenty years, disrupting long established relationships with local providers and referral sources. Additionally, the new office had only eight (8) out of twenty-four (24) service coordinators who had experience with Part C. The other sixteen (16) service coordinators met the qualifications for the job however, none had experience with service coordination in First Steps. This was true of the first manager as well. As time went forward several of the original staff left. As a state agency, CCSHCN is required to follow state personnel procedures which take up to ninety (90) days to complete. Caseloads for the remaining staff became very high, making the application of new learning more difficult. In addition, referrals to the new vendor increased from the level the previous vendor experienced. The State Lead Agency (SLA) provided training and technical assistance from up to five (5) staff for extended periods of time in an effort to keep disruptions to families at a minimum. The slippage in compliance indicators is attributed in large part to the transition of this POE office.

#### Attachments

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<a href="#">apr certification form 1-23-2017.pdf</a>	Paula Goff		<div>R e m o v e</div>

#### General Supervision System:

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

##### General Supervision

Various methods are used to assess compliance with regulation and contract. Checklists that identify each regulatory item for the early intervention record allows for indication of what was reviewed—the online data management system, TOTS, and/or the hard copy file. Interview questions are tailored to the role being assessed—POE Manager, Service Coordinator, District Child Evaluation Specialist, Administrative Staff, or Early Intervention Services Provider. Other methods used to support General Supervision include time and effort studies, analysis of multiple reports (trend reports, ad hoc reports specific to an area of concern or question, faxed verification documents) and review of anecdotal information from parents and early intervention service providers.

Contracts with the POEs and early intervention providers require compliance with all applicable federal and state statutes and regulations. Contracts are enforced with noncompliance addressed by corrective action plans, technical assistance, and training. Failure to correct noncompliance in a timely manner results in sanctions that range from restricting services to financial penalties, and ultimately, contract termination.

The SLA has a variety of enforcement actions to use in conjunction with local determinations, lack of timely correction of noncompliance, or other circumstances that warrant SLA actions. Enforcement actions include, but are not limited to:

- o Required POE or Provider selected on-site technical assistance;
- o SLA prescribed on-site technical assistance;
- o On-site technical assistance with POE administration, including fiscal agency management;
- o Required increased frequency of technical assistance phone calls to POE Manager that addresses areas of concern and noncompliance;
- o Focused onsite monitoring on a specific area of noncompliance;

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- o Development or revision of a professional development plan to include identifying and implementing professional development related to the areas of noncompliance;
- o POE and/or service provider required to complete record reviews at a frequency determined by the SLA and verified by the SLA staff;
- o POE linked to other districts or service providers demonstrating best practices in the identified area(s) of noncompliance for mentoring;
- o POE Manager and/or service providers required to collect and analyze data related to area(s) of noncompliance at a frequency determined by the SLA and reviewed with SLA staff;
- o Required meeting with POE Administration, District Early Intervention Council (DEIC) Chairperson, SLA staff and Part C Coordinator to discuss barriers to compliance, Corrective Action Plan strategies and additional avenues for technical assistance and support;
- o Withhold district POE payments, or if it is determined that one or more provider/providers are responsible for an area of noncompliance, withhold payment from the provider(s);
- o Recover funds; and
- o Terminate the district POE contract or, if it is determined that one or more providers are responsible for an area of noncompliance, terminate the provider contract(s).

### Comprehensive Reviews (POE and Providers)

Comprehensive reviews are conducted on POEs and Early Intervention Providers periodically. The Comprehensive Review consists of an on-site review of a sampling of hard copy early intervention records maintained by the POE. Staff are also interviewed using targeted questions addressing specific tasks. Early Intervention Provider's records are reviewed based upon a sampling of their caseload.

Each record reviewed on-site undergoes a desk audit of the electronic record in TOTS. This process includes review of the child and family assessments, IFSPs, service logs, transition (if applicable), and communication logs. Signed forms are matched to entries in TOTS to verify dates. A formal detailed report is sent to the POE or Early Intervention Provider, citing instances of noncompliance and requirements for corrective action.

While all POEs are reviewed, the number of onsite verification visits may be altered each year, depending upon the issues at POEs and resources of the state lead agency. The FFY 16 review for example includes desk audits of all POEs but onsite verification visits to the lowest performing POEs.

### Monthly POE Data Reports

POEs are required to submit monthly data reports for the State Performance Plan compliance Indicators 1 (provision of timely services), 7 (Individualized Family Service Plan within 45 days), and 8C (timely transition conference). POE Managers must review all instances of missed timelines and verify the accuracy of the reason for delay. The data reports are then verified by SLA staff. Cases where there is a disagreement between the POE Manager and SLA staff are referred back to the POE Manager for additional review and clarification. Final resolution is determined by the SLA.

### Desk Audits of the POEs and Early Intervention Providers

Kentucky SLA staff routinely conducts desk audits of three specific areas of service delivery to assess fidelity and quality:

- o Family Assessment fidelity checks—POE Managers conduct fidelity checks on the Family Assessments done by their staff. A representative sample of cases are reviewed using a checklist specifically designed for the *Routines-Based Interview*® process adopted by Kentucky. SLA staff, who are certified trainers in the *Routines-Based Interview*®, review the fidelity reports and provide technical assistance as needed.
- o Assessment and Progress Report Reviews—Assessment reports and progress reports are reviewed through a desk audit. Both reports are entered into TOTS by the provider and assessment reports are tied to payment. Manual review for payment approval includes verification that the report is complete with no errors such as missing scores, wrong child's name in report, etc. Assessment data entry required for child outcomes measurement is also verified. Progress Reports are reviewed for use of data to support narrative description of progress. Both types of reports are checked for compliance to timelines for entry.
- o Provider Service Log Reviews—Service logs are reviewed periodically for:
  - § Delivery of appropriate early intervention services;
  - § Implementation of Primary Service Provider model;
  - § Connection of services to IFSP outcomes; and,
  - § Consistency with concerns/priorities identified in the Family Assessment.

### Billing Audits of the POEs and Early Intervention Providers

Periodic reviews of billing records for a POE and/or an Early Intervention Provider are conducted quarterly. A random sample of providers are identified for the review in a specific region. In addition to these regular reviews, an ad hoc review of the billing records for a POE or Early Intervention Provider are conducted when there is a suspicion of billing irregularities. Claims are matched to the IFSP authorizations and service logs. Should billing irregularities be identified, the review is forwarded to the Office of the Inspector General for further investigation. The provider agency is suspended from new referrals while the investigation is pending. In the case of a POE, payment of submitted invoices are suspended (in part or in full) while the investigation is pending.

### District Determinations

All State Performance Plan indicators (compliance and results) are assessed as part of the District Determination process. District Determinations are issued in June (within the timelines established by law) and posted on the website. Each indicator is assigned a

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point value based upon exceeding/meeting or not meeting the target for the indicator. The total point score is then compared to a scale that provides the cut-off score for each level of the determination (Meets Requirements, Needs Assistance, Needs Improvement, and Needs Substantial Improvement). Any POE that does not achieve "Meets Requirements" must participate in technical assistance. POEs that achieve a designation of Needs Improvement or Needs Substantial Improvement must implement a state-directed corrective action plan.

### Corrective Action Plans

The Corrective Action Plan is a plan that is implemented by the POE or early intervention provider. It describes a set of integrated strategies that address contributing factors impacting noncompliance and performance of SPP/APR indicators or other areas of noncompliance. Corrective action plan strategies are designed to ensure correction of noncompliance as soon as possible but no later than one year from the date of the SLAs written notification of the finding.

#### POE Corrective Action Plan

POE, in collaboration with district stakeholders, is responsible for developing a corrective action plan following completion of the investigation of contributing factors (local contributing factor tool) of noncompliance. SLA staff supports the POE in investigating contributing factors and in developing the corrective action plan. The corrective action plan must address all areas of noncompliance identified by the state and is a plan of correction for the POE and its providers. The POE submits a final corrective action plan to the SLA by August 15<sup>th</sup> when the corrective action plan is associated with the SPP/APR. The SLA notifies the POE of approval of the corrective action plan by August 31<sup>st</sup> and in collaboration with each POE, establishes benchmarks in the corrective action plan for each indicator that has noncompliance. If a plan is not approved by the SLA, SLA staff will work with the POE to revise it and gain approval within 30 days of the written notification of disapproval. POE is responsible for implementing corrective strategies and reviewing data to ensure progress in accordance with established benchmarks. SLA staff will provide support to the POE in implementing the corrective action plan.

Corrective action plans that involve contract obligations or related items are handled in a similar manner but approval date by the SLA is dependent upon the issue found to be noncompliant.

#### Early Intervention Service Provider Corrective Action Plan

Early Intervention Service Providers (Provider) may be responsible for developing a corrective action plan following completion of the investigation of contributing factors (local contributing factor tool) of noncompliance. SLA staff supports the provider in the investigation of contributing factors and in developing the plan. The corrective action plan must address all areas of noncompliance identified by the state. The provider submits a final corrective action plan to the SLA by the date designated by the SLA. The SLA notifies the POE of approval of the plan no later than thirty (30) days from date of submission and in collaboration with the provider, establishes benchmarks for each noncompliance. If a corrective action plan is not approved by the SLA, SLA staff will work with the Provider to revise the plan and gain approval within thirty (30) days of the written notification of disapproval. The Provider is responsible for implementing corrective strategies and reviewing data to ensure progress in accordance with established benchmarks. SLA staff provides support to the provider in implementing the corrective action plan.

Corrective action plans that involve contract obligations or related items are handled in a similar manner but approval date by the SLA is dependent upon the issue found to be noncompliant.

### State-Directed Corrective Action Plans

There are instances where the POE or Provider has committed a noncompliance that has no variation in the actions required for correction. The SLA develops the corrective action plan by identifying the strategies the POE or Provider must take for correction.

### Dispute Resolution System

Kentucky adopted the Part C dispute resolution provisions of the Individuals with Disabilities Education Act.

#### *Complaint Investigations: Formal Complaints*

A formal complaint is defined as a written, signed complaint. All formal complaints are investigated as appropriate within sixty (60) days of receipt of the complaint.

- o During the investigation process the Early Intervention Provider is suspended from receiving new referrals but is allowed to continue to provide ongoing services for the children currently on his or her caseload.
- o The investigation involves a desk audit of the TOTS records for other children on the provider's current caseload as well as interviews of other parents to determine if the complaint is a systemic issue for the Provider.
- o Once the investigation is completed the Provider is either released from the suspension with no finding of noncompliance or is released from the suspension with a finding of noncompliance.
- o When a finding of noncompliance is issued to the Provider, the Provider either develops a corrective action plan or is placed under a state directed corrective action plan.
- o The complainant is notified of the investigation findings.

#### *Complaint Investigations: Informal Complaints*

Informal complaints are defined as complaints that are not written but rather are provided to the SLA and/or POE by telephone or email.

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The issue is not related to a specific child or to systemic issues related to regulation but may involve topics such as late arrival for service provision, late response to phone calls, number of referrals another provider receives, etc. Informal complaints are tracked for monitoring of trends related to a particular service provider or service delivery area. Receipt of at least three informal complaints about an Early Intervention Provider is investigated as a formal complaint.

### Mediation

Each POE ensures that parties may resolve disputes concerning the identification, evaluation, placement of the child or the provision of appropriate early intervention services through a mediation process. This process is available if a due process hearing is requested.

The Department for Public Health has a mediation system that is voluntary and does not deny or delay a parent's right to a due process hearing to be conducted at any time. Both parties in the dispute must agree to use mediation. Children continue to receive the early intervention services currently being provided during the interim of any proceeding involving a complaint. If the complaint involves the application for initial services, the child receives the services that are not in dispute.

Within five (5) working days after a request for mediation is made to the SLA using a Mediation/Due Process Request Form, a trained mediator is appointed. One of the parties may waive the mediation and, if waived, the parents are informed by the SLA within two (2) working days of this decision. Mediation is completed within thirty (30) working days of the receipt by the SLA of the request for mediation.

At any time during the mediation process, a request for a due process hearing may be initiated. If the parties resolve a dispute through the mediation process, the parties execute a legally binding agreement that is signed by both the parent and a representative of the SLA who has the authority to enter into an agreement. A copy of the legally binding agreement is then mailed by the mediator to each party within five (5) working days following the mediation conference. A copy shall be filed by the mediator with the SLA. Discussions that occur during the mediation process are confidential and cannot be used as evidence in any subsequent due process hearing or civil proceeding. The parties to the mediation process are required to sign a confidentiality pledge prior to the start of the mediation.

### Due Process Hearings for Parents and Children

An administrative hearing is conducted within fifteen (15) days of receipt of a request for hearing by an impartial hearing officer appointed by the Secretary of the Cabinet. The hearing is conducted in accordance with the requirements of state law, KRS Chapter 13B.080. A recommended decision conforming in content to the requirements of KRS 13B.110 is forwarded to the family and the Cabinet within ten (10) days of the administrative hearing. A final decision on the recommendation by the administrative hearing officer shall be made no later than thirty (30) days by the Secretary of the Cabinet.

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### Technical Assistance System:

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

The State Lead Agency (SLA) has dedicated staff for training and technical assistance that includes the Part C Assistant Coordinator, three technical assistance positions located at the SLA, and one part-time technical assistance position located in Bowling Green, KY (shared position with Kentucky Birth Surveillance Registry and Zika Pregnancy Grant). One technical assistance position has been vacant since mid-2015. SLA staff addresses implementation of early intervention practices in the provision of the technical assistance, emphasizing evidence based practices.

Contracts with University of Kentucky and University of Louisville provide technical assistance on assessment and evaluation practices for both Point of Entry staff and early intervention providers.

Additional training and technical assistance is provided by other SLA staff as needed and typically related to general supervision. SLA staff assists districts in understanding and analyzing district data, developing and monitoring CAPs and self-assessments, and in providing ongoing training related to compliance. Indirect technical assistance is provided through newsletter articles and webinars highlighting specific evidenced-based practices.

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**Professional Development System:**

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

On-going training is required for all service personnel. This is established in the contract for Point of Entry staff and all Early Intervention Service Providers. Training must have prior approval by the State Lead Agency (SLA) for credit hours to meet contract requirements. Training sponsored by the SLA is provided through webinar, online modules and face-to-face. The SLA purchased the Adobe Connect system for webinar and online training purposes approximately three years ago. The system provides a learner tracking system so that the SLA can monitor compliance to required trainings. Initially, significant staff time was needed to learn the system and develop the core online training modules. Modules are added and/or revised when needed.

The SLA also contracts for the provision of specific training:

- University of Louisville provides training to POE Managers and District Child Evaluation Specialists (DCES).
- University of Kentucky provides training for approved assessment instruments (used for outcome measures) and operation of the online data entry portal.
- Wendell-Foster Campus for Developmental Disabilities hosts an online assistive technology community of practice.

During FFY15, much work has been on the development of new training materials identified in the State Systemic Improvement Plan (SSIP). Previously developed modules were revised for consistent language with *Kentucky Strengthening Families*, an initiative that supports provision of protective factors to promote optimal child growth and family well-being. New topics were researched and are under development.

**SLA Training Initiatives**

**Family Assessment:** The SLA also targeted the Family Assessment for significant improvement. The three training and technical assistance staff at the SLA obtained certification as trainers of *The Routine-Based Interview*® by Robin McWilliam. Dr. McWilliam was then contracted to train one service coordinator from each of the POEs; those who became certified trainers in this process are regional support to help build local capacity. All service coordinators are trained in *The Routine-Based Interview*® and periodic fidelity checks are conducted by both the POE Managers and the SLA certified trainers. Coaching is provided regularly to address issues uncovered in the fidelity checks and to keep service coordinators aware of the critical importance this evidence-based practice has in the development of Individual Family Service Plans (IFSP).

**Training Collaboration with Other State Initiatives**

**Race to the Top-Early Learning Challenge (RTT-ELC) Grant:** The Kentucky Early Intervention System is represented on the Training and Technical Assistance workgroup of the Kentucky Strengthening Families (KYSF) initiative as well as the Leadership Group. This initiative supporting family engagement is one of the major activities cited in the Race to the Top Early Learning Challenge grant awarded to Kentucky and overseen by the Governor's Office of Early Childhood.

During FFY15, the Training and Technical Assistance workgroup created Kentucky-specific overview training with pre/posttest and has trained 110 trainers across the state on KYSF Overview. The KYSF Overview Face-to-Face Training has been delivered to 3,545 early care and education providers, birth to 5. In addition, an online module for overview of KYSF tailored to early care and education was launched in December 2015 with 952 participants utilizing the online module. First Steps also participated in the training of trainers for Parent Cafes and has explored the feasibility of hosting Parent Cafes at the POEs.

During FFY15, First Steps also participated in the planning of the annual Ready Kids Conference, which addressed issues for the age span of birth to five.

**Governor's Office of Early Childhood, Early Childhood Advisory Council (ECAC):** Part C is a participant on the Professional Development workgroup of the Early Childhood Advisory Council (ECAC). Representatives of First Steps are part of the group who reviewed the Early Learning Standards online modules developed by KET public television. As the quality rating system for early childhood activities begin, opportunities for joint training and other collaborations will occur.

**Governor's Advisory Council on Autism Spectrum Disorder:** The Part C Coordinator is an appointed member of this Council and sits on the Early Childhood Subcommittee. Opportunities for collaboration regarding training will be identified by this committee. Prior to the Council formation, First Steps assisted the ad hoc group with grant writing for funds to support early identification of very young children with Autism Spectrum Disorder.



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**Early Hearing Detection and Intervention (EHDI):** The lead agency for EHDI, the Commission for Children with Special Health Care Needs (CCSHCN), and First Steps has worked together for approximately four (4) years to identify and treat infants with hearing loss. Through a grant, the CCSHCN has provided Otoacoustic Emissions (OAE) equipment to POEs and provides the necessary training for optimal use.

**Kentucky Commission for Deaf and Hard of Hearing and Statewide Educational Resource Center on Deafness:** A memorandum of agreement was developed to support parent training (using the SKI-HI Curriculum) provided by the Statewide Resource Center on Deafness in conjunction with the Kentucky Commission for Deaf and Hard of Hearing. Regional trainings were held in the Fall of 2015 on the services offered by the Statewide Educational Resource Center on Deafness and referral procedures.

**Childcare Health Consultation: Social Emotional Development training:** First Steps staff began working with the Social/Emotional Development technical assistant to adapt a training initially developed for preschool children called *Connect the Dots*. The adapted module focuses on parents instead of child care workers and addresses infant and toddler age group. Staff from the Health Access Nurturing Development Services (HANDS) also participates on this workgroup.

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

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

Input from stakeholders in Kentucky has been a continual process since the program was transferred from the Commission for Children with Special Health Care Needs to the Department for Public Health in July 2004. Stakeholders have included parents, Early Intervention Service Providers, State Lead Agency (SLA) staff, contracted staff, Interagency Coordinating Council (ICC) members, Point of Entry (POE) staff (including Service Coordinators), Primary Level Evaluators, and Intensive Level Evaluators. All geographic and population density areas of the state have been represented.

The process of developing the State Performance Plan/Annual Performance Report (SPP/APR) includes gathering data, cleaning and verifying data, and writing of narrative portions of the APR. Specific input from stakeholders with interest or expertise in the indicator area (topic) assists as needed with the drafting of the APR. The stakeholder groups also recommend revisions to improvement activities after evaluating the status. Each year a formal presentation of the SPP/APR is provided to the ICC. Discussion of each Indicator is held with suggested revisions provided to the SLA. The ICC has certified the APR each year due to this collaborative process for development.

Annually, the SPP and APR are both posted on the First Steps website at: <http://chfs.ky.gov/dph/firstSteps/First+Steps+Annual+Reports.htm> upon submission to the US Department of Education, Office of Special Education Programs.

Each year the SPP and Annual Performance Report (APR) is presented to the Interagency Coordinating Council (ICC) for input on the document. Any revision to a target is first developed by a workgroup with knowledge and expertise concerning the Indicator. Then, the proposed targets are disseminated to the KEIS listserv (over 1300 interested parents, advocates, early intervention providers, university and college faculty, and representatives of various state and local agencies). The proposed targets are also posted on the KEIS website with information on how to submit feedback. Feedback is also sought from the ICC as well prior to the formal certification of the SPP/APR.

### Dissemination of the SPP to the Public

The SPP is published on the First Steps website upon submission to OSEP. The web address is: <http://chfs.ky.gov/dph/firststeps.htm>. Interested parties without web access can contact the State Lead Agency for a copy. In addition, all of the public libraries in Kentucky have web access, so anyone in Kentucky could access the web and thus the report at the local public library. The same method is used for dissemination of the Annual Performance Report (APR).

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### Reporting to the Public:

How and where the State reported to the public on the FFY 2014 performance of each EIS Program or Provider located in the State on the targets in the SPP/APR as soon as

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practicable, but no later than 120 days following the State's submission of its FFY 2014 APR, as required by 34 CFR §303.702(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2014 APR in 2016, is available.

Kentucky's system is divided into fifteen (15) districts (POEs or Local Lead Agencies) which follow the boundaries of the state's Area Development Districts. Kentucky reports data by those POE districts, considering each district to be an 'early intervention program'. Determinations, based on the performance of the POE district on achievement of the SPP targets, is published on the KEIS website no later than 120 days from the date of SPP/APR submission to OSEP. These reports can be obtained on the website home page, under "District Data".

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**Actions required in FFY 2014 response**



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## Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments



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

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

### Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		79.00%	80.00%	81.00%	74.70%	87.00%	91.00%	98.82%	99.61%	99.87%	99.50%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

### FFY 2015 - FFY 2018 Targets

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

### FFY 2015 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
6913	7263	99.50%	100%	97.95%

### Explanation of Slippage

One hundred forty-nine (149) initial services were delivered after thirty (30) days from the date of the IFSP meeting. One Point of Entry (POE) had the majority of late services; the Kentuckiana Regional Planning & Development Agency (KIPDA) office had seventy-one (71) or forty-eight percent (48%) of the late service deliveries. A contributing cause for this slippage is that the majority of service coordinators were new to service coordination, had high caseloads as the office was not fully staffed for several months, and had very few experienced colleagues that could mentor them. Many simply did not follow-up with providers to check on initial service delivery. Errors in data entry to issue authorizations for initial services also hampered timely service delivery. Another factor that appeared to contribute to the slippage was that some of the early intervention providers did not schedule initial sessions within the thirty (30) day timeline. As the fiscal year progressed, the number of late service deliveries declined in this specific POE.

When the KIPDA POE data is not considered, the rate of performance for the state is 98.90% which is lower than previous rates. Six (6) other POEs had difficulty with this indicator as well, accounting for a total of seventy-eight (78) or fifty-two percent (52%) of the total number of late services. Two POEs (Bluegrass and Five Counties Area Development District (FIVCO) experienced early intervention provider shortages that delayed the delivery of initial services. Both POEs had significant growth in the population served which meant a need for more providers. Four other POEs also had increased late service delivery for a variety of reasons, mostly due to the providers lack of timely scheduling.

The range in days late was four (4) to one hundred fifteen (115) with fourteen (14) days as the average number of days for initial service delivery. There continues to be a number (n=15) of cases over sixty days late because of lack of contact information for children in foster care. After the IFSP was developed but before early intervention services began, the children were moved to new foster care homes without any notification to the POE and early intervention providers. The length of time to verify where the child was located varied due to lack of responsiveness from child protection case workers and in some cases, new providers had to be identified since the child had moved out of the initial POE region.

Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner" field above to calculate the numerator for this indicator.

201

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

- ☒ State monitoring
- ☐ State database

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

July 1, 2015 through June 30, 2016

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

Every IFSP (initial, six-month, requested review, and annual) is entered into TOTS, the online database management system. One section of the IFSP (Planned Services) includes all services to be provided during the period of the IFSP and serves as the authorization for each service. The date of the IFSP meeting is matched to the date of service delivery for the first payment claim. Then the number of days between date of the IFSP and the date of the first service is calculated. A report (Timely Services) is generated that lists every initial date of service for the IFSP time period. Timely Services reports are reviewed monthly at the Point of Entry, then verified by the State Lead Agency staff. As part of the preparation of the State Performance Report, a different individual at the State Lead Agency reviews and verifies the report. The results are then compared with the monthly reports submitted as part of general supervision for consistency.

**Actions required in FFY 2014 response**

none

Responses to actions required in FFY 2014 response, **not including correction of findings****Correction of Findings of Noncompliance Identified in FFY 2014**

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

**FFY 2014 Findings of Noncompliance Verified as Corrected**

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

The one finding of noncompliance for FFY14 (7/1/14 to 6/30/15) was corrected within two (2) months of notice to the Point of Entry.

The State Lead Agency verified correction of findings by:

1. Reviewing each child's record on TOTS focusing on the date of the IFSP and the date of the initial service delivery according to service logs entered by the provider in TOTS. Billing claims were also reviewed to match service logs. Each finding of noncompliance was checked to ensure that services were delivered, even when later than thirty (30) days from the IFSP date; and,
2. Reviewing data to determine if the reason for the delay was a family-driven reason, service provider-driven reason or if the data were a result of a computer programming error.

Providers who were found to have delayed timely services were notified that the delay was unacceptable. The notice informed the provider that additional instances of noncompliance would result in suspension of their contract to provide early intervention services.

Monthly desk audits of the POE performance on this indicator were conducted to ensure that the applicable regulations were implemented properly.

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

The State Lead Agency verified correction of findings by:

1. Reviewing each child's record on TOTS focusing on the date of the IFSP and the date of the initial service delivery according to service logs entered by the provider in TOTS. Billing claims were also reviewed to match service logs. Each finding of noncompliance was checked to ensure that services were delivered, even when later than thirty (30) days from the IFSP date; and,
2. Reviewing data to determine if the reason for the delay was a family-driven reason, service provider-driven reason or if the data were a result of a computer programming error.

Providers who were found to have delayed timely services were notified that the delay was unacceptable. The notice informed the provider that additional instances of noncompliance would result in suspension of their contract to provide early intervention services. Quarterly desk audits of the provider's performance on this indicator were conducted to ensure that the applicable regulations were implemented properly.

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 2: Services in Natural Environments

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			98.70%	98.70%	98.70%	98.70%	98.70%	98.70%	98.70%	98.70%	98.70%
Data		98.70%	99.30%	99.50%	99.50%	99.40%	99.50%	99.56%	99.56%	99.18%	99.66%

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

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	98.70%	98.70%	98.70%	98.70%

Key:

Targets: Description of Stakeholder Input

Please see introduction for description of stakeholder input.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 Child Count/Educational Environment Data Groups	7/14/2016	<a href="#">Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings</a>	4,479	
SY 2015-16 Child Count/Educational Environment Data Groups	7/14/2016	<a href="#">Total number of infants and toddlers with IFSPs</a>	4,498	

FFY 2015 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of infants and toddlers with IFSPs	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
4,479	4,498	99.66%	98.70%	99.58%

☒ Provide additional information about this indicator (optional)

Kentucky continues to provide a very high percentage of services in the natural environment. Nineteen (19) children received services in clinic settings because no provider was available to provide in-home services.

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response

# FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

## Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who demonstrate improved:

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

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

Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i)? No

### Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2008	Target ≥						62.00%	72.00%	71.50%	80.00%	86.00%	86.01%
		Data					70.10%	66.80%	92.00%	91.00%	90.00%	86.37%	85.71%
A2	2008	Target ≥						31.00%	60.00%	61.00%	62.50%	68.98%	68.98%
		Data					48.10%	62.40%	55.00%	52.00%	73.00%	68.98%	65.19%
B1	2008	Target ≥						50.00%	63.00%	76.00%	85.00%	90.66%	90.66%
		Data					61.80%	67.70%	95.00%	95.00%	93.00%	90.66%	91.39%
B2	2008	Target ≥						26.00%	55.00%	56.00%	57.50%	71.54%	71.54%
		Data					28.80%	57.40%	48.00%	48.00%	75.00%	71.54%	68.47%
C1	2008	Target ≥						50.00%	62.00%	76.00%	80.00%	85.77%	85.77%
		Data					57.30%	67.20%	90.00%	90.00%	88.00%	85.77%	83.92%
C2	2008	Target ≥						26.00%	52.00%	53.00%	54.50%	53.80%	53.80%
		Data					29.10%	56.70%	30.00%	29.00%	58.00%	53.80%	48.86%

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

### FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target A1 ≥	86.02%	86.03%	86.04%	86.05%
Target A2 ≥	68.99%	69.00%	69.00%	69.00%
Target B1 ≥	90.67%	90.68%	90.69%	90.70%
Target B2 ≥	71.55%	71.55%	71.55%	71.55%
Target C1 ≥	85.78%	85.79%	85.80%	85.80%
Target C2 ≥	53.81%	53.82%	53.83%	53.84%

Key:

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

☒ Enter additional information about stakeholder involvement

In addition to the stakeholder process described in the introduction, Kentucky monitors child outcome data through a system that is based on the *Kentucky Early Childhood Standards* (KDE, 2002; Revised 2012). This system was adopted by Part C in 2006-2007 and has been used since that time for Office of Special Education Programs (OSEP) child outcome and summary statement reporting. The *Kentucky Early Childhood Standards* span the age range of birth to five for all children.

The University of Kentucky (UK) houses the Kentucky Early Childhood Data System (KEDS). KEDS is a web-based platform for gathering data from multiple providers for progress monitoring on the *Kentucky Early Childhood Standards* (KDE, 2002; Revised 2012) and OSEP child outcome and summary statements. Demographic data for each child were gathered through the Technology-Assisted Observation and Teaming Support System (TOTS), downloaded to KEDS, and verified by providers across the state. Considerable training and technical assistance for Early Intervention Service Providers, Part C state staff, and POE administrators has been provided to help ensure accuracy of data. Assessment data were entered in KEDS online by a designated IFSP team member, the Primary Service Provider. Since October 2010, KEDS online included a verification step to ensure that all *initial* assessments were complete in KEDS prior to payment to providers for the assessment. As of September 2011, all *annual* assessments also were required to be entered in KEDS prior to payment. These steps significantly increased the number of complete assessments in KEDS with which to inform data analyses.

Data analysis for OSEP reporting is based on two levels of detailed crosswalks. First, specific items on each approved assessment instrument were aligned to the *Kentucky Early Childhood Standards* (KDE, 2002) and benchmarks by the publishers of the approved

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

assessment instruments. These alignments were reviewed, revised, and approved by state early childhood staff at both the SLA and Kentucky Department of Education. Then, each instrument crosswalk was reviewed by an expert panel (including assessment and child development expert representatives) to ensure coverage of the developmental continuum as well as alignment with Kentucky standards and benchmarks. The expert panel mapped individual items to benchmarks, and then age-anchored all items.

Each year, a workgroup group reviews Indicator 3 data and compares it to previous years' data as well as any national data available from the Early Childhood Outcomes Center. The workgroup conducts a thorough study of the targets, current performance results, and past performance and targets to determine if the targets are appropriate. A set of revised targets are then presented to the larger stakeholder group who reviews the SPP/APR for input.

**FFY 2015 SPP/APR Data**

Number of infants and toddlers with IFSPs assessed	2663.00
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**Outcome A: Positive social-emotional skills (including social relationships)**

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	87.00	3.27%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	128.00	4.81%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	695.00	26.10%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	928.00	34.85%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	825.00	30.98%

	Numerator	Denominator	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	1623.00	1838.00	85.71%	86.02%	88.30%
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	1753.00	2663.00	65.19%	68.99%	65.83%

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	40.00	1.50%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	111.00	4.17%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	649.00	24.37%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1028.00	38.60%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	835.00	31.36%

	Numerator	Denominator	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	1677.00	1828.00	91.39%	90.67%	91.74%
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	1863.00	2663.00	68.47%	71.55%	69.96%

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	58.00	2.18%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	310.00	11.64%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	984.00	36.95%

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	Number of Children	Percentage of Children
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1087.00	40.82%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	224.00	8.41%

	Numerator	Denominator	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$ .	2071.00	2439.00	83.92%	85.78%	84.91%
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$ .	1311.00	2663.00	48.86%	53.81%	49.23%

Was sampling used? No

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

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

The Kentucky child outcomes measurement system is based on recommended practice for continuous assessment of all children aged birth to five years as defined by the *Kentucky Early Childhood Standards* (Kentucky Department of Education, 2002) and *Kentucky Early Childhood Continuous Assessment Guide* (Kentucky Department of Education, 2004). Three assessment instruments are approved for use in monitoring children's progress:

- *Assessment, Evaluation and Programming System for Infants and Children Second Edition* (AEPS; Bricker et al., 2002);
- *Carolina Curriculum for Infants and Toddlers with Special Needs* (CCITSN; Johnson-Martin et al., 2004); and
- *Hawaii Early Learning Profile* (HELP; Parks, 2006).

All children are assessed with one of the approved instruments upon consent for an initial evaluation by the District Child Development Specialist (position at the Point of Entry) or by a contracted Primary Level Evaluator. Results of this assessment are entered item by item into the Kentucky Early Childhood Data System (KEDS) and serves as the baseline for progress measurement. Annually and/or prior to exit, the child is assessed again with one of the approved instruments by the child's Primary Service Provider.

KEDS is housed at the University of Kentucky (UK) and provides a web-based platform for gathering data from multiple providers for monitoring children's progress on *KY Early Childhood Standards* and OSEP child outcome and summary statements. Two types of data were collected to inform reporting of child progress. First, demographic data on each child were gathered from the Technology-Assisted Observation and Teaming Support System (TOTS; the Kentucky Part C data system) and downloaded to KEDS. Second, item-level assessment data were collected online, per publisher specifications, from Part C providers for children served. Once all assessment data were collected, they were matched to demographic data using the TOTS unique identifier, and imported into SPSS and SAS for analysis.

Data analysis was conducted for each of the three (3) approved assessment tools. The child's first and last assessments were utilized for analysis. Based on the first level crosswalk procedure, all item scores were analyzed to determine age-appropriate functioning. Items that correlated with each OSEP outcome were examined, and the percentage of items on which the child scored at age level were calculated. Item scores were recoded to a dichotomous variable reflecting age-appropriate functioning for each age interval. Each item was assigned a score of 0 (*not age-appropriate functioning*) or 1 (*age-appropriate functioning*) based on the alignment work of the expert panel who conducted the crosswalk. The assigned item score was based on the child's age at the time of assessment.

Three percentages (one for each OSEP outcome) were computed for each child on each assessment. Growth was determined by calculating the change in percentage correct on each outcome from entry to exit assessments. Growth was categorized into five (5) levels of functioning for each outcome as specified by OSEP. Level (a) included children who exhibited no change or a decrease in item scores, and level (b) included children who exhibited gain but achieved age-equivalent functioning on less than 50% of outcome items. Level (c) included children who achieved age-equivalent functioning on 50% through 79% of outcome items; level (d) included children who reached age-appropriate functioning on 80% or more outcome items; and level (e) included children who maintained age-appropriate functioning on 80% or more outcome items from entry to exit.

☒ Provide additional information about this indicator (optional)

Child outcome data includes all children with IFSPs who exited during the 2015-16 fiscal year, who had two complete points of data at least six months apart, and who had been in Part C for at least six months (N=2,663).

The number of children served by Part C remained consistent in FFY15. Children who did not have two complete points of data, did not receive services for at least 6 months, or had less than 75% complete assessments were not included in analyses.

The percentage of children making significant growth (Summary Statement 1) and having age-appropriate skills at exit (Summary Statement 2) were higher than the previous year's results for Outcomes A, B, and C. For Outcome A, 88% of children made significant

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growth and 66% of children had age-appropriate skills at exit. For Outcome B, 92% of children made significant progress, and 70% of children had age-appropriate skills at exit. For Outcome C, 85% of children made significant progress, and 49% of children had age-appropriate skills at exit. Targets were met for summary statements A1 and B1. Despite gains in the scores for A2 and B2, the targets were not met for these summary statements.

The KEDS data pool included 9,897 children with 6,035 of whom did not exit during FFY15. The 3,862 remaining children exited. Of the children who exited, 1,199 were not included in the analysis. There are three reasons children who exited are not included in the analysis. The first is they only have data for a single data point. While an outcomes score percentage can be calculated for their exit assessment, the categorical (a-e) cannot be determined without an entry assessment. The second reason is their assessments are less than seventy-five percent (75%) complete-- there is not enough input to accurately determine their outcome scores below this level of completeness. Finally, the third reason is there are less than six (6) months between assessments.

Of the 1,199 children not included in the OSEP analysis:

- 950 only had data for one data point:
  - 241 were at or above the eighty percent (80%) threshold for age-appropriate functioning for all three outcomes. They exited due to their age-appropriate level of functioning;
  - 349 may have exited due to their age but not attained age-appropriate level; and,
  - 360 would not be expected to have exited due to their age or their level of functioning but may have exited due to moving or unsuccessful attempts to contact the child and family.
- Four (4) had exit assessments that were less than 75% complete; and
- 245 had less than six (6) months between assessments.

According to FFY15 exit data, five percent (5%) of exiting was due to unsuccessful attempts to contact the child and family. This same percentage (5%) was also found for cases where the child and family moved, typically with no exit assessment. Only one percent (1%) of cases were closed due to parent withdraw and none of those had an exit assessment. The number of families opting out of referrals to the local education agency is trending upward with a slight increase of parents refusing an exit assessment.

Improvement is needed at the local Points of Entry (POE) to convey to parents the importance of measuring progress and obtaining an exit assessment. KEDS provides monthly data on percentage of children with one and two data points that is shared with the POE managers. Ways to share this data with early intervention providers are being explored. Also, the SLA is taking steps to ensure that the electronic file exchange of enrolled children between First Steps and KEDS is accurate so that all children with an assessment is included in both systems.

**Actions required in FFY 2014 response**

none



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Indicator 4: Family Involvement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2007	Target ≥					84.20%	85.20%	86.20%	86.80%	87.00%	99.45%	99.45%
		Data			82.20%	83.20%	86.48%	94.10%	97.81%	97.80%	95.99%	99.45%	99.77%
B	2007	Target ≥					75.30%	76.30%	77.30%	80.00%	80.00%	99.52%	99.52%
		Data			73.30%	74.30%	92.01%	93.10%	98.22%	97.80%	96.95%	99.52%	99.70%
C	2007	Target ≥					90.10%	90.60%	91.10%	91.50%	91.80%	99.03%	99.03%
		Data			89.60%	89.60%	92.68%	92.10%	96.53%	96.76%	97.07%	99.03%	99.62%

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

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target A ≥	99.45%	99.45%	99.45%	99.45%
Target B ≥	99.52%	99.52%	99.52%	99.52%
Target C ≥	99.03%	99.03%	99.03%	99.03%

Key:

Targets: Description of Stakeholder Input

Please refer to the stakeholder involvement section of the SPP/APR introduction.

FFY 2015 SPP/APR Data

Number of respondent families participating in Part C	1651.00
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	1536.00
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	1542.00
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	1535.00
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	1542.00
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	1529.00
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	1542.00

	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	99.77%	99.45%	99.61%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	99.70%	99.52%	99.55%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	99.62%	99.03%	99.16%

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

Prior to conducting the family survey, Service Coordinators were encouraged to obtain email addresses for families on their caseload

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and to enter them into Kentucky's data management system (TOTS). The TOTS system was configured to only accept an email format in field. Point of Entry (POE) managers were informed when the surveys were distributed so they could notify staff. POE staff were encouraged to inform parents that they may receive a family survey and explain to families the importance of their feedback. Last year a comment box was added to both the online and paper versions of the family survey. The electronic version of the survey was sent out initially with an email that explains the family survey and includes a link for the parent to access the Early Childhood Outcomes (ECO) Family Outcomes survey. The email also included the contact information for the parent consultant in case the family had any questions or concerns that needed to be addressed. This email was sent in both English and Spanish to all families electronically. The data for families that complete the online survey is saved directly into TOTS, the online data management system. Through TOTS the State Lead Agency is able to resend the surveys by email on a weekly basis to those families who have not responded to the electronic survey in an effort to encourage participation. The electronic version of the Family Survey is open for approximately one month. For FFY 2015, the number of online surveys completed was 772. This was an increase of 235 from FFY 2014. Once the electronic due date for submission passed, TOTS is used to generate the mailing list for the families who did not respond to the survey electronically or who did not have email addresses listed in the TOTS system.

Section B, which is used for APR reporting, focuses on the three helpfulness indicators required for OSEP reporting and contains seventeen items. Section B uses a 5-point scale and assesses the helpfulness of early intervention, ranging from 1= Not at all helpful, 2= A little helpful, 3= Somewhat helpful, 4= Very helpful, 5= Extremely helpful. For the fifth year, an online version of the survey was made available to families with email addresses. Families who did not have an email address on file were sent a hard copy survey through the mail. A list of families across the state from the fifteen (15) POEs, whose child had participated in First Steps within 120-day period, was generated from TOTS. This method of surveying was approved by the state's OSEP project officer in FFY 2010.

The paper surveys are printed in English and in Spanish. The survey was accompanied by a letter from the First Steps Parent Consultant explaining the survey, how the data is used, and the deadline date for submission. Families are given approximately one month to respond to the hard copy survey as well. The paper surveys were sent with a postage paid envelope addressed to the State Lead Agency. As the surveys arrived to the State Lead Agency, staff was responsible for data entry into the TOTS data system. The State Lead Agency administered both the distribution of the family survey and data entry. This ensured consistent data administration and survey management. When surveys were returned undeliverable, but with a forwarding address, surveys were re-sent.

All regions of the state are represented in the survey results. Analysis is done to determine the representativeness of the distributed surveys in the areas of race and gender based on the July 1, 2015 Estimates of Kentucky Census Data (Birth to 4).

Total number of Family Outcomes surveys disseminated: 4635

Total number of returned surveys: Total 1651 (879 by mail and 772 electronic). This number represents the total number of surveys that were returned to the State Lead Agency (SLA). This total includes incomplete surveys that were submitted.

The total number of respondent families participating in Part C that submitted complete surveys is 1542.

To calculate the percentages, the total number of positive responses for each statement was divided by the total number of responses (1542). The resulting number was then multiplied by 100.

A random sample of surveys entered into the database by SLA staff was reviewed for entry accuracy. No such review of the accuracy of parent entered data is possible. Family survey results are consistent with previous survey results which leads the SLA to accept the data as valid and reliable.

The survey distribution was consistent with the July 1, 2015 Estimates of Kentucky Census Data (Birth to 4) for race and ethnicity although the race/ethnicity groups are not aligned by the same groupings as the 619 race/ethnicity groupings.

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No



Yes, the data accurately represent the demographics of the State



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

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

A list of families across the state from the fifteen (15) POEs, whose child had participated in First Steps within a 120-day period, was generated from TOTS. This method of surveying was approved by the state's OSEP project officer in FFY 2010. This sampling method was determined to be valid as it includes all families for the 120 day period. No stratification of the sample population is conducted.

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none

**Responses to actions required in FFY 2014 response**

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Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find  
Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			0.56%	0.66%	0.76%	0.86%	0.71%	0.71%	0.71%	0.49%	0.51%
Data		0.49%	0.60%	0.65%	0.74%	0.68%	0.65%	0.52%	0.55%	0.49%	0.59%

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

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	0.52%	0.52%	0.52%	0.52%

Key:

Targets: Description of Stakeholder Input

Please see narrative in introduction for the complete description of stakeholder input.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 Child Count/Educational Environment Data Groups	7/14/2016	<a href="#">Number of infants and toddlers birth to 1 with IFSPs</a>	316	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2015	6/30/2016	<a href="#">Population of infants and toddlers birth to 1</a>	55,564	null

FFY 2015 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
316	55,564	0.59%	0.52%	0.57%

☒ Provide additional information about this indicator (optional)

Several Points of Entry have actively and vigorously worked on increasing referrals for children birth to one. Kentucky also continues to work closely with the Kentucky Birth Registry Surveillance system to ensure that referrals were made on children listed in the registry. With the potential for microcephaly and other developmental issues associated with the Zika virus, Kentucky developed specific procedures for referral and monitoring of children identified as exposed to Zika in utero.

Actions required in FFY 2014 response

none

Responses to actions required in FFY 2014 response

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

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

## Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			2.40%	2.45%	2.50%	2.55%	2.60%	2.65%	2.70%	2.53%	2.54%
Data		2.17%	2.26%	2.54%	2.90%	2.94%	2.76%	2.75%	2.67%	2.53%	2.67%

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

## FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	2.55%	2.55%	2.55%	2.55%

Key:

## Targets: Description of Stakeholder Input

Please see narrative in introduction for the complete description of stakeholder input.

## Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 Child Count/Educational Environment Data Groups	7/14/2016	<a href="#">Number of infants and toddlers birth to 3 with IFSPs</a>	4,498	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2015	6/30/2016	<a href="#">Population of infants and toddlers birth to 3</a>	167,081	

## FFY 2015 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
4,498	167,081	2.67%	2.55%	2.69%

## Actions required in FFY 2014 response

none

**Responses to actions required in FFY 2014 response**

# FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

## Indicator 7: 45-day timeline

Monitoring Priority: Effective General Supervision Part C / Child Find



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

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

### Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		61.00%	92.50%	96.00%	97.00%	98.50%	99.42%	98.92%	98.16%	98.79%	98.80%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

### FFY 2015 - FFY 2018 Targets

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

### FFY 2015 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
2,052	3,111	98.80%	100%	88.01%

#### Number of documented delays attributable to exceptional family circumstances

This number will be added to the "Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline" field above to calculate the numerator for this indicator.

686

### Explanation of Slippage

The results for this compliance indicator are significantly lower than previously reported findings. The range in days late was one (1) day to one hundred seventy-one (171) days. The change in vendors for the Kentuckiana (KIPDA) region, the largest local office in the state, had a major impact. The Point of Entry (POE) in the KIPDA region accounted for 248 (76%) of 325 untimely initial IFSPs. The inexperience of the staff along with an inexperienced POE Manager created a situation in which the flow of referrals to IFSP development was stymied. The State Lead Agency discovered that referrals were not logged in and, if logged in, they were stacked in an office not moving forward to evaluation. While the intent was to clearly document each step of the process, what happened was a complete breakdown of processing. Referrals to the new vendor increased from the number the previous vendor experienced which contributed to the backlog of referrals. The State Lead Agency provided training and technical assistance from up to four staff for extended periods of time in an effort to resolve the backlog and establish an effective internal process. KIPDA's data for the second half of the reported year indicate steady progress towards compliance with 63% of IFSPs developed timely. Currently, the rate is slowly increasing; continuing issues with vacancies and high caseloads for remaining staff impede faster progress.

If the KIPDA data is not considered, the state performance rate would be 97.50% which is lower than the rate for FFY14. Other POEs had issues with meeting the 45-day timeline as well as KIPDA. In the recent past, the number of untimely IFSPs ranged from thirty-two (32) to fifty-two (52). Taking the KIPDA data out of the total, seventy-seven (77) children had late initial IFSPs with a range of one (1) day late to seventy-five (75) days late. Two POEs struggled with provider shortages and increased numbers of referrals. One smaller POE had a service coordinator who was not performing adequately and had let cases linger without taking any actions. In these situations, the POE managers took the steps to resolve the issue although provider shortages continue to be a problem in the Bluegrass region. Several POEs had long periods of service coordinator vacancies that created high caseloads, making it more difficult to process initial referrals timely. During FFY15, many POE Managers carried caseloads of at least twenty children with three carrying caseloads over fifty.

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

- ☒ State monitoring
- ☐ State database



**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

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

July 1, 2015 through June 30, 2016.

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

Every referral is entered into the online database management system known as TOTS. A unique identifier is assigned to the case. The system is designed to match the date of the initial IFSP with the date of referral and calculates the forty-five day timeline. A report, Single Timeline Report, was generated for the date range indicated above (July 1, 2015-June 30, 2016) that includes all children who had an initial IFSP developed during the time period. POE Managers are required to verify the reason an initial IFSP is late each month. State Lead Agency staff review these monthly reports to verify the reason for late initial IFSPs. In preparation for submitting the Annual Performance Report, a different State Lead Agency staff person reviews the statewide report to verify late initial IFSPs. This is then compared to the monthly POE reports for consistency.

**Actions required in FFY 2014 response**

none

Responses to actions required in FFY 2014 response, **not including correction of findings****Correction of Findings of Noncompliance Identified in FFY 2014**

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

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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



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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data			74.50%	89.00%	100%	100%	100%	100%	100%	100%	100%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2015 - FFY 2018 Targets

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

FFY 2015 SPP/APR Data

Explanation of Alternate Data

The number of toddlers with disabilities exiting Part C who were potentially eligible for Part B is actually 3218. Theoretically, the state considers all children receiving Part C services as being "potentially eligible for Part B services" due to the significant delay required for eligibility. However, there are children reported in certain exit categories that are not potentially eligible. These children are those reported in the following categories: children who met IFSP goals prior to age three, children who died, children who moved, or children whose parents withdrew from services. The number 3218 is the result of subtracting the numbers in each of the aforementioned categories from the total number of children who exited.

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

- ☒ Yes
- ☐ No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
3,051	3,218	100%	100%	100%

Number of documented delays attributable to exceptional family circumstances <i>This number will be added to the "Number of children exiting Part C who have an IFSP with transition steps and services" field to calculate the numerator for this indicator.</i>	167
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What is the source of the data provided for this indicator?

- ☒ State monitoring
- ☐ State database

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

July 1, 2015 through June 30, 2016.

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

TOTS provides a comprehensive early intervention record for each child referred to First Steps, including the assignment of a unique  
4/20/2017

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

identifier. The record begins with referral and ends with transition/case closure. The system accounts for every referral entered and includes children found not eligible or who withdraw at any point. POEs are instructed to enter each and every referral.

The IFSP screen has a required field for a transition specific outcome. On the Planned Services screen, each early intervention service authorized must indicate the outcome associated with the service. The IFSP note includes additional information regarding the transition steps and services, providing the context for how the steps and services will be implemented.

**Actions required in FFY 2014 response**

none

**Responses to actions required in FFY 2014 response, not including correction of findings**

**Correction of Findings of Noncompliance Identified in FFY 2014**

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

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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



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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		100%	93.90%	92.80%	100%	100%	100%	100%	100%	100%	100%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2015 - FFY 2018 Targets

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

FFY 2015 SPP/APR Data

Explanation of Alternate Data

The number of toddlers with disabilities exiting Part C who were potentially eligible for Part B is actually 3218. This number was derived by subtracting the number of children who met IFSP goals prior to age three, died, moved, or parent withdrew from services.

Data include notification to both the SEA and LEA

- ☒ Yes  
☐ No

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
3,079	3,218	100%	100%	100%

Number of parents who opted out <i>This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.</i>	139
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Describe the method used to collect these data

A list of all children potentially eligible for Part B services and whose parent has not opted-out of Local Education Agency (LEA) notification is generated on a quarterly basis by Part C. The list originates from the birthdates for children with active records in TOTS. This list is disaggregated by school district and forwarded to the LEA. The list is also sent to the Kentucky Department of Education (KDE). Service Coordinators are required to verify that the LEA received the notification as part of the transition process. The total unduplicated number of notifications to the LEAs and KDE is then compared to original list to ensure no child was dropped between the lists.

Do you have a written opt-out policy? Yes  
Is the policy on file with the Department? Yes

## FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

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



State monitoring



State database

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

July 1, 2015 through June 30, 2016

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

Every child's record in TOTS includes a Transition screen. All key elements of the transition from Part C to Part B are mandatory elements on that screen. An electronic file exchange process with the State Education Agency (SEA) was developed as a part of the State Improvement Grant several years ago. There is a data-sharing agreement between Part C and the SEA to facilitate transition. The database system is designed to default to parent agreement for transition activities. Parents have the option to refuse notification of the local education agency and/or the SEA. Parents that choose this option must provide written indication of their desire to opt-out and the Service Coordinator must change the field on TOTS so that the refusal is stored electronically. Parents are informed both verbally and in writing that this refusal can be changed at any time.

The ongoing collaborative relationship between the agencies has resulted in consistently high rates of local coordination. Families benefit from the positive relationships by participating in a smooth and effective transition process.

### Actions required in FFY 2014 response

none

### Responses to actions required in FFY 2014 response, **not including correction of findings**

### Correction of Findings of Noncompliance Identified in FFY 2014

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

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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



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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		90.00%	78.00%	75.84%	89.80%	93.20%	99.40%	99.63%	99.46%	99.83%	99.47%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2015 - FFY 2018 Targets

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

FFY 2015 SPP/APR Data

Explanation of Alternate Data

The number of toddlers with disabilities exiting Part C who were potentially eligible for Part B is actually 3218. This number was derived by subtracting the number of children who met IFSP goals prior to age three, died, moved, or parent withdrew from services.

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

-  Yes
-  No

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
2,814	3,218	99.47%	100%	96.82%

Number of toddlers for whom the parent did not provide approval for the transition conference <i>This number will be subtracted from the "Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B" field to calculate the denominator for this indicator.</i>	139
Number of documented delays attributable to exceptional family circumstances <i>This number will be added to the "Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B" field to calculate the numerator for this indicator.</i>	167

Explanation of Slippage

A total of ninety-eight (98) cases had late transition meetings. Significant slippage for this indicator was again mostly attributable to the new vendor for the KIPDA region. Fifty-one (51) children had late transition meetings in the KIPDA region. Two (2) children had no documentation of a transition meeting ever occurring. One of those cases had a service provider note that stated the child was eligible for Part B services. This note leads the State Lead Agency to believe that some type of transition activity did occur but without proper documentation, this case must be found out of compliance. The Point of Entry (POE) struggled with many of the requirements of First Steps since very few of the staff had any experience with service coordination. Some staff had experience as case workers in child protection but the expectations for accountability in First Steps was more stringent. Learning to complete all procedures in a timely manner was challenging. Vacancies also created the situation of high caseloads, making the learning even more difficult. Over time,

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**

progress was noted in meeting all timelines. The State Lead Agency provided intense technical assistance and in some situations, facilitated relationships between the POE and other agencies involved with transitions at age three.

Without the KIPDA data, the performance rate for the rest of the state was 98.50%, lower than the FFY14 rate. Five (5) other POEs also slipped in their rates of timely transition meetings and account for the remaining late transition meetings. Two POEs had several factors that hampered service coordinators ability to schedule and conduct timely transition. These factors included an increase in referrals and provider shortages which created additional work to get a child through the IFSP process. Agency vacancies also created high caseloads, another factor impacting time management. One POE had a poor performing service coordinator that was dealt with through employee disciplinary procedures. Other factors that delayed transition meetings included late scheduling, inability of local education staff to attend on initial scheduled date, and bad weather.

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

- ☐ State monitoring
- ☐ State database

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

July 1, 2015 through June 30, 2016

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

The online data management system, TOTS, includes a listing of children for each service coordinator of all children on the service coordinator's caseload with an upcoming transition period. The transition screen in TOTS includes a banner that clearly provides the window of time for the timely transition conference. Further, POE Managers monitor the timeliness of transition conferences monthly and address any administrative or provider issue with the service coordinator that resulted in an untimely transition conference. This monthly monitoring is verified by the State Lead Agency staff.

**Actions required in FFY 2014 response**

none

**Responses to actions required in FFY 2014 response, not including correction of findings****Correction of Findings of Noncompliance Identified in FFY 2014**

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



FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 9: Resolution Sessions

Explanation of why this indicator is not applicable

Kentucky Part C does not use the Part B Due Process procedures.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

This indicator is not applicable.

Actions required in FFY 2014 response

none

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 10: Mediation

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%
Data			100%	100%	100%	100%	100%	100%	100%		

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

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	80.00%	80.00%	80.00%	80.00%

Key:

Targets: Description of Stakeholder Input

Please see narrative in introduction for the complete description of stakeholder input.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/2/2016	<a href="#">2.1.a.i Mediations agreements related to due process complaints</a>	n	null
SY 2015-16 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/2/2016	<a href="#">2.1.b.i Mediations agreements not related to due process complaints</a>	n	null
SY 2015-16 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/2/2016	<a href="#">2.1 Mediations held</a>	n	null

FFY 2015 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
0	0	0		80.00%	

☒ Provide additional information about this indicator (optional)

There were no requests for mediation and no mediation sessions held during the reporting period.

Actions required in FFY 2014 response

none

FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)  
Indicator 11: State Systemic Improvement Plan



Monitoring Priority: General Supervision

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

Reported Data

Baseline Data: 2013

FFY	2013	2014	2015
Target		99.03%	99.05%
Data	99.03%	99.62%	99.16%

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

FFY 2016 - FFY 2018 Targets


FFY	2016	2017	2018
Target	99.10%	99.25%	99.50%

Key:

Description of Measure

Please see attached report.

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

 Enter additional information about stakeholder involvement

Overview

See attached document.

Data Analysis

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

Please see attached report and previous Indicator 11 submissions (FFY13 and FFY14).

Analysis of State Infrastructure to Support Improvement and Build Capacity

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

Please see attached report.

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

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an

## FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).

### Statement

Please see attached report.

### Description

Please see attached report.

## Selection of Coherent Improvement Strategies

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

Please see attached report.

## Theory of Action

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

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

☒ **Provide a description of the provided graphic illustration (optional)**

Description of Illustration

Please see attached report and previous submissions for FFY13 and FFY14.

## Infrastructure Development

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

Please see attached report

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

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

Please see attached report

## Evaluation

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

Please see attached report

# FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

## Technical Assistance and Support

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

Please see attached report

## Phase III submissions should include:

- Data-based justifications for any changes in implementation activities.
- Data to support that the State is on the right path, if no adjustments are being proposed.
- Descriptions of how stakeholders have been involved, including in decision-making.

## A. Summary of Phase 3

1. Theory of action or logic model for the SSIP, including the SiMR.
2. The coherent improvement strategies or principle activities employed during the year, including infrastructure improvement strategies.
3. The specific evidence-based practices that have been implemented to date.
4. Brief overview of the year's evaluation activities, measures, and outcomes.
5. Highlights of changes to implementation and improvement strategies.

Please see attached report.

## B. Progress in Implementing the SSIP

1. Description of the State's SSIP implementation progress: (a) Description of extent to which the State has carried out its planned activities with fidelity—what has been accomplished, what milestones have been met, and whether the intended timeline has been followed and (b) Intended outputs that have been accomplished as a result of the implementation activities.
2. Stakeholder involvement in SSIP implementation: (a) How stakeholders have been informed of the ongoing implementation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing implementation of the SSIP.

Please see the attached report.

## C. Data on Implementation and Outcomes

1. How the State monitored and measured outputs to assess the effectiveness of the implementation plan: (a) How evaluation measures align with the theory of action, (b) Data sources for each key measure, (c) Description of baseline data for key measures, (d) Data collection procedures and associated timelines, (e) [If applicable] Sampling procedures, (f) [If appropriate] Planned data comparisons, and (g) How data management and data analysis procedures allow for assessment of progress toward achieving intended improvements
2. How the State has demonstrated progress and made modifications to the SSIP as necessary: (a) How the State has reviewed key data that provide evidence regarding progress toward achieving intended improvements to infrastructure and the SiMR, (b) Evidence of change to baseline data for key measures, (c) How data support changes that have been made to implementation and improvement strategies, (d) How data are informing next steps in the SSIP implementation, and (e) How data support planned modifications to intended outcomes (including the SiMR)—rationale or justification for the changes or how data support that the SSIP is on the right path
3. Stakeholder involvement in the SSIP evaluation: (a) How stakeholders have been informed of the ongoing evaluation of the SSIP and (b) How stakeholders have had a voice and been involved in decision-making regarding the ongoing evaluation of the SSIP

Please see the attached report.

## D. Data Quality Issues: Data limitations that affected reports of progress in implementing the SSIP and achieving the SiMR

1. Concern or limitations related to the quality or quantity of the data used to report progress or results
2. Implications for assessing progress or results
3. Plans for improving data quality

Please see the attached report.

## E. Progress Toward Achieving Intended Improvements

1. Infrastructure changes that support SSIP initiatives, including how system changes support achievement of the SiMR, sustainability, and scale-up
2. Evidence that SSIP's evidence-based practices are being carried out with fidelity and having the desired effects
3. Outcomes regarding progress toward short-term and long-term objectives that are necessary steps toward achieving the SiMR
4. Measurable improvements in the SiMR in relation to targets

Please see the attached report.

## F. Plans for Next Year

1. Additional activities to be implemented next year, with timeline
2. Planned evaluation activities including data collection, measures, and expected outcomes
3. Anticipated barriers and steps to address those barriers
4. The State describes any needs for additional support and/or technical assistance

Please see the attached report.

**FFY 2015 Part C State Performance Plan (SPP)/Annual Performance Report (APR)**  
**Certify and Submit your SPP/APR**

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

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

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

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Title: Part C Coordinator

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