



Minnesota Part C Annual Performance Report

Federal Fiscal Year 2011

Report

To the

Legislature

As required by

Minnesota Statutes,

section 125A.28

COMMISSIONER:

Brenda Cassellius, Ed. D.

Part C Annual Performance Report

April 2013

FOR MORE INFORMATION CONTACT:

Lisa Backer

Early Learning Services

651-582-8473

Lisa.backer@state.mn.us

Federal Fiscal Year 2011

Report to the Legislature

As required by

Minnesota

Statutes

125A.28

Cost of Report Preparation

The total cost for the Minnesota Department of Education (MDE) to prepare this report was approximately \$200. The Minnesota Department of Education is required to collect and analyze this data and describe our performance on selected indicators under Part C of the Individuals with Disabilities Education Act.

Estimated costs are provided in accordance with Minnesota Statutes 2011, section 3.197, which requires that at the beginning of a report to the Legislature, the cost of preparing the report must be provided.



**Minnesota Part C
Annual Performance Report
FFY 2011
(July 1, 2011 – June 30, 2012)**

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

Overview of the Annual Performance Report Development:

The Governor's Interagency Coordinating Council (ICC) supported staff from the Minnesota Department of Education (MDE) in the development of the FFY 2011 APR. During the ICC meeting in January 2013, the following steps were taken:

- Performance data was reviewed for each of the indicators.
- Activities were reviewed with special emphasis given to Indicators 3 and 4.
- Progress and slippage was discussed.

A final version of the APR, incorporating their feedback, will be sent to members of the ICC for approval.

Data included in the APR came from five primary sources: (1) the Minnesota Automated Reporting Student System (MARSS), (2) Minnesota's 618 data submitted during the reporting year, (3) monitoring data, (4) the Family Outcomes Survey, and (5) the ECSE Outcomes online data system that allows MDE to collect data for indicator 3 for all applicable children served under Part C.

State staff charged with responsibility for the annual development of the APR received invaluable technical assistance from the North Central Regional Resource Center, the National Early Childhood Technical Assistance Center (NECTAC), the Data Accountability Center (DAC) and the Early Childhood Outcomes Center (ECO).

The FFY 2011 APR will be posted on the MDE website and notices will be sent to stakeholders about the posting. It will be available under the heading of School Support > Early Learning Program Support> Part C/Preschool Special Education. The State Performance Plan (SPP) has been revised as required and is posted in the same location on the MDE website.

The department also posts the performance of local educational agencies (LEAs/early intervention program sites) on its website each year. The Early Childhood District Data Profiles can be accessed through the Data Center on the new website by choosing Data Reports and Analytics. Local performance is not reported to the public in instances where cell sizes are small and the publication of the data would result in the disclosure of personally identifiable information about individual children or where the data is insufficient to yield statistically reliable information. Many of the state's LEAs serve a small population and it is not possible to report the data. In these instances, reporting of data will be done jointly with other LEAs in larger administrative units, such as special education cooperatives. These are referred to as Special Education Administrative Units (SEAs). The data profiles will be posted in March 2013. Training will be provided for local staff on accessing and utilizing their data in program improvement.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

Account for untimely receipt of services, including the reasons for delays.

Measurable and Rigorous Target

FFY 2011: 100%

Actual Target Data for FFY 2011:

- a. Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner: 396
- b. Total number of infants and toddlers with IFSPs: 397

Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (Percent = [(a) divided by (b)] times 100): 99.75%

Method used to collect data for Indicator 1.

Data for this indicator is collected through MDE's Minnesota Continuous Improvement Monitoring Process (MNCIMP) web-based data system. This system is used in part for gathering data from record reviews completed as part of compliance monitoring. Compliance monitoring of Early Intervention (EI) programs occurs through the monitoring of the LEAs through SEAU's scheduled on a five-year cycle. In year one of the cycle, the SEAU conducts a self-review of records. In year two, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements of the Office of Special Education Programs (OSEP) Memo 09-02. In year three, MDE conducts an on-site review of the SEAU including a review of EI records, facilities, and the SEAU's Total Special Education System (TSES). In year four of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any Corrective Action Plans (CAPs), again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. In any given year, data is collected through the self-review of records for 20 percent of the SEAU's in Minnesota.

As part of the record review, a computer-generated sample is used to determine the EI records to be reviewed. Records are selected from the most recent SEAU enrollment data and are chosen in order to be accurately representative of the SEAU as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary

disability of the child. During the record review, the most current Individual Family Service Plan (IFSP) and corresponding due process documentation are monitored to determine that legal standards are met.

Data for this indicator are gathered from examining records of children receiving Part C services and determining whether the services were provided in a timely manner.

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

Improvement Activities Completed

All Improvement Activities are ongoing. During FFY 2011, MDE staff from the Division of Compliance and Assistance (C&A) continued training school district administrative and service staff during self-review and MDE review on the legal requirements, as well as on use of the web-based system for reporting individual child compliance data. The training is continually improved and delivered by a designed training team to ensure consistency. Verification is an important component of the training. MDE staff verifies, in real time, the results of records reviewed by SEAU staff. This process ensures SEAU staff members fully understand the legal requirements and are accurately reflecting compliance. All SEAUs have now completed the training at least once. MDE has posted the training modules on the MDE website in the form of a WebEx to allow greater access to the training materials to all SEAUs and interested practitioners. MDE plans to continue annual training as a key component of the state’s general oversight responsibilities, and will continue to include ongoing verification of SEAU self-review procedures.

Staff from the Division of Early Learning Services provided technical support on strategies to maintain high levels of quality and compliance.

Improvement Activities	Timelines	Resources
<p>Communicate Part C Standards. MDE trains SEAU and LEA staff during the year of scheduled self-review or MDE review. Part C Standards are emphasized as a component of the training process, focused specifically on review of individual child records for determination of compliance. Verification of the application of Part C Standards is completed by MDE C&A staff for each SEAU. In addition, MDE has posted a number of Question and Answer documents on the state website, specifically addressing issues of Part C compliance, including the timeline requirements as related to year-round service delivery.</p> <p>Update: SEAUs scheduled for self-review or MDE review during FFY 2011 were trained in the late summer and fall of 2011. SEAUs scheduled for self-review or MDE review during FFY 2012 were trained in the late summer and fall of 2012. Training of SEAUs will continue as a critical component to the state’s general oversight responsibilities.</p>	2006-2013	MDE C&A Staff
<p>Update the MNCIMP web-based system to include system for</p>	2009-2013	MDE C&A

Improvement Activities	Timelines	Resources
<p>ordering and tracking CAPs. MDE has added components to the MNCIMP web-based system for documenting CAPs, the means by which they are ordered, the specific regulatory reference which must be addressed, the dates when issued and when due, and the approval of the CAP and the evidence of completion. MDE is continuing to modify and update the system to make it more user-friendly and ensure that MDE is getting the information needed to accurately track the ordering and completion of CAPs so that noncompliance is corrected as soon as possible, but in no case more than one year from the identification.</p> <p><i>Update:</i> The CAP component of the MNCIMP web-based system is functional and used to track CAPs. Weekly updates are provided to staff to ensure timeliness of correction.</p>		<p>Staff MDE Information Technology Staff</p>
<p>Train SEAU's on the new requirements for CAPs and how the CAPs will be ordered and tracked through the MNCIMP web-based system. As part of the MDE trainings for those SEAU's in either the MDE review or self-review year of the monitoring cycle, MDE has added information on when and how CAPs will be ordered, the expectations of the CAPs and approval process for the CAP, both the plan itself and the evidence of completion.</p> <p><i>Update:</i> As part of the FFY 2011 training cycle, SEAU's were provided training on the development of CAPs. Modifications were made and MDE will continue to monitor the data collection process to ensure the data being reported is accurate.</p>	<p>2010-2013</p>	<p>MDE C&A Staff</p>

Explanation of Progress or Slippage

Minnesota reports progress from the FFY 2010 rate of 97.6percent to the FFY 2011 rate of 99.75percent. This represents an increase of 2.1percent and does essentially meet the FFY 2011 target of 100percent. The FFY 2011 data are based on MDE reviews and SEAU self-review of 46 total SEAU's. The occurrence of non-timely initiation of services was found in only one SEAU. This SEAU had only one individual child file that did not demonstrate timely initiation of services. This one occurrence of noncompliance was found to be due to SEAU issues.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance): Level of compliance (actual target data) state reported for FFY 2010 for this indicator: 97.6%

Number of findings of noncompliance the state made during FFY 2010 (the period from July 1, 2010 through June 30, 2010=1): 20

Number of FFY 2010 findings the state verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding): 10

Number of FFY 2010 findings not verified as corrected within one year [(1) minus (2)]:

1

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

Number of FFY 2010 findings not timely corrected (same as the number from (3) above):
1

Number of FFY 2010 findings the state has verified as corrected beyond the one-year timeline ("subsequent correction"): 1

Number of FFY 2010 findings not verified as corrected [(4) minus (5)]: 0

Actions if Noncompliance Not Corrected:

All findings of noncompliance have been corrected.

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

OSEP Memo 09-02 requires the state to verify that each SEAU with noncompliance reflected in the FFY 2009 data the state reported for this indicator: (1) is correctly implementing 34 CFR §§ 303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100 percent compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the SEAU.

MDE's review of the data for Indicator 1 showed that for all of the records found in noncompliance for the initiation of services not being timely, that services were ultimately initiated, although untimely. For any other noncompliance identified in the records, SEAUs are required to submit corrected documentation until it is approved by MDE. If the child is no longer within the jurisdiction of the SEAU, the SEAU must submit to MDE the reason (moved, for example) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the records with identified noncompliance had been corrected, unless the child was no longer within the jurisdiction of the SEAU, consistent with OSEP Memo 09-02.

In addition to requiring the correction of the individual child record noncompliance for all records, in order to verify that SEAUs are now correctly implementing 34 CFR §§ 303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100 percent compliance), MDE required SEAUs to complete CAPs to address systemic noncompliance. MDE has reviewed additional data from subsequent child record reviews conducted as part of an on-site review by MDE or by the SEAU as part of their CAP. Four hundred four (404) additional records have been subsequently reviewed to verify that the SEAUs are now correctly implementing 34 CFR §§ 303.340(c), 303.342(e), and 303.344(f)(1). The one finding of noncompliance from FFY 2010 that was not resolved in one year was from a CAP. The SEAU was able to complete the individual child record correction within one year, but was not able to demonstrate 100percent compliance in a subsequent review of additional data to verify the correct implementation of the regulatory references throughout the SEAU within the one year. The SEAU has subsequently completed their CAP to demonstrate 100 percent compliance.

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

All record review data from FFY 2010 was collected through MDE’s MNCIMP web-based data system. Once noncompliance is identified, it is tracked through the same web-based data system which includes a compliance tracking function. MDE verified that all services have been initiated, although deemed untimely, so no further action was required to correct the individual EI record. In addition the SEAU was required to develop a CAP, with a subsequent review of EI records, in order to demonstrate the SEAU is now correctly implementing 34 CFR §§ 303.340(c), 303.342(e), and 303.344(f)(1). SEAUs submitted Letters of Assurance along with information on the EI records that were reviewed, assuring that the SEAU is now in compliance.

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

Statement from the Response Table	State Response
<p>Because the state reported less than 100 percent compliance for FFY 2010, the state must report on the status of correction of noncompliance reflected in the data the state reported for this indicator.</p>	<p>Data on the correction of noncompliance is described in Indicator 9 and in the sections above: Correction of FFY 2010 Findings of Noncompliance, Actions Taken if Noncompliance Not Corrected, Verification of Correction (either timely or subsequent), and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010.</p>
<p>If the state does not report 100 percent compliance in the FFY 2011 APR, the state must review its improvement activities and revise them, if necessary.</p>	<p>The state has reviewed its improvement activities.</p>
<p>When reporting correction of noncompliance, the state must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance reflected in the data the state reported for this indicator: (1) is correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100 percent compliance) is based on a review of updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) has initiated services, although late, for any child whose services were not initiated in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02. In the FFY 2010 APR, the State must describe the specific actions that were taken to verify the correction.</p>	<p>This is reported under the above sections: Verification of Correction (either timely or subsequent) and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010.</p>

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

No changes or revisions have been made to the proposed targets, timelines, activities or resources for FFY 2012. A review of improvement activities was conducted. One activity was added.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

Measurable and Rigorous Target

FFY 2011 Target: 95%

Actual Target Data for FFY 2011:

FFY 2011: $4,867 \div 5,077 = 95.9\%$

Minnesota's EI programs served 95.9 percent of eligible infants and toddlers in natural environments on December 1, 2011. A total of 5,077 infants and toddlers were included in the annual count of children. Of those children, 4,738 received EI services at home. An additional 129 children received services in community-based settings such as child care, Early Head Start or Early Childhood Family Education. Only 210 children received services in settings that would not be considered "natural" for infants or toddlers. Twenty-five percent of those children were determined eligible for the disability categories of deaf/hard-of-hearing or autism spectrum disorder. Further analysis of Minnesota's performance shows that the likelihood of service in a non-natural environment increases directly with the age of the child as shown in Table 2.1 below.

Table 2.1: Infants and Toddlers Served in Natural Environment by Age on 12/1/2011

Age of Child on 12/1/2011	Percent primarily receiving early intervention services in the home or community-based setting
<1	99.5%
1	98.8%
2	93.5%

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

Efforts to promote and monitor the provision of services in natural environments are ongoing in Minnesota. Our regionalized system of professional development, the Centers of Excellence

Minnesota: FFY 2011

(CoE), has an active initiative to implement the family-guided routines-based intervention practices of Julianne Woods. A second cohort of cadre members was trained during the reporting year. Our regional professional development facilitators support active communities of practice promoting implementation with fidelity. In addition, PACER is a source of information to families as is the Help Me Grow page on the Minnesota Parents Know website. [Visit the Minnesota Parents Know website](http://www.mnparentsknow.info) (www.mnparentsknow.info).

Minnesota achieved the established target for this indicator. The performance represents an overall increase from FFY 2010 and an improvement in each discrete age cohort.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012: No revisions are needed at this time.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

Outcomes:

- 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.

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1: Percent = # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

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

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

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

A total of 2,900 children were included in this indicator’s calculation. Each child exited between July 1, 2011 and June 30, 2012 after receiving a minimum of 6 months of early intervention. These children started receiving services between July 1, 2008 and December 1, 2011. Approximately one half of the children were identified during the 2010-2011 school year. Ten percent were initially identified during the 2011-2012 school year. The distribution of children across progress categories for each outcome is displayed in Table 3.1. Performance as measured by Summary Statements compared to established targets is displayed in Table 3.2.

Table 3.1: Distribution of children across progress categories by outcome

Progress Category	Description	Outcome A	Outcome B	Outcome C
A	Percent of infants and toddlers who did not improve functioning.	1.14% (33/2900)	1.17% (34/2900)	1.28% (37/2900)
B	Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.	30.34% (880/2900)	30.66% (889/2900)	27.59% (800/2900)
C	Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	20.24% (587/2900)	24.79% (719/2900)	21.90% (635/2900)
D	Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	24.69% (716/2900)	28.24% (819/2900)	29.34% (851/2900)
E	Percent of infants and toddlers who maintained functioning at a level comparable to same-age peers.	23.59% (684/2900)	15.14% (439/2900)	19.90% (577/2900)

Table 3.2: Actual performance on summary statements by outcomes compared to targets

Summary Statements	FFY 2011 Target	FFY 2011 Actual
Outcome A Summary 1: Of those infants and toddlers who entered or exited early intervention below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	65%	58.8%
Outcome A Summary 2: The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	42.5%	48.3%
Outcome B Summary 1: Of those infants and toddlers who entered or exited early intervention below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	67%	62.5%
Outcome B Summary 2: 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.	43.5%	43.4%
Outcome C Summary 1: Of those infants and toddlers who entered or exited early intervention 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.	69%	64.0%
Outcome C Summary 2: 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.	45.5%	49.2%

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

Minnesota has implemented the Child Outcome Summary Form (COSF) and process as developed by the Early Childhood Outcome Center (ECO) since 2006. Children rated as 6 or 7 on the COSF scale are deemed to be meeting developmental expectations for same-age peers. District IFSP teams use multiple sources of information to inform their COSF ratings including information reported by parents, teacher observations and any of the evaluation and assessment tools that have been crosswalked by ECO. MDE collects data on each child

receiving early intervention for six months or more. Data are collected by local programs throughout the year and reported to MDE annually through a web-based application.

MDE collaborated with ECO and with NECTAC throughout the development of our state’s child outcome measurement system. During FFY 2011 face-to-face trainings were conducted upon request in every region of the state. Those districts where a review of data indicated concern were targeted for technical assistance.

Minnesota achieved the established Summary Statement Two targets for Outcomes A and C. Improvement activities continue to focus on both the quality of data as well as the quality of intervention. Minnesota annually publishes a COSF “pattern-checking” document to facilitate the examination by local program staff of the predictability of patterns within their entrance ratings, exit ratings, progress categories and summary statements. Using this data, MDE staff members continue to work with early childhood special education (ECSE) teams across the state to enhance the accuracy of their COSF ratings.

Efforts to improve the quality of early interventions are ongoing as shown on the table of improvement activities below. Minnesota’s regionalized system of professional development called the Centers of Excellence is now in its third year and has active content cadres throughout the state. Each region employs at least a .5 FTE professional development facilitator to conduct ongoing needs assessment and work across early childhood sectors to meet identified professional development needs.

Activities	Timelines	Resources
Continue implementation of the ECSE Outcomes web-based data collection tool , developed to facilitate the annual collection of child outcome data. Update: Ongoing	2009-2013	MDE staff
Provide training as requested on evaluation and assessment tools that are considered valid, reliable and have been crosswalked by the ECO Center to allow assessment results to appropriately inform ratings on the COSF. Update: Ongoing upon request	2009-2013	Part C
Create online learning modules as one means to increase utilization of the MDE website as a source of information for the COSF and process. Update: MDE has chosen to direct LEAs to the modules COSF training modules developed by the ECO center.	2010	MDE staff
Participate with ECO on ENHANCE , a federally funded initiative to validate the COSF. Three Minnesota districts have been selected to participate in the study: Minneapolis, Anoka-Hennepin, and Elk River. Update: Participation is ongoing and has expanded to one more LEA.	2009-2012	MDE staff in partnership with ECO
Annually update the COSF Pattern-Checking Tool as a means for local ECSE leaders to continue to validate the quality of COSF data submitted. Update: Ongoing	2009-2013	MDE staff

Minnesota: FFY 2011

Activities	Timelines	Resources
<p>Regionalize early childhood professional development activities through the creation of eight Early Childhood Centers of Excellence. Each region will employ a .5 FTE professional development facilitator to support the unique needs of early childhood professionals. Cadres will be established regionally including a training cadre on the use of routines-based interviews and embedded intervention.</p> <p>Update: A second cadre has been selected and trained on the evidence-based practices of family-guided routines-based intervention.</p>	2009-2013	Part C American Reinvestment and Recovery Act (ARRA) Part C annual grant
<p>Partner with the OSEP-funded Technical Assistance Center on Social-Emotional Intervention (TACSEI) to build statewide capacity to enhance social-emotional development within homes and other natural environments.</p> <p>Update: We now have more than 20 expansion sites implementing the pyramid model. Modules have also been developed and implemented for use in training Part C, Head Start and other home visitors. Training modules specific to child care providers have also been developed and implemented through the state's professional development registry.</p>	2009-2012	Part C
<p>Promote use of evidence-based practices through high-quality professional development initiatives targeted toward all segments of the early intervention system: administrators, ECSE teachers, related service providers, service coordinators and allied professionals.</p> <p>Update: MDE has designated one member of the state's ECSE team to be the Part C "local implementation specialist" to partner more effectively with early intervention programs to build quality.</p>	2009-2013	MDE Staff
<p>Partner with the Data Accountability Center on the State/Local Data Analytic Partnership Project. The primary purpose of this national pilot project is to build and support sustainable state and local partnerships in the use of data to improve results for children and youth with disabilities and their families.</p> <p>Update: Six local teams participated in this process to build capacity in effective use of outcome data.</p>	2012-2013	DAC Staff, MDE Staff, selected local partners

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

We are not meeting our established targets and so have added the following improvement activities with input and support from the Interagency Coordinating Council:

Improvement Activities	Timelines	Resources
Dedicate staff member to local implementation of Part C focused on quality in addition to compliance.	Beginning 2012 and ongoing	Part C funds

Minnesota: FFY 2011

Improvement Activities	Timelines	Resources
Explore greater standardization in measurement tools used by local programs to improve comparability of results across programs.	2013	MDE Staff
Explore inclusion of ECSE in the state's Tiered Quality Rating and Improvement System (TQRIS) as a means of identifying and incentivizing quality.	2013 and ongoing	Race to the Top: Early Learning Challenge activity
Increase access to information and support needed to increase meaningful implementation of evidence-based early intervention practices.	2013 and ongoing	

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

Measurable and Rigorous Targets for FFY 2011

- A. Know their rights: 95%
- B. Effectively communicate their children's needs: 90%
- C. Help their children develop and learn: 92%

Actual Target Data for FFY 2011

- A. Know their rights: 82.7%
- B. Effectively communicate their children's needs: 88.2%
- C. Help their children develop and learn: 86.4%

Minnesota implemented the revised version of the ECO Family Outcome Survey (FOS-R) during FFY 2010. FFY 2011 represents the first year that data was collected entirely through the revised survey. We have no data on the comparability of the two surveys so do not know whether, or to what extent, our drop in performance can be attributed to our change in tool. Guidance provided by ECO was carefully followed since the FOS-R contains more than one item for each of the OSEP helpfulness indicators. As recommended, a mean score was calculated for each indicator for each returned survey. If the mean score for a family was 4.0 or above, then that family was determined to have received enough support to have met that indicator.

The responses were assessed to determine representativeness of the data. Weighting factors were applied as shown in Table 4.1. Asian, American Indian/Alaskan Native, multi-racial, and Native Hawaiian/Pacific Islander were most closely represented within the respondents when compared to the pool of potential respondents. Respondents categorized as “White, and not of Hispanic origin” were slightly over-represented. Those who were Black/African-American or Hispanic/Latino were slightly under-represented.

Table 4.1: Potential and actual respondents and calculated weighting by racial category

	Asian	Black	Hispanic	American Indian/Alaska Native	Multi-racial	Native Hawaiian/Pacific Islander	White
Potential Respondents	132	254	288	50	118	6	1976
Responses Received	45	51	82	16	30	2	634
Calculated Weighting Factor	0.86	1.46	1.03	0.91	1.15	0.88	0.96

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

As previously stated, MDE exclusively utilized the revised FOS-R during the reporting year. The survey and corresponding cover letter have been translated into 13 languages. MDE continued to include this indicator as an area of Program Evaluation within the web-based MNCIMP system. Participating SEAs review their performance on the three outcomes compared to statewide performance and the state targets established by the ICC. MDE provided an individualized response rate for each SEA. Any SEA with a rate lower than fifty percent was required to develop an action plan that included strategies specific to increasing that local rate.

A second training and implementation cadre, led by Dr. Juliann Woods, focused on family-guided routines-based intervention, an evidence-based strategy to improve child outcomes by supporting each family to help their child develop and learn has been formed. Communities of practice supporting implementation are happening across the state. PACER uses multiple modalities including face-to-face workshops, print materials and web-based resources to provide information to families of infants and toddlers with disabilities.

In response to the Part C requirement at 34 CFR 303.321(c)(2)(ii) that a family-directed assessment be based on information “obtained through an assessment tool and also through an interview...”, Minnesota has recommended that local programs use Side A of the FOS-R as the required tool. It is hoped that use of the tool in this manner will provide baseline knowledge of each family’s status related to the outcomes, provide a springboard for inclusion of IFSP outcomes that promote positive family experiences related to the three family outcomes and provide familiarity with the tool which may improve our overall return rate. Anecdotal information from local programs staff on the use of the FOS-R in this way has been extremely positive.

Minnesota: FFY 2011

Activities	Timelines	Resources
<p>Continue strong relationship with PACER Center. Minnesota has benefited greatly by having the nationally regarded PACER center as a local resource. MDE supports the activities of PACER by providing financial assistance, disseminating information on PACER training events, and communicating regularly with PACER advocates. Update: This relationship is ongoing.</p>	2007-2013	Staff from MDE, MDH and DHS
<p>Promote research-based intervention practices. MDE is committed to expanding the knowledge and use of research-based intervention strategies to promote functional skill development of young children with disabilities. To this end, MDE will co-sponsor, with the Minnesota Division for Early Childhood (MN DEC), an annual research-to-practice professional development opportunity for ECSE and early intervention practitioners. Content will include researched-based intervention strategies in early literacy, social-emotional development, behavioral intervention, and strategies specific to facilitating the development of toddlers and preschool-aged children with autism spectrum disorder. These strategies can be documented on IFSPs and help families better help their children develop and learn. Update: The conference held in March 2012 included a keynote on the use of video self-modeling as a tool for early interventionists. Due to high interest, two groups of 100 practitioners were identified and given with additional training on this evidence-based practice.</p>	March 2007 and annual thereafter	MDE Staff collaborate with the Minnesota Council for Exceptional Children: Division for Early Childhood
<p>Develop training and guidance materials on the service coordination models/strategies, fiscal support and roles, responsibilities, knowledge and skills of Part C service coordinators. Update: Online training modules have been completed. Although the launch was delayed to incorporate the 2011 Part C regulations, statewide training will begin in 2013.</p>	2007-2013	MDE Staff and the CoE
<p>Increase statewide response rate. The actual response rate from parents served by the LEA will be calculated and compared to the overall state rate. Program administrators from those LEAs whose rate is below that of the state will be surveyed to determine whether the process implemented locally mirrors the state's expectation. Technical assistance will be provided as indicated by survey results. Update: This is calculated annually and communicated to local programs. Improving response rate is a required area of action for all local programs participating in MNCIMP.</p>	2008-2013	MDE Staff
<p>Investigate attributes of those local programs that demonstrate highest performance on each of the three family outcomes. MDE staff will use data analyses and structured interviews in an attempt to identify specific attributes of those programs that consistently support families to achieve positive outcomes. Results of the investigation will be shared across programs to improve statewide performance. Update: This information has been extracted from the program analysis conducted by MnCIMP participants. No trends have been identified.</p>	2009-2013	MDE Staff

Minnesota: FFY 2011

Activities	Timelines	Resources
<p>Develop a two-tiered incentive process to increase the response rate. The strategy should reward districts to promote the distribution of surveys and provide an incentive to families to return the survey in timely manner. Update: This activity has not been implemented.</p>	2012	Part C
<p>Change Data Collection Tool: MDE implemented ECO's new FOS beginning October 1, 2010. To facilitate responses from all potential respondents, the survey has been translated into 13 languages and posted on MDE's website with an informational cover letter for parents. Update: Transition to the use of the new tool is complete.</p>	2010-2013	MDE staff and Part C
<p>Use data for local program improvement: In addition to required public reporting of each program's status in supporting families to achieve desired outcomes, MDE will provide aggregate information on the responses to all questions to programs and provide guidance on how to put the new survey information to use for program improvement. Update: This will be completed in March 2013 at the annual meeting of program leaders.</p>	2011-2013	MDE Staff
<p>Revise Parents Rights and Procedural Safeguards document to comply with 2011 Part C regulations. Make revised document available in multiple languages on MDE website. Update: Minnesota's Part C Procedural Safeguards document has been revised to reflect the 2011 Part C regulations. In addition to English, the document is available in Arabic, Bosnian, Hmong, Khmer, Laotian, Russian, Somali, Spanish and Vietnamese. All versions are available on the MDE website.</p>	2012	MDE cross-division team

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

Improvement Activities	Timelines	Resources
Promote statewide use of the training modules developed for service coordinators that include information on supporting families gaining a full understanding of their rights under Part C.	2013	Centers of Excellence
Develop a more understandable version of the Procedural Safeguards document to serve as a companion to the existing document.	2013	MDE Staff
Increase state and local use of the information obtained through the family outcome survey as a tool in planning high-quality programs and services.	2013	MDE, in partnership with local program leaders.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Measurable and Rigorous Target:

FFY 2011: 0.875%

Actual Target Data for FFY 2011:

As provided by the U.S. Department of the Census, there were 68,412 infants and toddlers birth to age 1 in Minnesota on December 1, 2011. Of those, 597 received services through an IFSP. [Measurement: $597/68,412 = 0.0091 \times 100 = 0.873\%$] Minnesota serves proportionately fewer infants than the 1.02 percent national rate.

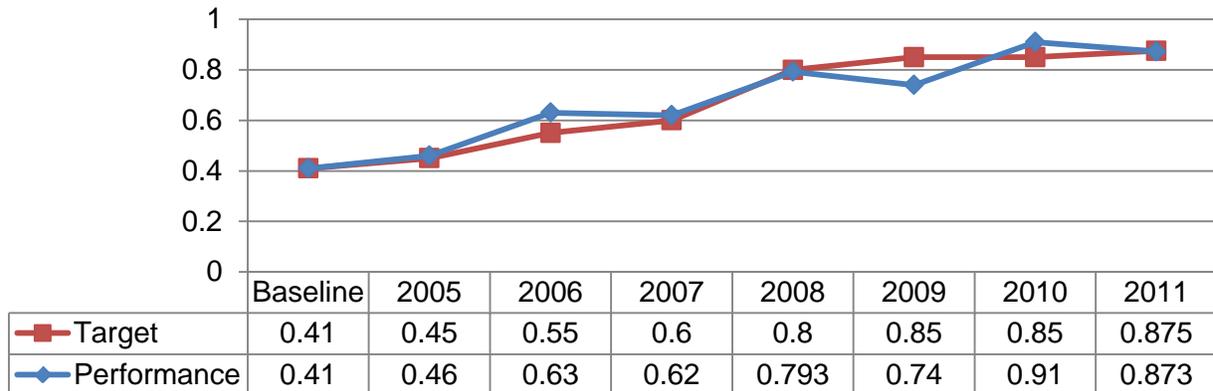
Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

During the reporting year many improvement activities were continued. Help Me Grow, the statewide public awareness and outreach campaign, promoted the use of the online and 1-800 referral options with primary referral sources. The number of referrals received through these options has grown.

The newly consolidated local interagency early intervention committee (IEIC) system focused efforts and resources on public awareness and outreach. Billboards, bus placards, advertisements inserted among movie trailers in theaters, other public service announcements, podcasts and the Watch Me Grow scrapbook help to inform parents and the public of services available through Help Me Grow and simple ways to make referrals. The Minnesota Department of Health (MDH) continues to provide technical assistance to SEAs regarding conditions with a high probability of resulting in developmental delay or disorder. Stronger partnerships with the Minnesota Departments of Human Services and Health, directly attributable to shared work on our Race to the Top: Early Learning Challenge Grant and the formation of a statewide Office of Early Learning have led to greater awareness of early intervention among primary referral sources, including child care.

Minnesota acknowledges that the state did not meet the established target for this indicator, missing that target by a mere two thousandths of a percent. Had two more infants been identified statewide, the target would have been achieved. The tremendous progress made by Minnesota since baseline was established in FFY 2004 is documented in Figure 5.1 below.

Figure 5.1: Percent of Minnesota infants served from FFY 2004 - 2011 compared to established targets



Minnesota has made remarkable progress in efforts to identify and serve infants under age 1 since the State Performance Plan was first submitted, as demonstrated by Figure 5.1. The most dramatic increase occurred between FFY 2007 and FFY 2008 when the number of infants served by the state’s programs increased from 450 to 583. This represented a year to year increase of almost 30 percent. MDE attributed this to full understanding of the revised eligibility criteria by primary referral sources and members of initial evaluation teams paired with improved outreach. Since the baseline for this indicator was established in FFY 2004, Minnesota’s performance has increased by .45 percent (from 0.41 percent to 0.873 percent). The national average has increased by only .10 percent (from .92 percent to 1.02 percent) during the same window of time. The improvement in performance shown by Minnesota on this indicator is more than three times greater.

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

Three new improvement activities are identified building upon the opportunities created by Minnesota’s Race to the Top: Early Learning Challenge grant and the release of the 2011 Part C regulations.

Improvement Activities	Timelines	Resources
Revise Minnesota Rule 3525.1350 to include the use of informed clinical opinion as an independent option for establishing eligibility.	By June 30, 2013	MDE Staff
Revise Minnesota’s Central Directory of early intervention services to meet requirements of 34 CFR 303.177.	2013 and beyond	MDE Staff
Contract with the Center for Inclusive Child Care to develop training modules for child care providers to better understand and implement their responsibility as a primary referral sources, including how to make a referral and their obligation to refer as soon as possible but in no case more than seven days after identification.	2013	Part C resources

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measureable and Rigorous Target

FFY 2011: 2.35%

Actual Target Data for FFY 2011:

As provided by the U.S. Department of the Census, there were 207,124 infants and toddlers birth to age 3 in Minnesota on December 1, 2011. Of those, 5,077 received services through an IFSP. [Measurement: $5,077/207,124 = 0.0237 \times 100 = 2.45\%$]. Minnesota serves proportionately fewer infants and toddlers than the 2.79 percent national rate.

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

Minnesota is proud to report continued progress on this indicator, out-performing our established target by one tenth of a percent.

Figure 6.1: Percent of Minnesota infants and toddlers served from FFY 2004 to FFY 2011 compared to established targets.

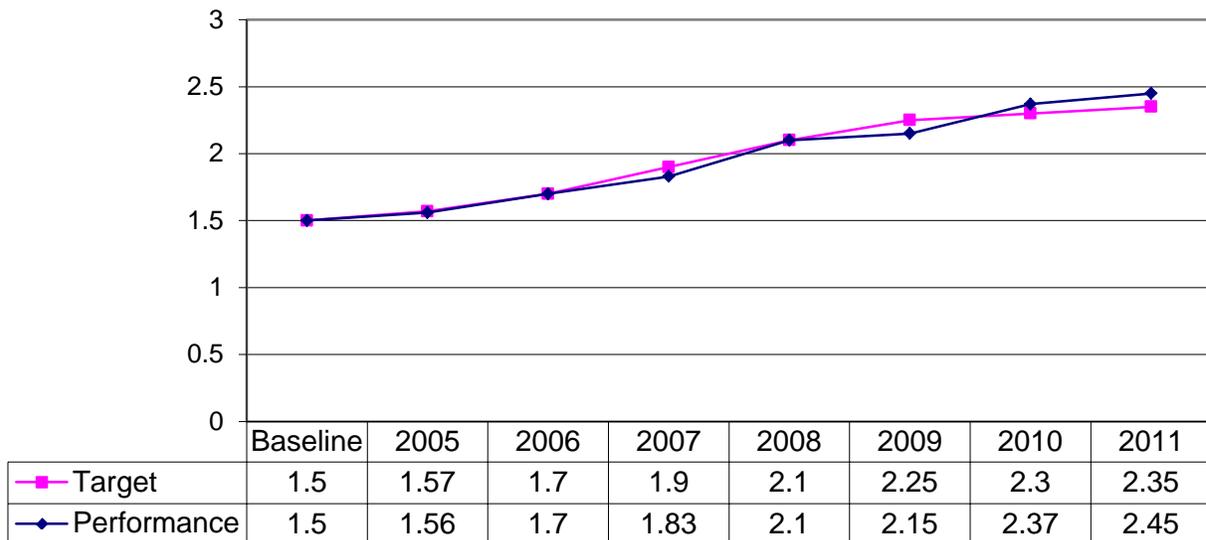


Figure 6.1 (above) documents Minnesota’s progress in the identification and service of infants and toddlers with disabilities over the past eight years. Minnesota’s performance in FFY 2011 represents 163 percent of our baseline performance, whereas national performance in FFY

Minnesota: FFY 2011

2011 represents only 1.21 percent of baseline. Minnesota has made progress on this indicator more rapidly than the country as a whole. We attribute this to the broadening of our eligibility criteria and the impact of public awareness and outreach efforts. Those efforts are discussed in greater detail in Indicator 5.

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

Three new improvement activities are identified building upon the opportunities created by Minnesota's Race to the Top: Early Learning Challenge grant and the release of the 2011 Part C regulations.

Improvement Activities	Timelines	Resources
Revise Minnesota Rule 3525.1350 to formally include the use of informed clinical opinion as an independent option for establishing eligibility.	By June 30, 2013	MDE Staff
Revise Minnesota's Central Directory of early intervention services to meet requirements of 34 CFR 303.177.	2013 and beyond	MDE Staff
Contract with the Center for Inclusive Child Care to develop training modules for child care providers to better understand and implement their responsibility of primary referral sources that clearly describe how to make a referral and their obligation to refer as soon as possible but in no case more than seven days after identification as per 34 CFR 303.303(a)(2)(i).	2013	Part C resources

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

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

Measurable and Rigorous Targets

FFY 2010: 100%

Actual Target Data for FFY 2011:

$(321 \div 343) \times 100 = 93.6\%$

Describe the Method Used to Collect Data

Data for this indicator is collected through the MNCIMP web-based data system. The MNCIMP web-based data system is used in part for gathering data from record reviews completed as part of compliance monitoring. Compliance monitoring of EI programs occurs through the monitoring of SEAU's scheduled on a five-year cycle. In the first year of the cycle, the SEAU conducts a self-review of records. In the second year, the SEAU must demonstrate correction of any noncompliance identified in the self-review, consistent with the requirements of OSEP Memo 09-02. In the third year, MDE conducts an on-site review of the SEAU including a review of early intervention records. In the fourth year of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. In any given year, data is collected through the self-review of records for 20 percent of the SEAU's in Minnesota.

As part of the record review, a computer generated sample is used to determine the early intervention records to be reviewed. Records to be monitored are selected from the most recent district enrollment data. Files selected for review are chosen so as to be an accurate representation of the district as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability of participating infants and toddlers. During the record review, the most current due process documentation is monitored to determine that legal standards are met.

Data for this indicator is gathered from looking at all the files with documented parental consent for an evaluation completed within the district. Noncompliance is identified for this indicator when the evaluation and assessment and IFSP team meeting were not conducted within Part C's 45-day timeline.

A total of 343 files documenting Part C evaluations that took place between July 1, 2011 and June 30, 2012 were reviewed. Three hundred twenty one files included evaluations or IFSP meetings conducted between July 1, 2011 and June 30, 2012 which were found to be timely (272) or were untimely due to exceptional child/family circumstances (49). Therefore, the performance for FFY 2011 was 93.6 percent

Infants Evaluated and Assessed and provided an Initial IFSP meeting Within Part C's 45-day timeline:

- a. Number of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline: 321
- b. Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted: 343

Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline (Percent = [(a) divided by (b)] times 100) = 93.6 percent

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

Improvement Activities Completed

During FFY 2011, MDE staff continued training of school district administrative and service staff during both self-review and MDE review in legal requirements as well as on the use of the web-based system for reporting individual child compliance data. The training is continually improved and a designated training team ensures consistency. MDE has also emphasized the verification component of the training during which MDE staff verifies, in real time, the results of records reviewed by LEA staff. This process ensures LEA staff members fully understand the legal requirements and are accurately reflecting compliance. MDE has posted the training modules on the MDE website to allow greater access to these materials for all LEAs and interested practitioners. MDE plans to continue annual training as a key component of the state's general oversight responsibilities, and will continue to include ongoing verification of LEA self-review procedures.

Concurrently, representatives of the Division of Early Learning Services conducted regionalized professional development initiatives including the requirements of Indicator 7. Key team members partnered with local programs to examine processes, identify barriers to completing high-quality evaluations in a timely manner and to provide examples of appropriate documentation of exceptional child or family circumstances. Early Learning Services is committed to helping local programs "do it right and do it well".

Explanation of Progress or Slippage

Minnesota reports progress on Indicator 7 from the FFY 2010 rate of 90.7 percent to the FFY 2011 rate of 93.6 percent. Although this does not meet the FFY 2011 target of 100 percent, this represents an increase of 2.9 percent.

The FFY 2011 data are based on MDE reviews and LEA self-review of 46 LEAs. Approximately 33 percent of the LEAs reviewed were found to have noncompliance in this area. Of the 15

LEAs in noncompliance, 10 (66 percent) were found to have a single occurrence of noncompliance in this area. Three LEAs (20 percent) had two occurrences of individual child noncompliance and two LEAs (13 percent) had three occurrences of noncompliance. No LEA had more than three occurrences of noncompliance based on files reviewed.

Correction of FFY 2010 Findings of Noncompliance:

Level of compliance (actual target data) state reported for FFY 2010 for this indicator: 90.7%

1. Number of findings of noncompliance the state made during FFY 2010 (the period from July 1, 2010, through June 30, 2011): 52
2. Number of FFY 2010 findings the state verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding): 47
3. Number of FFY 2010 findings not verified as corrected within one year [(1) minus (2)]: 5

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

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

Actions Taken if Noncompliance Not Corrected:

All noncompliance has been corrected.

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

OSEP Memo 09-02 requires the state to verify that each LEA with noncompliance reflected in the FFY 2009 data the state reported for this indicator: (1) is correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100 percent compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) had conducted the initial evaluation, assessment, and IFSP meeting, although late, for any child for whom the 45-day timeline was not met, unless the child is no longer within the jurisdiction of the LEA.

MDE's review of the data for Indicator 7 showed that for all of the records found in noncompliance for the evaluation, assessment, and IFSP meeting not being completed within the 45-day timeline, each evaluation, assessment, and IFSP meeting had been completed, although late. When record reviews are completed and data entered into the MNCIMP system, the referral date, date the evaluation is complete, and the date the IFSP meeting held are entered. If a date is missing, indicating the evaluation has not been completed or the meeting has not been held, then MDE requires the district to submit completed evaluation and IFSP meeting documentation to demonstrate the evaluation, assessment, and IFSP meeting has

been completed, although late. If the child is no longer within the jurisdiction of the LEA, the LEA must submit to MDE the reason (moved, for example) and the date of the occurrence to release the district from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the evaluations, assessment, and IFSP meetings had been completed and that each LEA with noncompliance reflected in the data the state reported for this indicator had completed the evaluation, assessment, and IFSP meeting, although late, for any child whose evaluation, assessment, and IFSP meeting was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

In addition to requiring the correction of the individual record noncompliance for all records, LEAs were also ordered CAPs to verify that LEAs are now correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100 percent compliance). MDE has reviewed additional data from subsequent early intervention record reviews conducted as part of an on-site review by MDE or by the LEA as part of the CAP. Over 500 additional records have been subsequently reviewed to verify that the LEAs are now correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a). The five findings of noncompliance from FFY 2010 that were not resolved in one year were all from CAPs. The LEAs were able to complete the individual child record correction within one year, but were not able to demonstrate 100 percent compliance in a subsequent review of additional data to verify the correct implementation of the regulatory references throughout the LEA within the one year. Each LEA has subsequently completed their CAP and demonstrated 100 percent compliance.

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

All record review data from FFY 2010 was collected through MDE's MNCIMP web-based data system. Once noncompliance is identified, it is tracked through that system's compliance tracking system. For timelines, the system requires the dates of the referral, the completed evaluation and IFSP meeting held be entered into the system. This allows MDE to verify that the evaluations have been completed and meetings held, although they may have been late. If any required data is missing, MDE requires the LEA to submit the completed evaluation and IFSP meeting documentation. If the child is no longer within the LEA's jurisdiction, the LEA must inform MDE of the reason and date effective before being released from further correction. MDE verified that all of the evaluations and IFSPs identified in FFY 2010 as noncompliant due to not meeting the timeline requirements had been completed, although late, so no further action was required to correct the individual child record. In addition, LEAs were required to develop CAPs, with a subsequent review of child records, in order to demonstrate the LEA is now correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a). LEAs additionally submitted Letters of Assurance along with information on the child records that were reviewed, assuring that the district is now in compliance.

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

Statement from the Response Table	State's Response
<p>The state must demonstrate, in the FFY 2011 APR, that the State is in compliance with the 45-day timeline requirements in 34 CFR §§ 300.321(e)(2), 300.322(e)(1), and 300.342(a). Because the State reported less than 100 percent compliance for FFY 2010, the State must report on the status of correction of noncompliance reflected in the data the State reported for this indicator.</p>	<p>Data on the correction of noncompliance is described in Indicator 9 and in the sections above: Correction of FFY 2010 Findings of Noncompliance, Actions Taken if Noncompliance Not Corrected, Verification of Correction (either timely or subsequent), and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010.</p>
<p>If the state does not report 100 percent compliance in the FFY 2011 APR, the state must review its improvement activities and revise them, if necessary.</p>	<p>The state has reviewed its improvement activities. No activities have been added. MDE will implement the ongoing activities, including the Improvement Activity added in FFY 2010.</p>
<p>When reporting correction of noncompliance, the state must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance reflected in the FFY 2010 data the state reported for this indicator: (1) is correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100 percent compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) has conducted the initial evaluation, assessment, and IFSP meeting, although late, for any child for whom the 45-day timeline was not met, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the state must describe the specific actions that were taken to verify this correction.</p>	<p>This is reported under the above sections: Verification of Correction (either timely or subsequent) and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities /

Timelines / Resources for FFY 2012: MDE proposes the following improvement activity to more effectively support LEAs in the implementation of Part C.

Improvement Activities	Timelines	Resources
MDE has designated one staff member to serve as the state's Part C Implementation Specialist to offer more targeted support.	2012 and beyond	MDE Staff

Monitoring Priority: Effective General Supervision Part C: Effective Transition

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

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

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

Measurement:

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

Account for untimely transition conferences, including reasons for delays.

Measureable and Rigorous Targets

FFY 2011 A: 100% B: 100% C: 100%

Actual Target Data for FFY 2011

8A: Number of children exiting Part C who have an IFSP with transition steps and services (152) divided by the number of children exiting Part C (164) x 100. $152/164 \times 100 = 93\%$

8B: Number of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred (164) divided by the number of children exiting Part C who were potentially eligible for Part B (164) x 100. $164/164 \times 100 = 100\%$

8C: Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred (163) divided by the number of children exiting Part C who were potentially eligible for Part B (164) x 100. $163/164 \times 100 = 99\%$

Method used to collect data for Indicator 8.

Data for this indicator is collected through MDE's MNCIMP web-based data system. The MNCIMP web-based data system is used in part for gathering data from record reviews completed as part of compliance monitoring. Compliance monitoring of EI programs occurs through the monitoring of the LEAs through SEAs scheduled on a five-year cycle. In the first

year of the cycle, the LEA conducts a self-review of records. In the second year, the SEAU must demonstrate correction of any noncompliance identified in the self-review, consistent with the requirements of OSEP Memo 09-02. In the third year, MDE conducts an on-site review of the SEAU including a review of child records and facilities. In the fourth year of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements of OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. In any given year, data is collected through the self-review of records for 20 percent of the SEAUs in Minnesota.

As part of the record review, a computer-generated sample is used to determine the child records to be reviewed. Records are selected from the most recent SEAU enrollment data and are chosen in order to be accurately representative of the SEAU as a whole. Selection is based on a stratified random sampling with consideration given to race/ethnicity, age, gender, and primary disability of the child. During the record review, the most current IFSP and corresponding due process documentation are monitored to determine that legal standards are met.

Data for this indicator are gathered from examining all the files for children with a third or fourth birthday within the reporting period. Data was reviewed to determine which records were reviewed after the child was at least 2 years, 9 months old, which children had previously received Part C services, which children had IFSPs with transition steps and services, and which children had a timely transition conference, if potentially eligible for Part B. The data were also examined to identify children referred to Part C less than 90 days before their third birthday. Because education is the lead agency for Part C in Minnesota, the LEA is always notified of Part C children potentially eligible for Part B, given that the LEA provides services under both Part B and Part C.

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

Improvement Activities Completed

During FFY 2011, MDE staff trained school district administrative and service staff involved in self-review or MDE review in legal requirements, as well as on use of the web-based system for reporting individual child compliance data. The training is continually improved and a designated training team formed ensures consistent training. MDE has also emphasized the verification component of the training in which MDE staff verifies, in real time, the results of records reviewed by SEAU staff. This process ensures SEAU staff fully understands the legal requirements and are accurately reflecting compliance. All existing SEAUs will have gone through the training at least once by the end of FFY 2011. MDE has posted the training modules on the MDE website in the form of a WebEx to allow greater access to the training materials to all SEAUs and interested practitioners. MDE plans to continue annual training as a key component to the state's general oversight responsibilities, and will continue to include ongoing verification of SEAU self-review procedures.

Improvement Activities	Timelines	Resources
<p>Provide additional training to IEICs and local IFSP teams to promote inclusion of transition activities into IFSPs written or reviewed for children ages 2 years 3 months to 2 years 9 months.</p> <p>Update: SEAUs scheduled for MDE review or self-review in FFY 2011 received training. A designated team has been formed to streamline the training and ensure consistency. MDE has received many positive comments regarding the benefits of the training and the ease of use of the web-based system. MDE has also posted the training materials on the MDE website in the form of a WebEx to allow greater access to the materials for all SEAUs.</p>	<p>2006 - 2013</p>	<p>MDE C&A Staff</p>
<p>Continue to monitor for the documentation of transition activities. Monitoring reviewed Part C records for transition to Part B requirements. Monitoring will also include Part B three-year-olds in this element of review.</p> <p>Update: SEAUs have been trained on and are using the MNCIMP web-based system for submitting record review data. Record reviews are conducted for both Part B and Part C samples, including three-year-olds in the Part B sample. The web-based system allows SEAUs and MDE staff to view and analyze monitoring data, identify noncompliance, and issue findings in a timely manner. MDE has received many positive comments from SEAUs regarding the web-based system.</p>	<p>2006 - 2013</p>	<p>MDE C&A Staff</p>
<p>Update the MNCIMP web-based system to include a system for ordering and tracking CAPs. MDE has added components to the MNCIMP web-based system for documenting CAPs, the means by which they are ordered, the specific regulatory reference which must be addressed, the dates when issued and when due, and the approval of the CAP and the evidence of completion. MDE is continuing to modify and update the system to make it more user friendly and to ensure that MDE is getting the information needed in order to be able to accurately track when CAPs are ordered and completed to ensure that all noncompliance is corrected as soon as possible, but in no case more than one year from the identification.</p> <p>Update: The CAP component of the MNCIMP web-based system is functioning and being used to track CAPs. Weekly updates are provided to staff to ensure timeliness of correction. A few changes have been made to the functioning of the system and MDE will continue to modify the system as needed to improve functionality.</p>	<p>2009 - 2013</p>	<p>MDE C&A Staff Technology Staff</p>

Improvement Activities	Timelines	Resources
<p>Train LEAs on the new requirements for CAPs including how they will be ordered and tracked through the MNCIMP web-based system. As part of the trainings for LEAs in the MDE Review or self-review year of the monitoring cycle, MDE has added information on when and how CAPs will be ordered, the expectations of the CAPs and approval process for the CAP, both the plan itself and the evidence of completion.</p> <p>Update: As part of the FFY 2010 and FFY 2011 training cycles, LEAs were provided training on the development of CAPs. A CAP Development Guide was also created to serve as a quick reference for LEAs when developing their CAPs. MDE will continue to train LEAs on the CAP requirements.</p>	<p>2010 - 2013</p>	<p>MDE C&A Staff</p>
<p>Provide information on transition to parents. PACER will provide information on Minnesota’s process of transition from services under Part C to Part B using the following strategies:</p> <ul style="list-style-type: none"> • Development and distribution of parent-friendly handouts on effective transition strategies. • The inclusion of information on effective transition process on the PACER website. • Making transition information readily available to families from linguistically or culturally diverse backgrounds through multiple formats. • Providing individualized assistance to families of toddlers on request. • Including information on transition in PACER’s early childhood newsletter at least one time per year. <p>Update: PACER has developed and distributed information for parents on transition strategies through a variety of formats, including their newsletter, brochures and face-to-face meetings with families.</p>	<p>2006 - 2013</p>	<p>PACER Center</p>
<p>Provide training and guidance on service coordination models/strategies, fiscal support and roles, responsibilities, knowledge and skills of Part C service coordinators.</p> <p>Update: Modules have been completed and will be released during January 2013.</p>	<p>2007 - 2013</p>	<p>MDE ELS Staff and the Centers of Excellence</p>

Improvement Activities	Timelines	Resources
<p>MDE will implement transition policies and practices consistent with 34 CFR 303.209 and 303.344(h).</p> <p>Update: MDE developed and delivered training on the 2011 Part C regulations, including the revised transition requirements. Six full-day trainings were held. A two-day intensive module was delivered as part of the annual Early Childhood Special Education Summer Institute.</p> <p>MDE has modified the state’s recommended IFSP form to embed transition prompts following our cross division mantra of “making it hard for LEAs to get it wrong”.</p>	<p>2012 and ongoing</p>	<p>MDE Staff</p>

Explanation of Progress or Slippage

For 8A, Minnesota reports progress from the FFY 2010 rate of 100 percent to the FFY 2011 rate of 93 percent. This represents slippage of 7 percent from the established target and prior year performance. Compliance for 8B remains at 100 percent. Minnesota reports progress on Indicator 8C from the FFY 2010 rate of 90.8 percent to the FFY 2011 rate of 99.4 percent. This represents an increase of 8.6 percent but does not meet the FFY 2011 target of 100 percent.

The FFY 2011 data are based on MDE reviews and SEAU self-review of 46 SEAU. In analyzing the identified noncompliance, it was found that approximately 17 percent of the SEAU reviewed were found to have noncompliance in this area. Seven SEAU were found to have noncompliance related to 8A. One SEAU was found to have noncompliance related to 8C.

Of those seven SEAU in noncompliance with 8A, four (57 percent) were found to have only one occurrence of individual child noncompliance in this area. One SEAU had two occurrences and two SEAU had three occurrences. Two of these three SEAU with multiple occurrences of noncompliance are large cooperatives with multiple individual districts. The third is a moderately sized district in greater Minnesota. A total of twelve individual child records were cited for noncompliance for IFSPs not having all the transition steps and services requirements. This data shows slippage from the FFY 2010 rate of 100 percent. MDE has done extensive training on the requirement that IFSPs include transition steps and services and what information must be included in the IFSP. It is believed that this training has helped to identify areas that were previously thought to be in compliance by SEAU, but subsequent to training revealed that the IFSPs are not meeting compliance requirements. MDE has also modified the MNCIMP reporting system data collection and the analysis to obtain more accurate data. More consistent identification of noncompliance as well as better reporting, data collection and analysis is believed to account for the slippage on this indicator.

Only one SEAU, and one individual child record, had identified noncompliance related to 8C. For this record, the data indicates a planning meeting was held, but it was held less than 90

days prior to the child's third birthday and therefore does not meet the requirements of a timely transition conference. MDE has done extensive training on the Part C to Part B transition requirements and timelines. It is believed the training emphasis has helped improve compliance with this indicator.

All occurrences of individual child record noncompliance reported in this indicator were found to be out of compliance due to SEAU issues. Some of the identified SEAU issues include staffing shortages, staff absences or staff error.

8A Correction of FFY 2010 Findings of Noncompliance:

Level of compliance (actual target data) state reported for FFY 2010 for this indicator: 100%

8B Correction of FFY 2010 Findings of Noncompliance:

Level of compliance (actual target data) state reported for FFY 2010 for this indicator: 100%

8C Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100 percent compliance):

Level of compliance (actual target data) state reported for FFY 2010 for this indicator: 91%

1. Number of findings of noncompliance the state made during FFY 2010 (the period from July 1, 2010, through June 30, 2010): 11
2. Number of FFY 2010 findings the state verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding): 11
3. Number of FFY 2010 findings not verified as corrected within one year [(1) minus (2)]: 0

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

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

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance identified in FFY 2010 have been corrected.

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

For Indicator 8C, MDE issued 11 findings of noncompliance in FFY 2010. OSEP Memo 09-02 requires the state to verify that each EIS program with noncompliance reflected in the FFY 2010 data the state reported for this indicator: (1) is correctly implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100 percent compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or

a state data system; and (2) had conducted the transition conference, although late, for any child potentially eligible for Part B whose transition conference was not timely, unless the child is no longer within the jurisdiction of the EIS program. MDE's review of the data for Indicator 8C showed that for all of the records found in noncompliance for the transition conference not being completed for any child potentially eligible for Part B that the transition conference has been held, although late. When record reviews are completed and data entered into the MNCIMP system, the IEP planning meeting date and the previous planning meeting date are entered. If a date is missing, indicating the IFSP planning meeting has not been held, and then MDE requires the SEAU to submit completed IFSP meeting documentation to demonstrate the IFSP meeting has been conducted, although late. If the child is no longer within the jurisdiction of the SEAU, the SEAU must submit to MDE the reason (moved, for example) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the IFSP planning meetings had been completed and that each SEAU with noncompliance reflected in the data the state reported for this indicator had completed the IFSP planning meeting and the transition conference, although late, for any child whose transition conference was not timely, unless the child is no longer within the jurisdiction of the SEAU, consistent with OSEP Memo 09-02.

In addition to requiring the correction of the individual child record noncompliance for all records, in order to verify that SEAUs are now correctly implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100 percent compliance), MDE has reviewed additional data from subsequent child record reviews conducted as part of an on-site review by MDE or by the SEAUs as part of a CAP. Over 500 additional records have been subsequently reviewed to verify that the SEAUs are now correctly implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100 percent compliance).

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

All record review data from FFY 2010 was collected through MDE's MNCIMP web-based data system. Once noncompliance is identified, it is tracked through the system's compliance tracking function. For timelines, the system requires the date that the transition conference is held be entered into the system. This allows MDE to verify that required meetings have been held, although they may have been late. If the date the meeting is held is missing, MDE requires the SEAU to submit the completed IFSP meeting documentation. If the child is no longer within the SEAU's jurisdiction, the SEAU must inform MDE of the reason and date effective before being released from further correction. MDE verified that all of the records identified in FFY 2009 as noncompliant due to not meeting the timeline requirements for the transition conference did have a transition conference, although late, so no further action was required to correct the individual child record. In addition, SEAUs were required to develop CAPs, with a subsequent review of child records, in order to demonstrate the SEAU is now correctly implementing (34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100 percent compliance). SEAUs submitted Letters of Assurance along with information on the child records that were reviewed, assuring that the district is now in compliance.

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

Statement from the Response Table	State's Response
<p>8C: Because the state reported less than 100 percent compliance for FFY 2010, the state must report on the status of correction of noncompliance reflected in the data the state reported for this indicator.</p>	<p>MDE made eleven findings of noncompliance from its monitoring data for 8C. The status of the correction of this noncompliance is described in Indicator 9 as well as the sections above: Correction of FFY 2010 Findings of Non-compliance, Actions Taken if Noncompliance Not Corrected, Verification of Correction (either timely or subsequent), and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010.</p>
<p>8C: When reporting the correction of noncompliance, the state must report, in its FFY 2011 APR, that it has verified that each EIS program with non-compliance reflected in the FFY 2010 data the State reported for this indicator, and each EIS program with noncompliance identified in the FFY 2009 APR based on FFY 2007 and 2008 data: (1) is correctly implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100 percent compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) has conducted a transition conference, although late, for any child potentially eligible for Part B whose transition conference was not timely, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the state must describe the specific actions that were taken to verify the correction.</p>	<p>This is reported under the above sections: Verification of Correction (either timely or subsequent) and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010.</p>
<p>8C: If the state does not report 100 percent compliance in the FFY 2011 APR, the state must review its improvement activities and review them, if necessary.</p>	<p>The state has reviewed its Improvement Activities. No new Improvement Activities have been added. MDE will continue to implement the ongoing Improvement Activities, including the new Improvement Activities added in FFY 2010.</p>

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

No changes or revisions have been made to the proposed targets, timelines, or resources for FFY 2012. The state has reviewed its Improvement Activities. No new Improvement Activities have been added. MDE will continue to implement the ongoing Improvement Activities, including the new Improvement Activities added in FFY 2010.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

States are required to use the "Indicator 9 Worksheet" to report data for this indicator (see Attachment A).

Measurable and Rigorous Target

FFY 2010: 100%

Actual Target Data for FFY 2011:

94.2%

Description of the process for selecting EIS programs for monitoring:

Compliance monitoring of EIS programs is done through SEAUs on a five-year cycle. SEAUs were assigned to a group in the cycle based on previous participation in MDE's MNCIMP, the date of their most recent MDE on-site monitoring visit, geographic location, and demographics of the SEAU. In the first year of the monitoring cycle, the SEAU conducts a self-review of records. In the second year, the SEAU must demonstrate correction of any noncompliance identified in the self-review consistent with the requirements set forth in OSEP Memo 09-02. In the third year, MDE conducts an on-site review of the SEAU including a review of child records, facilities, and the SEAU's Total Special Education System (TSES). In the fourth year of the cycle, the SEAU must demonstrate correction of noncompliance identified during the MDE review and implement any corrective action, again consistent with the requirements set forth in OSEP Memo 09-02. The fifth year of the cycle is used to verify results of the implemented corrective action plan. In previous years, noncompliance, and subsequent correction, was tracked only for records reviewed during the MDE on-site visit. With the introduction of the MNCIMP web-based system, record review data for both self-review and MDE on-site visits are collected via the web-based system which allows MDE to track the correction of any identified individual child record noncompliance.

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

Improvement Activities Completed

All improvement activities reported in the FFY 2010 APR are ongoing. During FFY 2011, MDE staff trained both self-review and MDE-review SEAs to use the web-based system for reporting individual child noncompliance data. The training has been streamlined and specific staff members are assigned to the training team responsible as a way to ensure consistency. MDE has also increased the verification component of the training in which MDE staff verifies the results of records reviewed by SEA staff. This process ensures that each SEA staff member fully understands the legal requirements and is accurately citing noncompliance. MDE has posted the training modules on the MDE website in the form of a WebEx to allow greater access to the training materials to all SEAs. MDE is also planning on continuing annual training as a key component to the state’s general oversight responsibilities, and will continue to include ongoing verification of SEA self-review procedures.

Improvement Activities	Timelines	Resources
<p>Train districts on the web-based self-review system. Districts scheduled to conduct a self-review record review during FFY 2008 were trained on the web-based system in December 2008. Additional districts will be trained over the next few years as their district is scheduled to conduct a record review.</p> <p>Update: SEAs were trained according to the cyclical monitoring schedule. SEAs scheduled for self-review or MDE review during FFY 2011 were trained in the late summer and fall of 2011. A designated training team streamlines the process and ensures consistency. Training of SEAs will continue as a critical component of the state’s general oversight responsibility. MDE has received many positive comments regarding the benefits of the training and the ease of use of the web-based system. MDE has also posted the training materials on the MDE website in the form of a WebEx to allow greater access to the materials for all SEAs.</p>	<p>2008-2013</p>	<p>MDE C&A Staff Technology Staff</p>

Improvement Activities	Timelines	Resources
<p>Update state-recommended Due Process forms to ensure all required components are adequately addressed. With changes in both state and federal laws, MDE’s goal is to update the recommended Due Process forms to accurately reflect these changes. The timeline for this activity has been revised to reflect the ongoing nature of this activity. MDE has completed revision of the Due Process forms, but with continued changes to state and federal laws, MDE will revise these forms as necessary.</p> <p>Update: A cross-division team including Compliance and Assistance, Special Education Policy and Early Learning Services updated Minnesota’s recommended IFSP and Prior Written Notice to incorporate regulatory changes.</p>	2008-2013	MDE Staff
<p>Revise web-based monitoring system. MDE has developed a tracking system for 100 percent correction of identified child record noncompliance within the web-based monitoring system. Parent surveys have also been added to the system so that data can be collected. MDE is still working on the development of a TSES Plan checklist for district use in their self-review process.</p> <p>Update: MDE is currently using the web-based tracking system for tracking correction of all identified child record noncompliance. Changes continue to be made to the system to improve function and ease of use. The parent survey data is also collected using the web-based system and MDE is still working on adding a TSES review component to the web-based system.</p>	2008-2013	MDE C&A Staff Technology Staff
<p>Develop additional compliance monitoring data collection tools. Further development of the web-based monitoring system will include MDE compliance monitoring data collection tools for district reviews; such as facility reviews, interviews, and staff surveys.</p> <p>Update: MDE continues to focus its efforts on improving the current functioning of the web-based system and has not moved forward with adding new components. MDE updated the facility review and interview forms used as part of an MDE review in FFY 2010. Further revisions were made for FFY 2011. When revisions are complete, MDE hopes to then move to adding them into the web-based system.</p>	2009-2013	MDE C&A Staff Technology Staff

Improvement Activities	Timelines	Resources
<p>Develop new monitoring report templates. Further development of the web-based monitoring system will create monitoring report templates with the data collected.</p> <p>Update: MDE has used the web-based system for gathering and reporting APR data. As MDE continues to improve this system, MDE will continue to modify and update the reports generated in order to provide the most accurate data for reporting in the APR.</p>	2009-2013	<p>MDE C&A Staff</p> <p>Technology Staff</p>
<p>Update the MNCIMP web-based system to include system for ordering and tracking CAPs. MDE has added components to the MNCIMP web-based system for documenting CAPs, the means by which they are ordered, the specific regulatory reference which must be addressed, the dates when issued and when due, and the approval of the CAP and the evidence of completion. MDE has implemented the same automatic email notification into the CAP tracking system that facilitates timely communication between MDE and the SEAUs in the Compliance Tracking System. MDE is continuing to modify and update the system to make it more user friendly and to ensure that MDE is getting the information needed in order to be able to accurately track when CAPs are ordered and completed to ensure that all noncompliance is corrected as soon as possible, but in no case more than one year from the identification.</p> <p>Update: The CAP component of the MNCIMP web-based system is functioning and being used to track CAPs. Weekly updates are provided to staff to ensure timeliness of correction. A few changes have been made to the functioning of the system and MDE will continue to modify the system as needed to improve functionality.</p>	2009-2013	<p>MDE C&A Staff</p> <p>Technology Staff</p>

Improvement Activities	Timelines	Resources
<p>Train SEAUs on the new requirements for CAPs and how the CAPs will be ordered and tracked through the MNCIMP web-based system. As part of the MDE trainings for those SEAUs in either the MDE review or self-review year of the monitoring cycle, MDE has added information on when and how CAPs will be ordered, the expectations of the CAPs and approval process for the CAP, both the plan itself and the evidence of completion.</p> <p>Update: As part of the FFY 2011 training cycles, SEAUs were provided training on the development of CAPs. A CAP Development Guide was also created to serve as a quick reference for SEAUs when developing their CAPs. MDE will continue to train SEAUs on the CAP requirements.</p>	2010-2013	MDE C&A Staff

Explanation of Progress or Slippage

Minnesota reports progress on Indicator 9 from the FFY 2010 rate of 99 percent to an FFY 2011 rate of 94.2 percent, a decrease of 4.8 percent. The state has not met the FFY 2011 target of 100 percent for Indicator 9.

In FFY 2011, over 1100 citations of individual child record noncompliance were identified. Ninety-nine percent of those citations were corrected within one year. Only seven finding in six SEAUs were not corrected within the one year. Five of those six SEAUs were in their self-review year of the monitoring cycle, meaning this was the first time in which they have gone through the process of submitting evidence of correction and resubmitting documentation if initial evidence was not accepted. Of the uncorrected findings, one was related to fiscal monitoring and one was for an SEAU that did not have a comprehensive TSES manual. The SEAU did not complete the revision of their TSES manual within the one year, but has subsequently demonstrated compliance. The majority of the findings of noncompliance not corrected within one year were not the individual child record findings, but rather the findings related to subsequent CAPs to ensure the SEAUs is correctly implementing the specific regulatory requirements based on a review of updated data. So while most SEAUs were able to correct the individual child record noncompliance, they had greater difficulty demonstrating compliance systemically within the one year. During this correction period, MDE was also introducing SEAUs to the new Part C regulations that would go into effect July 1, 2012. It is believed that this may have resulted in some delay in submission as well as confusion within the SEAUs on how to appropriately demonstrate compliance.

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

1. Number of findings of noncompliance the state made during FFY 2010 (the period from July 1, 2010, through June 30, 2011) (Sum of Column a on the Indicator C 9 Worksheet): 428

2. Number of findings the state verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet): 403
3. Number of findings not verified as corrected within one year [(1) minus (2)]: 25

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

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above): 25
5. Number of FFY 2010 findings the state has verified as corrected beyond the one-year timeline ("subsequent correction"): 25
6. Number of FFY 2010 findings not yet verified as corrected [(4) minus (5)]: 0

Action Taken if Noncompliance is Not Corrected

All findings of noncompliance have been corrected.

Verification of Correction of FFY 2010 findings (either timely or subsequent) for states that reported less than 100 percent compliance for FFY 2010 for indicator:

OSEP Memo 09-02 requires the state to verify that each SEAU with noncompliance reflected in the FFY 2010 data the state reported for this indicator: (1) is correctly implementing the specific regulatory requirements, (i.e., achieved 100 percent compliance) based on updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the SEAU. MDE's review of the data for Indicator 9 showed that all individual child records found in noncompliance have subsequently been revised with correction submitted to and approved by MDE. SEAUs are required to submit corrected documentation and resubmit until it is approved by MDE. If the child is no longer within the jurisdiction of the SEAU, the SEAU must submit to MDE the reason (moved, for example) and the date of the occurrence to release the SEAU from further demonstration of correction for that specific child. Based on a review of the data, MDE verified all of the records with identified noncompliance had been corrected, unless the child is no longer within the jurisdiction of the SEAU, consistent with OSEP Memo 09-02. Seven of the twenty-five findings (28 percent) not corrected in one year were from individual child record review. All of the individual child records have subsequently been corrected with documentation submitted to and approved by MDE.

In addition to requiring the correction of the individual child record noncompliance for all records, in order to verify that SEAUs are now correctly implementing the specific regulatory requirements (i.e., achieved 100 percent compliance), MDE required SEAUs to complete CAPs to address the systemic noncompliance. MDE has reviewed additional data from subsequent child record reviews conducted as part of an on-site review by MDE or by the SEAU as part of their CAP. Over 1200 additional records have been subsequently reviewed to verify that the SEAUs are now correctly implementing the specific regulatory requirements. Sixteen of the twenty-five findings (64%) not corrected in one year were from CAPs related to record review standards. The remaining two findings (8 percent) were from CAPs related to fiscal monitoring

findings or the SEAU's TSES manual. Evidence of completion was required for demonstration of correction, although that evidence did not involve a review of child records.

All CAPs have subsequently been completed.

Describe the specific actions that the state took to verify the correction in FFY 2011 of findings of noncompliance identified in FFY 2010:

As described in the above section, all noncompliance identified is tracked through the MNCIMP web-based data system which includes a compliance tracking system. All SEAUs with individual child record noncompliance submitted documentation of the correction of the noncompliance to MDE. Staff at MDE reviewed the documentation submitted and either accepted or rejected the correction. If documentation is rejected, the SEAU needed to resubmit documentation until correction had been accepted by MDE. MDE has reviewed all correction documentation and determined that all individual child record noncompliance identified has been corrected unless the child is no longer within the jurisdiction of the SEAU, consistent with OSEP Memo 09-02.

In addition, SEAUs were required to develop CAPs, with a subsequent review of child records, if appropriate, in order to demonstrate the SEAU is now correctly implementing the specific regulatory requirements. SEAUs submitted Letters of Assurance along with information on the child records that were reviewed, assuring that the district is now in compliance. For findings not related to individual child record review, such as the TSES or fiscal findings, SEAUs were not required to review child records but needed to bring their systems into compliance and provide MDE with evidence of correction and a Letter of Assurance indicating the SEAU is now in 100 percent compliance.

Statement from the Response Table	State's Response
The State must review its improvement activities and revise them, if necessary.	The state has reviewed its improvement activities. No activities have been added. MDE will continue to implement the ongoing improvement activities described above, including those added in FFY 2010.
In responding to Indicators 1, 7, and 8C in the FFY 2011 APR, the state must report on correction of the noncompliance described in this table under those indicators.	This information, taken from the Indicator 9 Worksheet, has been reported under Indicators 1, 7, and 8C.

Statement from the Response Table	State's Response
<p>In reporting on correction on noncompliance in the FFY 2011 APR, the state must report that it verified that each EIS program with noncompliance identified in FFY 2010: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100 percent compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a state data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the state must describe the specific actions that were taken to verify the correction.</p>	<p>This is reported under the above sections: Verification of Correction for findings of noncompliance reported in the FFY 2010 APR (either timely or subsequent) and Describe the specific actions that the state took to verify the correction of findings of noncompliance identified in FFY 2010 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken).</p>
<p>In reporting on Indicator 9 in the FFY 2009 APR, the State must use the Indicator 9 Worksheet.</p>	<p>Indicator 9 Worksheet is included.</p>
<p>The State must review its improvement activities and revise them, if necessary.</p>	<p>The State has reviewed its improvement activities. No new improvement activities have been added. MDE will continue to implement the ongoing activities described above, including those added in FFY 2010.</p>

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

No changes or revisions have been made to the proposed targets, timelines, or resources for FFY 2012. A review was conducted of improvement activities for Indicator 9 and no new improvement activities were added. MDE will continue to implement the ongoing improvement activities described above, including those added in FFY 2010.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Measureable and Rigorous Target

FFY 2010: No target has been set since there were no Part C hearing requests in FFYs 2004 – 2010.

Actual Target Data for FFY 2011:

There were no Part C hearing requests during the reporting period, therefore there were no resolution sessions. Because there have been no Part C hearing requests during FFYs 2004 – 2011, Minnesota has not yet established a baseline for this indicator.

Table 12.1: (Excerpted from 618 data table C-4)

Section 3	Number
(3) Total number of due process complaints filed (for all states)	0
(3.1) Resolution meetings (applicable ONLY for states using Part B due process hearing procedures)	-9
(a) Written settlement agreements reached through resolution meetings	-9

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

Minnesota reports neither progress nor slippage on this indicator.

The improvement activities within the SPP are ongoing and included within the chart shown below.

Table 12.2: Ongoing Improvement Activities

Activities	Timelines	Resources
Due process hearing coordinator maintains data on hearings and related matters, including resolution sessions and their outcomes.	2005-2013	MDE Staff
Develop and distribute handout for parents on due process hearing process, including resolution sessions; translate handout into Hmong, Somali, and Spanish languages.	2006-2012	MDE Staff and PACER Staff

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Measureable and Rigorous Target

FFY 2011: 87%

Actual Target Data for FFY 2011:

[(0 + 0) / 0] x 100

Section B: Mediation Requests	Number
(2) Total number of mediation requests received	0
(2.1) Mediations held	0
(a) Mediations held related to due process complaints	0
(i) Mediation agreements related to due process complaints	0
(b) Mediations held not related to due process complaints	0
(i) Mediation agreements not related to due process complaints	0
(2.2) Mediations pending	0
(2.3) Mediations not held	0

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

Because no mediation requests were received during the reporting year, Minnesota reports neither progress nor slippage.

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

No revisions to the targets are needed at this time. Additionally, no new activities are planned for this time.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement: State reported data, including 618 data, State Performance Plan, and Annual Performance Reports, are:

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

States are required to use the "Indicator 14 Data Rubric" for reporting data for this indicator (see Attachment B).

Measurable and Rigorous Targets

FFY 2011: 14a: 100%

14b: 100%

Actual Target Data for FFY 2011

MDE submitted data and reports that were both timely and accurate including 618 data, the Part C Annual Performance Report and the updated State Performance Plan. Attachment B details this performance resulting calculation demonstrating performance of 100 percent.

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

MDE takes pride in the timely submission of accurate data. Multiple systems within the agency contribute to submission of 618 and APR data. Table 14.1 below describes activities that are ongoing in our state that contribute to data quality.

Table 14.1: Ongoing Activities

Activities	Timelines	Resources
Written guidance materials for accurate reporting of infants, toddlers and young children with disabilities within the MARSS system will be kept current with respect to data elements and actively disseminated to LEAs.	2006-2013	MDE Staff
Continually improve local and statewide edits within MDE's MARSS program to eliminate those logic errors that can be electronically detected at the point of data submission.	2006-2013	MDE Staff

Minnesota: FFY 2011

Activities	Timelines	Resources
Training Provided to LEAs responsible for accurate reporting through MARSS. That training will take multiple formats including face-to-face, interactive television and web-based tutorials. When possible, local MARSS reporters will be co-trained with their ECSE colleagues to enhance district-level communication necessary for accurate reporting.	2006-2013	MDE Staff
Strive to motivate local staff to invest in the accuracy of the data by publicly reporting local status on key performance indicators.	2006-2013	MDE Staff

Attachment A: INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 through 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 through 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	20	20	19
	Dispute Resolution: Complaints, Hearings	0	0	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Minnesota: FFY 2011

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 through 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 through 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0	0	0
5. Percent of infants and toddlers birth to 1 with IFSPs 6. Percent of infants and toddlers birth to 3 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	37	48	38
	Dispute Resolution: Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	30	52	47
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	21	21	21
A. IFSPs with transition steps and services;	Dispute Resolution: Complaints, Hearings	0	0	0

Minnesota: FFY 2011

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 through 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 through 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including: B. Notification to LEA, if child potentially eligible for Part B; and	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including: C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Due Process	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	40	116	111
	Dispute Resolution: Complaints, Hearings	1	1	1

Minnesota: FFY 2011

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 through 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 through 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
OTHER AREAS OF NONCOMPLIANCE: Evaluation	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	21	26	26
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: IFSP	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	38	72	70
	Dispute Resolution: Complaints, Hearings	1	2	2
OTHER AREAS OF NONCOMPLIANCE: Fiscal	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	15	58	57
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: TSES	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	9	12	11

Minnesota: FFY 2011

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 through 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 through 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0	0	0
Sum the numbers down Column a and Column b			428	403

Percent of noncompliance corrected within one year of identification = 94.2%

(Column (b) sum divided by column (a) sum) times 100

Attachment B: Indicator 14 Data Rubric

FFY 2011 APR Minnesota

Indicator 14 - SPP/APR Data			
APR Indicator	Valid and reliable	Correct calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8A	1	1	2
8B	1	1	2
8C	1	1	2
9	1	1	2
12	1	1	2
13	1	1	2
		Subtotal	26
APR Score Calculation	Timely Submission Points -- If the FFY 2011 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total – (Sum of subtotal and Timely Submission Points) =		31

618 Data – Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Date Note Requests	Total
Table 1 – Child Count Due Date: 2/1/12	1	1	1	1	4
Table 2 – Program Settings Due Date: 2/1/12	1	1	1	1	4
Table 3 – Exiting Due Date: 11/7/12	1	1	1	N/A	3
Table 4 – Dispute Resolution Due Date: 11/7/12	1	1	1	N/A	3
				Subtotal	14
618 Score Calculation			Grand Total (subtotal x 2.2)		30.8

Indicator #14 Calculation	
A. APR Grand Total	31.00
B. 618 Grand Total	30.80
C. APR Grand Total (A) + 618 Grand Total (B) =	61.80
Total N/A in APR	0.00
Total N/A in 618	0.00
Base	61.80
D. Subtotal (C divided by Base*) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

* Note any cell marked as N/A will decrease the denominator by 1 for APR and 2.2 for 618