

**STATE OF CALIFORNIA**  
**ANNUAL PERFORMANCE REPORT**  
**FOR FEDERAL FISCAL YEAR 2011**



**PART C OF THE FEDERAL**  
**INDIVIDUALS WITH DISABILITIES EDUCATION ACT**

**Revised May 17, 2013**

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## Acronyms and Definitions

Acronym	Definition
ALJ	Administrative Law Judge
APR	Annual Performance Report
ARCA	Association of Regional Center Agencies
CAPTA	Child Abuse Prevention and Treatment Act
CCS	California Children's Services
CDE	California Department of Education
CDSS	California Department of Social Services
CPS	Child Protective Services
CSPD	Comprehensive System of Personnel Development
DDS	Department of Developmental Services
EIS	Early Intervention Services
ESR	Early Start Report electronic data base used for universal reporting by local programs
FRCs	Family Resource Centers
HRIF	High Risk Infant Follow-Up
IA	Interagency Agreement
LEA	Local Educational Agency/School District
Local Program	Regional Center unless otherwise defined to include school districts (LEA)
NECTAC	National Early Childhood Technical Assistance Center
NICU	Neonatal Intensive Care Unit
OAH	Office of Administrative Hearings
OHRAS	Office of Human Rights and Advocacy Services
OSEP	Office of Special Education Programs
Part C Lead Agency	Department of Developmental Services
PCP	Primary Care Physician
POS	Purchase of Service
RC	Regional Center – Local program unless otherwise defined to include school districts (LEA)
SLI	Solely Low Incidence
SEECAP	Special Education Early Childhood Administrators Project
SEEDS	Supporting Early Education Delivery Systems
SELPA	Special Education Local Plan Area
SLPA	Speech and Language Pathology Assistant
SPP	State Performance Plan
TBL	Trailer Bill Language
WestEd	WestEd Center for Prevention and Early Intervention
WRRC	Western Regional Resource Center

**OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:**

This Annual Performance Report (APR) for federal fiscal year (FFY) 2011 presents data covering the period from July 1, 2011, through June 30, 2012. It provides the Office of Special Education Programs (OSEP) with information on the progress of California's Early Start program in meeting the established targets for each of the compliance and performance indicators listed in its State Performance Plan (SPP).

Information gleaned from a multiplicity of sources was used to structure and develop this APR, including the following:

- Part C SPP/APR Instruction Sheet, including the APR Template and Measurement Table with Instructions (OMB NO: 1820-0578/Expiration Date: 08/31/2014).
- OSEP's December 12, 2012, memorandum (OSEP 13-7) to the states' lead agency directors, Part C Coordinators, Interagency Coordinating Council (ICC) Chairpersons, and state data managers regarding submission of Part C Annual Performance Report and Revisions to the Part C State Performance Plan by February 15, 2015.
- Numerous documents posted on the SPP/APR Calendar website, e.g., worksheets, templates, FAQs, technical assistance documents, root-cause analysis, etc.
- Western Regional Resource Center (WRRRC) webinars and conference calls with information and updates on preparing the FFY 2011 APR.
- E-mail and telephone communication with National Early Childhood Technical Assistance Center (NECTAC), WRRRC, and OSEP's Part C state contact.
- ED Facts Metadata and Process System (EMAPS) Individuals with Disabilities Education Act (IDEA) Part C webinars.

Additionally, the Department of Developmental Services (DDS) partners with California's broad and diverse Interagency Coordinating Council (ICC). Members of the ICC include parents, professionals providing services to infants and toddlers as well as participating State departments including the California Department of Education (CDE), Social Services, Mental Health, Alcohol and Drug Programs, Managed Health Care, Public Health, Health Care Services, and First 5 California. Furthermore, appointed community representatives include parents, educators, legal advocates, social-service agency managers, consultants, and family-support professionals from throughout the State. This partnership facilitates ongoing stakeholder input and participation in strategic planning and priority setting for early intervention services in California.

DDS relied on input received through the ICC and various stakeholder groups in the preparation of this APR. The FFY 2011 APR, showing progress and/or slippage in meeting the State's measurable and rigorous targets, will be posted on the DDS website no later than February 15, 2013. It will be updated with any revisions following the

OSEP clarification period. The current State Performance Plan (SPP) is posted at the following link;

[http://www.dds.ca.gov/EarlyStart/docs/PartCStatePerformancePlan\\_Feb2011.pdf](http://www.dds.ca.gov/EarlyStart/docs/PartCStatePerformancePlan_Feb2011.pdf)

Regional Center (RC) Early Start program managers will receive letters notifying them of the performance of their programs in meeting the State's targets as described in the SPP. This information will also be posted on the DDS website no later than June 15, 2013 (120 days following the submission of this APR as required by 34 Code of Federal Regulations (CFR) §303.702). Again, key stakeholders will be notified of the posting.

This APR also addresses issues raised by OSEP in response to California's FFY 2010 APR submission.

### **Status/Background of the Part C Grant**

California's Early Start program has served hundreds of thousands of infants and toddlers and their families since the program's inception. The Part C grant allocation still funds a relatively small percentage of California's total expenditures for early intervention services. The most recent year for which complete expenditure data are available is State Fiscal Year (SFY) 2010-11, which corresponds with FFY 2010. During that year, California expended approximately \$400 million for early intervention services.

The lack of growth in the Part C grant allocation in combination with significant fiscal challenges faced by the State in recent years has resulted in changes to the program. For example, as reported in the 2010 APR, California revised eligibility criteria to exclude the "at-risk" population previously served through the Early Start program. Beginning July 1, 2011, these children and their families receive Prevention Resource and Referral Services through existing Family Resource Centers. This change in eligibility criteria will be discussed in this APR as it relates to some of the indicators.

In spite of the changes and challenges, California continues to make significant fiscal and programmatic investments in the Early Start program in order to meet the needs of the State's young children with disabilities and their families. DDS welcomes OSEP's support, cooperation, and flexibility as California continues to face fiscal and programmatic challenges and static Part C resources.

As reported in FY 2010, DDS implemented the Early Start Report (ESR), a web-based automated data collection and reporting system at the end of FFY 2010. As of December 31, 2012, data for more than 64,000 children had been entered into this centralized data base, an increase of almost 250 percent over last year. ESR data was used for child outcome reporting this year resulting in an increase of more than 21,000 children reported on. Once planned enhancements are tested and implemented, the ESR will provide the State with a wealth of information to better assess the performance of local programs in providing children with Early Start services and in meeting federal Part C and State program requirements.

Additionally, this year's APR contains a significant increase in data for children with solely low incidence (SLI) disabilities served by CDE. This allows the State to report complete data for all indicators except those regarding transition. The State is working toward the goal of providing the remaining data in the near future.

**Technical Assistance Received**

DDS has accessed technical assistance opportunities made available through OSEP including conference calls, webinars and regular TA calls with California's OSEP representative. Additional technical assistance was received through participation in the Infant-Toddler Coordinators Association meetings and NECTAC webinars. DDS continues to work with nationally recognized consultants on child outcomes, data parameters, monitoring, and compliance requirements through the WestEd contract and with Western Regional Resource Center in preparing the APR.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Early Intervention Services In Natural Environments</b>
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**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)

<b>Measurement:</b>
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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.

FFY	Measurable and Rigorous Target
<b>FFY 2011 (2011-2012)</b>	100 percent of children receive services in a timely manner

**Actual Target Data for FFY 2011 (2011-2012):**

FFY 2011 data indicate that 86.8 percent (131 divided by 151, times 100 equals 86.8) of the infants and toddlers served by DDS with IFSPs received the early intervention services on their IFSPs in a timely manner as identified in FFY 2011 monitoring visits for DDS. This represents slippage from FFY 2010 of 5.4 percent (92.2 minus 86.8 equals 5.4).

DDS currently documents exceptional family circumstances (EFC) and counts these individual records in both the numerator and denominator. EFCs were documented in four of the records. DDS thoroughly reviews the information during the site visits to ensure that EFCs are properly documented in each record and used in circumstances allowed by federal law.

Data for infants and toddlers with SLI disabilities served by CDE indicate that 96.6 percent (84 divided by 87, times 100 equals 96.6) of the infants and toddlers with IFSPs received the early intervention services on their IFSPs in a timely manner.

The combined data from DDS and CDE indicates that 90.3 percent (215 divided by 238, times 100 equals 90.3) of the infants and toddlers with IFSPs received the early intervention services on their IFSPs in a timely manner.

California defines timely services as those services delivered within 45 days from the date parental consent was provided. Data for compliance indicators for infants and toddlers served by RCs was obtained through record reviews during on-site monitoring visits. DDS conducts on-site reviews of a cohort of RC Early Start programs each year as part of a three-year monitoring cycle. DDS conducted five on-site reviews during FFY 2011. The sample of records reviewed is random and based on the population served. CDE data is derived from monitoring for infants and toddlers served with solely low incidence disabilities in FFY 2011.

**Infants and Toddlers with IFSPs who receive Early Intervention Services in a Timely Manner:**

DDS used monitoring data with a total sample size of 151. CDE used monitoring data with a total sample size of 87.

a. Number of infants and toddlers with IFSPs reviewed who receive early intervention services on their IFSPs in a timely manner	DDS	131
	CDE	84
	<b>California</b>	<b>215</b>
b. Total number of infants and toddlers with IFSPs reviewed	DDS	151
	CDE	87
	<b>California</b>	<b>238</b>
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)	<b>DDS</b>	<b>86.8%</b>
	<b>CDE</b>	<b>96.6%</b>
	<b>California</b>	<b>90.3%</b>

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:**

The provision of timely services to every child is a primary goal of the Early Start program. DDS continues to work toward achieving the measurable and rigorous target of 100 percent for this indicator. The slippage of 5.4 percent from FFY 2010 to FFY 2011 may be due to the differences in the cohort of RCs monitored in the two FFYs. The cohort of RCs monitored in FFY 2011 serve remote, rural areas that face provider shortages, geographical, transportation, and staffing challenges. This may result in a delay in the provision of services.

**Improvement activities during FFY 2011:**

Improvement Activities accomplished in FFY 2011 and those to be included in FFY 2012 are as follows:

The number of children reported increased this year due to the inclusion of children with SLI disabilities.

DDS will continue to provide training through statewide training institutes about the importance of providing timely services. (see Attachment A)

**Verification of Correction**

California confirms that the identified EIS were provided, although late for any child whose services did not occur in a timely manner, unless the child is no longer within the jurisdiction of the early intervention system, consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent review of records as soon as possible but in no case later than one year from identification of noncompliance.

**Correction of FFY 2010 Findings of Noncompliance:**

California reported 92.2 percent compliance on Indicator 1 in FFY 2010. Eight findings of noncompliance were issued.

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	<b>8</b>
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)	<b>8</b>
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

**Verification of Correction of FFY 2010 findings:**

DDS completed a verification review of all three RCs with outstanding findings from FFY 2010. All FFY 2010 findings for this indicator were verified as corrected. The following is the result of the verification review at the RCs:

- DDS confirmed that the RC provided services, although late, for any child whose services did not originally occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. This occurred during the original monitoring visit (Prong 1);
- DDS verified that the RCs are correctly implementing the specific regulatory requirements in 34 CFR § 303.344(f)(1). All of the records reviewed demonstrated compliance with this indicator (Prong 2).

**Findings identified through the CDE Quality Assurance Process (QAP)**

CDE identified the remaining five findings. CDE has verified that each LEA with noncompliance identified in FFY 2010 has: (1) verified that each LEA is correctly implementing the specific regulatory requirements for each noncompliant finding in this indicator through evidence of student-level correction. Student-level corrective actions are to be completed within 45 days of reporting the finding to the district, and (2) ensured that a more stringent level of follow-up review and reporting is required of districts that have previously corrected noncompliance related to this indicator. The additional reporting ensures that LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures, and practices including dissemination and staff training; and by reviewing a new sample of student records for each district-level finding. District level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but in no case later than one year.

**Correction of FFY 2009 Findings of Noncompliance:**

California reported 94.9 percent compliance on indicator 1 in FFY 2009.

As stated in the FFY 2010 APR, DDS did not issue findings on the electronic data for this indicator in FFY 2009 due to data inadequacies that were identified that prevented California from issuing findings. Due to these data inadequacies, California changed methodologies for collecting this data in FFY 2010 and issued findings as required.

Although DDS did not issue findings on the electronic data, five findings of noncompliance in FFY 2009 were identified on this indicator through the dispute resolution procedures. Four findings were identified through the complaint process and one finding was identified through a due process hearing. The five findings identified for this indicator in FFY 2009 were verified as corrected within the required timeline as reported in California's FFY 2010 Indicator 9. DDS confirmed that the RCs completed the required actions on all complaints and on the due process hearing. DDS considers these findings cleared.

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

As noted above, the FFY 2011 data for this indicator includes children with SLI disabilities served by CDE.

The FFY 2011 APR also includes the findings identified and verified as corrected in FFY 2009 as reported in FFY 2010, Indicator 9.

**Revisions, with Justification, to Proposed Targets / Improvement Activities Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Early Intervention Services in Natural Environments</b>
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**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)

<b>Measurement:</b>
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Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # infants and toddlers with IFSPs)] times 100.
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<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2011 (2011-2012)</b>	77 percent of infants and toddlers served will receive services in the natural environment.

**Actual Target Data for FFY 2011 (2011-2012):**

California exceeded the measurable and rigorous target for this indicator. FFY 2011 data indicate that 87.3 percent (28,442 divided by 32,575, times 100 equals 87.3 percent) of infants and toddlers received early intervention services in natural environments.

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:**

Target Met.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

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

**Summary Statements for Each of the Three Outcomes (for FFY 2011):**

**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 who entered 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.

**Actual Target Data for FFY 2011:**

FFY2011 (2011-2012)	Measurable and Rigorous Targets for Infants and Toddlers Exiting in FFY 2010 - FFY 2012 and Baseline 2008(Excludes at-risk children)				
Summary Statements	2008 Baseline (Adjusted) <sup>1</sup>	Targets/Actuals for FFY 2011 (% of children)	Targets for FFY 2010 (% of children)	Targets for FFY 2011 (% of children)	Targets for FFY 2012 (% of children)
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>					
1.Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	38.8%	39.8% / 45.4%	39.8%	39.8%	39.8%
2.The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	76.4%	77.0% / 66.0%	77.0%	77.0%	77.0%

<sup>1</sup>“Adjusted” baseline excludes at-risk children who longer qualify for Part C services in California.  
 Part C State Annual Performance Report for FFY 2011 Monitoring Priority - Early Intervention Services in Natural Environments  
 (OMB: 1820-0578 / Expiration Date: 08/31/2014)

<b>Outcome B: Acquisition and use of knowledge and skills (including early language/ communication and early literacy)</b>					
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	42.4%	43.4% / 49.0%	43.4%	43.4%	43.4%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program.	68.0%	69.0% / 51.8%	69.0%	69.0%	69.0%
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>					
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	33.2%	34.0% / 39.4%	34.0%	34.0%	34.0%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program.	71.0%	72.0% / 61.3%	72.0%	72.0%	72.0%

\* Percentages have been rounded.

**Overview of Issue/Description of System or Process:**

The ESR was used beginning June 2011 to measure child progress data as prescribed for Indicator C-3. Implementation began with ESRs entered on each individual child entering and exiting Early Start. This collection of data recorded into the ESR will eventually include all children participating in Early Start and served by the RC system. This APR submission utilizes all child outcomes data which was submitted and meets the criteria for a completed data set. The ESR increases California’s capacity to report child outcomes on thousands of children served in Early Start.

**Data Collection Plan:**

For the purposes of data reporting for this APR, California utilized data entered into the ESR at the local level by each RC in addition to data obtained from CDE for children with SLI disabilities, with the goal of obtaining complete statewide data.

The use of ESR data is a shift from collecting a data sample for children served by RCs. All RCs implemented child outcomes data entry during this year. The definition of a completed data set is based on the inclusion of the following data elements:

- Child’s Birthday
- Child’s Exit Date

- Child's Functional Age on Entry and Exit in the following developmental domains: Cognitive, Fine Motor, Gross Motor, Expressive Communication, Receptive Communication, Social/Emotional, and Self-Help/Adaptive
- Child's Exit Assessment Date must be within six months of the exit date from Early Start
- Child must have received EIS for a minimum of six months

The collection and recording of child outcomes data into the ESR is very similar to procedures used in previous years when hardcopy data was extracted from individual child records. This is the first year that DDS staff has not collected child outcomes data by monitoring in the field. The required fields to be completed are the date of assessment and the functional age of the child on that date as identified in the assessment documentation. Assessment data is obtained from a number of sources available in the child records, including: results from standardized tools administered, parent interviews, and informed clinical opinion. These formulas are programmed into the ESR and have undergone rigorous testing prior to preparing this APR. In addition to recording the functional ages at Entrance and at Exit (between 30 and 36 months of chronological age if exiting at 36 months), the developmental areas of delay, established risk, and diagnosis are also to be entered in the ESR. Child outcomes data entries must be completed in all developmental domains in order for the data set to be included in the Indicator C-3 reporting.

New quality improvement activities have been added to DDS' analysis of the data due to the shift from collecting a data sample, to collecting universal data in this fiscal year. Issues to examine in the data collection are the factors that impact the collection of complete data on all children exiting Early Start include: missing outcomes data from one or more developmental domains; the child is assessed only in the area of service(s) provided; the child/family moves or is unreachable prior to exit assessments being completed; the family refuses exit assessment; child has not had an ESR initiated and completed at the local level; and/or the child did not receive six months of EIS prior to exit. DDS continues to address the importance of complete data with Early Start managers during technical assistance contacts and during training sessions such as the Advanced Practice Institute. Early Start managers have reported that quality assurance measures have already been instituted at their RC to make completed data entry a priority.

Overall, the improved sample size for the FFY 2011 and the inclusion of data for children with SLI disabilities continues to move California's child outcomes data to better represent the total Early Start population. The final sample size of 9,743 records represents 24 percent of the total 40,294 (Total 46,483 minus 6,189 *children not receiving services as identified on the 618 Table 3*) children that exited Early Start during this reporting year and either completed Part C services or exited at three years old. This total data set size was more than six times larger than the data sample used in FFY 2010. The collection of child outcomes data through the ESR is demonstrating California's advancement toward the goal of capturing outcomes data for every child participating in Early Start services.

**Quality Assurance Measures:**

Consistent with OSEP criteria, only children in the program for a minimum of six months were included in the sample for child outcomes. The ESR has electronically built-in parameters for a number of quality assurance measures. The electronic ESR template includes all of the OSEP required data elements for child outcomes and additional elements the State believes are critical for adequate data analysis. These additional elements include diagnostic information in the areas of developmental disabilities, developmental delays, and established risk areas. The child outcomes fields include the recording of functional ages in seven performance categories (physical development including fine and gross motor, social/emotional, expressive and receptive language, cognitive, and self-help adaptive/use of appropriate behaviors to meet their needs). The child outcomes data reports generated by the ESR data is programmed to utilize children's data that have completed functional ages in all domain areas for entry and exit.

Beyond the use of standard evaluation tools specific to each licensed professional, informed clinical judgment was one of several key principles employed for determining functional levels and, therefore, child progress/outcomes. RC and contracted clinicians also used (1) formal assessment techniques and instruments, (2) direct informal observations of the child, (3) review of all pertinent records, and (4) parent/caregiver interview or discussion.

**Definition of Comparable to same-aged peers**

Children were considered comparable to same-aged peers upon entrance into the program if their functional age in a given developmental domain was within 33 percent of their chronological age.

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

As noted, valid and reliable data for FFY 2011 is included in this indicator for children with SLI disabilities served by CDE.

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:****Improvement activities during FFY 2011:**

Data consistency and quality are a part of the continuous improvement process that has been enhanced through professional meetings that include focused discussion on assessment, measurement practices, and the ESR. DDS managers meet with the following specialty groups, as follows:

- Local early intervention managers, both Southern California and Northern California groups
- The RC Clinical Directors' group
- The Association of Regional Center Agencies' Early Intervention Committee

**Table 1: Data for Infants and Toddlers Exiting in FFY 2011 as compared to FFY 2008 baseline (Excludes at-risk children)**

A. Positive social-emotional skills (including social relationships):	Number of children FFY 2011	% of children FFY 2011	% of children FFY 2010	% of children FFY 2008
a. Percent of infants and toddlers who did not improve functioning	609	6.3	6.3	5.8
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2473	25.4	29.0	16.4
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach same age functioning.	231	2.4	2.5	1.3
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2332	23.9	23.3	12.8
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	4098	42.1	39.0	63.6
Total (Due to rounding, percentages will not be exact)	N = 9743	100%	100% N= 1543	100% N= 893

**Table 1 (cont.): Data for Infants and Toddlers Exiting in FFY 2011 as compared to FFY 2008 baseline (Excludes at-risk children)**

B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children FFY 2011	% of children FFY 2011	% of children FFY 2010	% of children FFY 2008
a. Percent of infants and toddlers who did not improve functioning	246	2.5	2.1	1.0
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3873	39.8	47.1	27.2
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach same age functioning.	578	5.9	4.6	3.8
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	3386	34.8	30.8	17.0
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1660	17.0	15.4	50.9
Total (Due to rounding, percentages will not be exact)	N =9743	100%	100% N= 1543	100% N= 893

**Table 1 (cont.): Data for Infants and Toddlers Exiting in FFY 2011 as compared to FFY 2008 baseline (Excludes at-risk children)**

C. Use of appropriate behaviors to meet their needs.	Number of children FFY 2011	% of children FFY 2011	% of children FFY 2010	% of children FFY 2008
a. Percent of infants and toddlers who did not improve functioning	496	5.1	4.9	5.2
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3083	31.6	35.3	22.6
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach same age functioning.	194	2.0	2.3	1.2
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	2133	21.9	21.8	12.7
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	3837	39.4	35.8	58.4
Total (Due to rounding, percentages will not be exact)	N = 9743	100%	100% N= 1543	100% N= 893

**Comments on Table 1:** Table 1. Displays the data for the years FFY 2008, FFY 2010, and FFY 2011 for the three functional areas (Social/Emotional, Knowledge & Skills, Adaptive/Self-Help) distributed across the five improvement categories. The data reflecting the improvement percentages for children across each category show some significant changes from FFY 2008 to FFY 2011. During this period of time, California law instituted changes in Early Start eligibility criteria and data reflects the changes in some of the progress categories when looking at the trends for this period of time. On the Social/ Emotional measures and the Adaptive/Self-Help (Use of appropriate behaviors) developmental areas, the percentage of children who did not improve functioning remained in a similar range at about 5.1 to 6.3 percent. In the developmental area of acquisition and use of knowledge and skills (cognitive and communication) the percentage of children who did not improve functioning has been shown to slightly increase each year. All three Outcome areas had a slight increase in this lowest improvement category as the data quantity increased and the effects of a narrowed eligibility criteria is expressed in the data.

The increased percentage of children below typical age functioning can be attributed to the narrowing of California's eligibility criteria for the early intervention program effective July 28, 2009 and the elimination of the at risk eligibility category in California effective October 1, 2009. The 2011 data shows increasing percentages of children making developmental improvements after participating in Early Start as reflected in progress category (d). This is a significant improvement area in light of the increased quantity of data provided this year.

**Table 2: Data for Infants and Toddlers Exiting in FFY 2011 as compared to FFY 2010**

Summary Statements	% of Children FFY 2010	% of Children FFY 2011	Target 2011
<b>Outcomes A: Positive social-emotional skills (including social relationships)</b>			
1. Of those children who entered or exited the program below age expectations in Outcomes A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $[(c + d) / (a+b+c+d) \times 100]$	42.2	45.4	39.8
2. The percent of children who were functioning within age expectations in Outcomes A by the time they turned 3 years of age or exited the program $[(d + e) / (a+b+c+d+e) \times 100]$	62.3	66.0	77.0
<b>Outcomes B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>			
1. Of those children who entered or exited the program below age expectations in Outcomes B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program. $[(c + d) / (a+b+c+d) \times 100]$	41.8	49	43.4
2. The percent of children who were functioning within age expectations in Outcomes B by the time they turned 3 years of age or exited the program. $[(d + e) / (a+b+c+d+e) \times 100]$	46.1	51.8	69.0

**Table 2 (cont.): Data for Infants and Toddlers Exiting in FFY 2011 as compared to FFY 2010**

<b>Outcomes C: Use of appropriate behaviors to meet their needs</b>			
1. Of those children who entered or exited the program below age expectations in Outcomes C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program. $[(c + d) / (a+b+c+d) \times 100]$	37.4	39.4	34.0
2. The percent of children who were functioning within age expectations in Outcomes C by the time they turned 3 years of age or exited the program. $[(d + e) / (a+b+c+d+e) \times 100]$	57.6	61.3	72.0
* Percentages have been rounded.			

**Comments/Analysis on the Data Table 2:**

Table 2 displays the data from the entire sample for the three functional areas distributed across the Summary Statements. All Summary Statement categories are improved in FFY 2011 compared to the previous year. Table 2 displays progress data for two groups of children.

Summary Statement # 1 in each of the outcomes areas showed an increase of children demonstrating substantial improvements compared to the data from last year. All of the outcome areas for Summary Statement # 1 have exceeded California's measurable and rigorous target for FFY 2011 (5.6%, 5.6% and 5.4% respectively). The outcomes area that showed the most improvement between FFY 2011 and FFY 2010 was the Knowledge and Skills area with a 7.2 percent gain for this year. This improvement may be an indication of the improved quantity of data better representing the total number of children receiving services through Early Start.

Summary Statement # 2 in each of the outcome areas showed an increase this year compared to last year. The increases brought the percentages closer to the target for each outcomes area however the percentages remain below the targets in all three developmental domain areas as well (Social/Emotional: -11%; Knowledge/Skills -17.2%; Behavior/Adaptive - 10.7%). These changes are interpreted as an expression of the changes in the eligibility criteria in FFY 2009. The targets were readjusted during the FFY 2009. Due to the multiple year participation in Part C services for many children in the program, it is possible data variability of this Summary Statement percentages will continue for a few years before stabilizing. Trend data will be more representative of actual child outcomes when the data becomes more stable with universal reporting.

It is encouraging to observe the improvements in the Summary Statements' results with this year's reporting of a larger percentage of the children participating in Part C

services. The analysis for the next few years will be able to test this early observation. It is also expected that the summary results will stabilize when universal data is well established and systematic changes can be analyzed with more reliability since there may be less variability in the data composition and size.

TABLE 3 All Children N = 9743

	Social Emotional Skills		Acquiring and Using Knowledge and Skills		Taking Appropriate Action to Meet Needs	
	Enter # of Children	% of Children	Enter # of Children	% of Children	Enter # of Children	% of Children
a. Percent of infants and toddlers w ho did not improve functioning	609	6.3%	246	2.5%	496	5.1%
b. Percent of infants and toddlers w ho improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2473	25.4%	3873	39.8%	3083	31.6%
c. Percent of infants and toddlers w ho improved functioning to a level nearer to same-aged peers but did not reach	231	2.4%	578	5.9%	194	2.0%
d. Percent of infants and toddlers w ho improved functioning to reach a level compared to same aged peers	2332	23.9%	3386	34.8%	2133	21.9%
e. Percent of infants and toddlers w ho maintained functioning at a level comparable to same-aged peers	4098	42.1%	1660	17.0%	3837	39.4%
<b>TOTAL</b>	9743	100.0%	9743	100.0%	9743	100.0%
<b>SUMMARY STATEMENTS</b>						
1. Of those children w ho entered the program below age expectations in [outcome], the percent that substantially increased their rate of grow th in [outcome] by the time they exited.		45.4%		49.0%		39.4%
2. Percent of children w ho w ere functioning w ithin age expectations in [outcome], by the time they exited.		66.0%		51.8%		61.3%

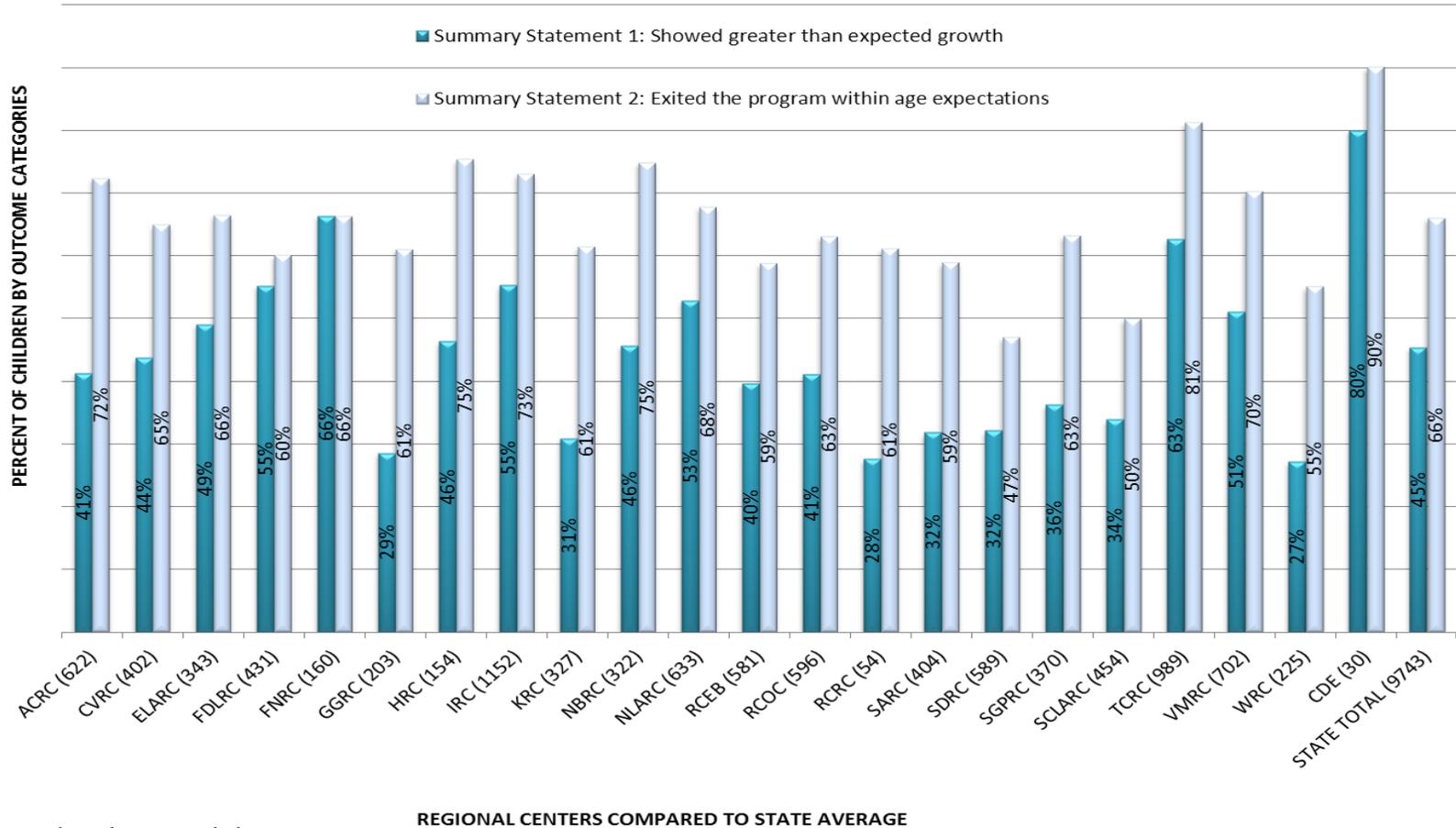
\* Percentages have been rounded.

**PROGRAM-TO-PROGRAM COMPARISONS**

The following three graphs display the program specific data on OSEP-defined child progress categories Summary Statement # 1 and Summary Statement # 2 for the three designated areas: Social/Emotional, Knowledge/Skills, and Behavior/Adaptive.

TABLE 4

2011/2012 CHILD OUTCOME SUMMARIES BY RC - SOCIAL/EMOTIONAL



\* Percentages have been rounded.

**Social/Emotional:**

Summary Statement # 1 and # 2 show a wide local variance of results for this domain. Summary Statement # 1 has a range of 27 percent to 80 percent for all programs. The State average is 45.4 percent which is higher than the target set in the SPP for FFY 2011 at 39.8 percent. Summary Statement # 2 has a range of 47 percent to 90 percent for local programs. The State average is 66 percent which is lower than the target set in the SPP for FFY 2011 at 77.01 percent. Both summary statements in this outcomes area increased this year and the range between local programs has narrowed. Summary Statement # 2 shows a smaller range of variability between regions.

The greatest variance across local programs appears in improvement categories # (e.) (infants and toddlers who maintained functioning at a level comparable to same-aged peers). This variance may be an artifact of the success of some RCs in obtaining parental consent for evaluations for children continuing in RC programs. In previous years data collectors noted, during site visits, a lower percentage of parents consenting to additional assessments when their children are functioning closer to age level. These two factors may contribute to this wide range of results for this year's data. The percentage of incomplete data may account for the low percentage of children showing increases in their rate of growth.

Any profile with incomplete or inaccurate data will not be used in outcomes data. One issue for the child outcomes data during FFY 2010 was identified as incomplete data sets. This continued to be addressed throughout FFY 2011 as well. RCs have been assessing children upon entrance to Early Start, periodically during the time they receive Early Start services, and again upon exit. However, there has been an inconsistent recording of all developmental domains as a functional age.

The shift in responsibility for the collection of outcomes data to the RCs required them to make system changes in order to have reportable child outcomes data on all children meeting the data criteria. The ESR brings an increased awareness and accessibility to the local agencies for the data documenting the outcomes of children in functional age scores for all children participating in Part C services.

**Improvement Activity:**

Discussions between RCs and the lead-agency staff regarding the collection of child outcomes expressed in functional age and recorded in the new universal data collection tool took place early in the fiscal year. As local agencies gained experience with the ESR, more technical and detailed questions were addressed by DDS staff through telephone calls and emails.

During statewide level professional development opportunities, break-out sessions were well attended at the Advanced Practice Institute which featured three sessions on quality data topics and the ESR. The following topics were presented:

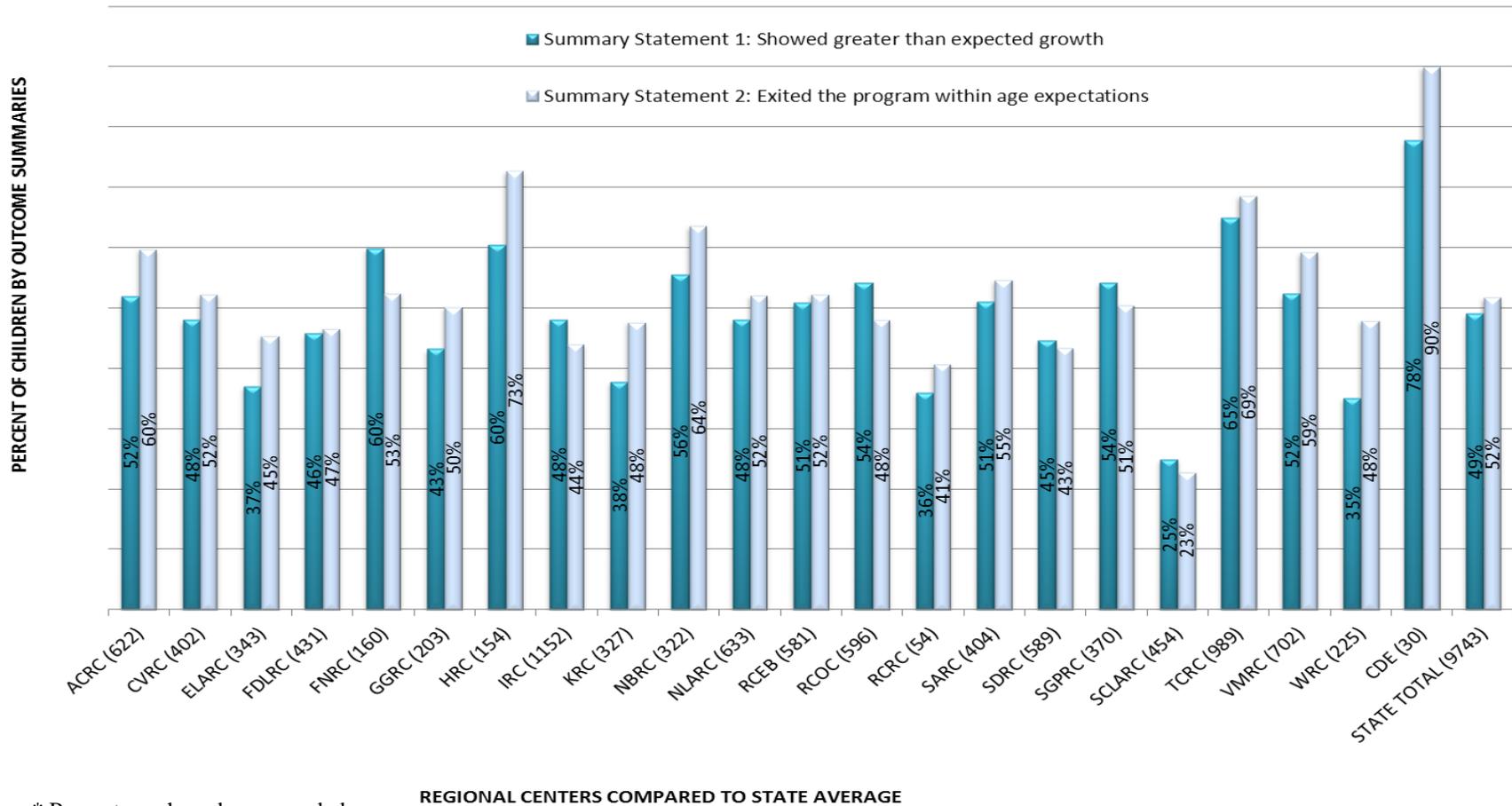
- Accountability for Improved Results
- Ultimate Accountability: Child and Family Outcomes
- Desired Results Development Profile (DRDP) access for Infants and Toddlers (CDE assessment tools)

Local quality assurance measures have also been taking place throughout the year:

- ES Managers check ESR child outcomes entry & exit with chart reviews
- Protocols for Exit Assessments in all domains
- ES managers using ESR as a management tool: features such as tickler report; service coordinator report; and child outcomes report

Training and technical assistance will continue to be planned to improve the documentation of child outcomes.

2011/2012 CHILD OUTCOME SUMMARIES BY RC - KNOWLEDGE & SKILLS



\* Percentages have been rounded.

**Knowledge and use of skills, including cognitive and communication:**

The greatest variance across local programs appears in improvement categories # b (improved in functioning but not sufficient to move nearer to functioning comparable to same age peers) for the Knowledge/Skills domain.

The narrowing of eligibility criteria is interpreted to be an influential factor in the percentages of children that have improved functioning comparable to same age peers. This factor increases the acuity of the Early Start population and although many children receiving Part C services are showing improvement following early intervention, the rate of improvement on a statewide level, has not met the expectations of the SPP projections. It is possible that the SPP projections underestimated the impact of the eligibility criteria change which began in 2009.

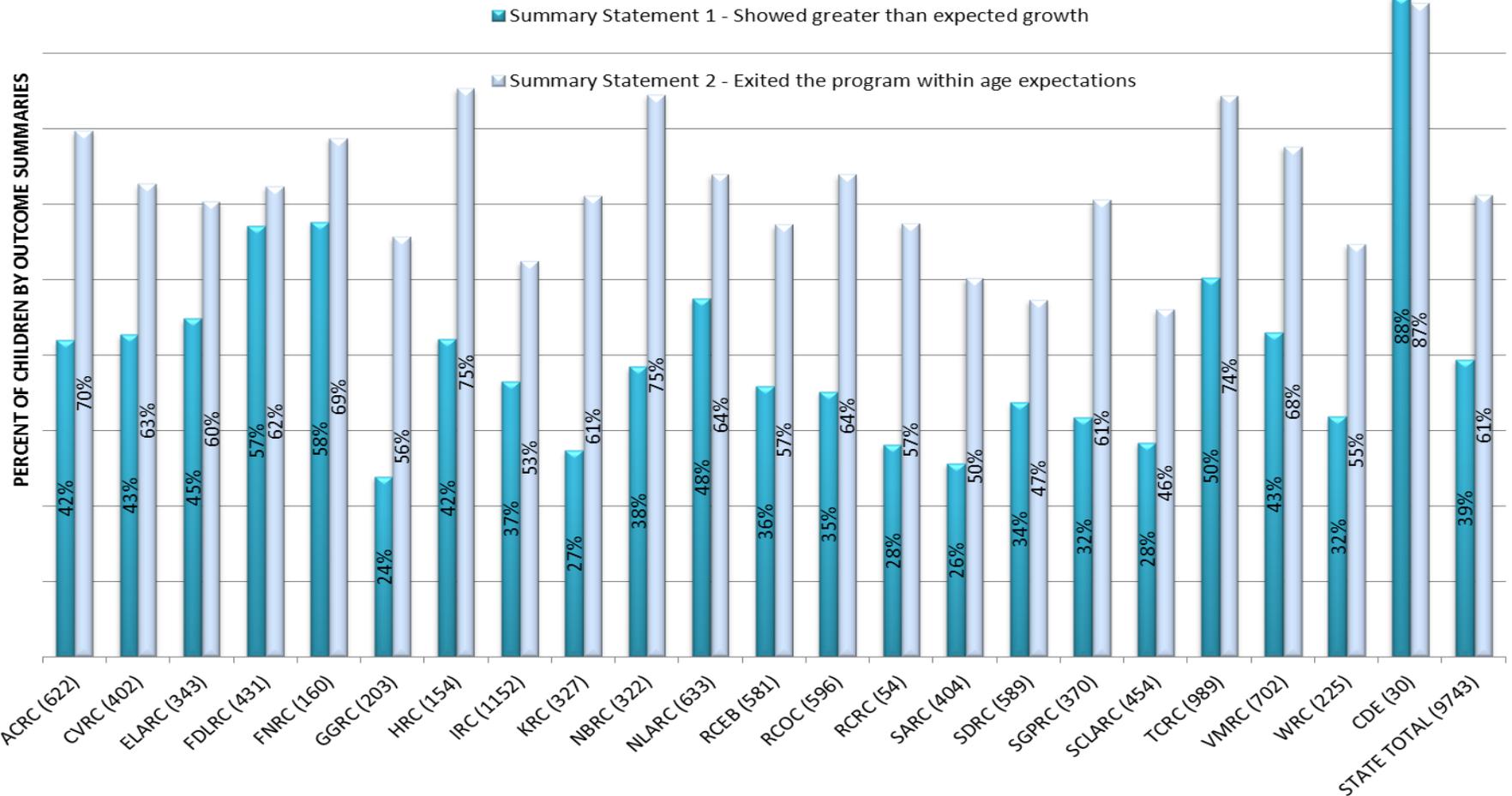
Summary Statement # 1 and # 2 show a wide local variance of results for this domain. Summary Statement # 1 has a range of 25 percent to 78 percent for local programs. The State average is 49.0 percent which exceeded the target set in the SPP for FFY 2011 at 43.0 percent and the outcomes increased as compared to last year's reporting. Summary Statement # 2 has a range of 23 percent to 90 percent for local programs. The State average for Summary Statement # 2 is 51.8 percent which is lower than the target set in the SPP for FFY 2011 at 69.01percent; however the Summary Statement # 2 state average is increased by 5.7 percent as compared to last year's data. Both summary statements in this outcomes area increased this year and the range between local programs has narrowed.

By identifying data outliers, DDS will be able to address problem solving analysis with RCs on an individual basis and provide technical assistance for specific improvement activities.

**Improvement Activity:**

By reporting on a higher percentage of participating children, the percentages of success as summarized in Summary Statements # 1 and # 2 are projected to better represent the child outcomes of the local participating populations. By continuing data improvement in the areas of incomplete data and data quality, Early Start will be able to more accurately characterize the improvements in the measured developmental levels for children after participating in EIS.

**2011/2012 CHILD OUTCOME SUMMARIES BY RC - SELF HELP BEHAVIOR**



**REGIONAL AVERAGES COMPARE TO STATE AVERAGE**

\* Percentages have been rounded.

Part C State Annual Performance Report for FFY 2011  
 (OMB: 1820-0578 / Expiration Date: 08/31/2014)

Monitoring Priority - Early Intervention Services in  
 Natural Environments

**Self-help/Adaptive:**

The greatest variance across local programs appears in improvement categories # e (infants and toddlers who maintained functioning at a level comparable to same age peers) for the Self-help/Adaptive domain. The variance when comparing local programs may be contributive to the success of RCs in obtaining parental consent for evaluations for children continuing in RC programs as well as the number of parents who are consenting to additional assessments when their children are functioning closer to age level.

Summary Statements # 1 and # 2 have a wide variance of results in this domain. Summary Statement # 1 has a range of 24 percent to 88 percent for all programs. The State's average is 39.4 percent which exceeded the target set in the SPP for FFY 2011 at 34.0 percent and is increased from the percentage reported last year. Summary Statement # 2 has a range of 46 percent to 87 percent for local programs. The State's average is 61.3 percent which is approaching the target set in the SPP for FFY 2011 at 72.0 percent and is 3.7 percent higher than last year's report. It is expected that a larger number of completed child outcome data sets in local areas will show improvement in future reporting.

**Improvement Activity:**

DDS plans to review the data showing relatively low improvement numbers with each RC to identify possible systematic factors and proceed accordingly. There are many contributing factors that may influence low percentages in one region as compared to another. These factors may include but are not limited to: missing or incomplete data, variability in assessment tools, services available, and procedures for recording data.

Improving child outcomes data has required systematic changes at the state and local levels. The State is moving closer to meet all SPP targets as the universal data system moved into the implementation phase during this fiscal year.

**Revisions, with justification, to Proposed Targets, Improvement Activities / Timelines / Resources for FFY 2011 (2011-2012):**

California does not propose any revisions to this indicator.

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

**Monitoring Priority: Early Intervention Services In Natural Environments**

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

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

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

**Measurement:**

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

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

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
<b>2011</b>  <b>(2011-2012)</b>	4-A. 50.5 percent of families participating in Part C report that early intervention services have helped the family <i>'know their rights.'</i>  4-B. 44.5 percent of families participating in Part C report that early intervention services have helped the family <i>'effectively communicate their children's needs.'</i>  4-C. 73.7 percent of families participating in Part C report that early intervention services have helped the family <i>'help their children develop and learn.'</i>

**Actual Target Data for FFY 2011:**

The FFY 2011 data indicate that California once again exceeded the measurable and rigorous targets for this indicator. A comparison of FFY 2011 data with FFY 2010 shows gains in B and C and slight slippage in A (A=83.7 in 2010 and 82 in 2011; B= 87.5 in 2010 and 89 in 2011; and, C=91.2 in 2010 and 92 in 2011). Additionally, even though the response rate was lower for FFY 2011 the mean scores for each of the questions

indicated 5 (Good) and higher, indicating that families felt better about Early Start services than the previous reporting year.

DDS employed an adapted version of the *Family Outcomes Survey* (FOS Revised Part C, 2010)<sup>2</sup> to gather and analyze Indicator 4 data for FFY 2011. The FOS focused on three specific questions as a self-report survey. The questions were designed to be easy to understand and are aligned with Indicator 4 sub-indicators, A, B, and C. They were:

- (1) *To what extent has early intervention helped your family know and understand your rights?*
- (2) *To what extent has early intervention helped your family effectively communicate your child's needs? and,*
- (3) *To what extent has early intervention helped your family be able to help your child develop and learn?*

Three questions were developed on a 7-point Likert scale (1= Poor to 7=Excellent). Families were asked to read each question and circle the number that *best describes your family right now*. Raspa, Hebbler, and Bailey (2009)<sup>3</sup> recommend using a cutoff point of 5 (Good) and calculating the percentage of responses that are 5 (good) and higher for OSEP data reporting purposes. Analysis of family survey response data indicate that California met its 2011 Indicator 4 target for each of the three sub-indicators. (see Table 1)

TABLE 1. INDICATOR 4			
Percent of families participating in part C who report that early intervention services have helped the family:	2011 TARGETS	SURVEY RESULTS	Frequency
A. Know their rights.	50.5%	82%	1672
B. Effectively communicate their children's needs.	44.5%	89%	1672
C. Help their children develop and learn.	73.5%	92%	1672

### Families of Children Served by Regional Centers

DDS drew a random sample of families of children served by RCs from the total population (approximately 29,000 families) of California's Early Start families whose children were currently receiving services from local programs and had been in the program for at least six months at a specific point in time (September 2012). These selection criteria yielded a sample of approximately 14,626 families. DDS used systematic sampling procedures to stratify a random sample of 6,000 families proportionally drawn from the sample across five ethnicity groups (Asian, African American, Hispanic, Native American, and White) and Declined to State. The

<sup>2</sup> Bailey, D.B., Hebbler, K., & Bruder, M.B. (2006). *Family Outcomes Survey*. Retrieved October 18, 2009 from, <http://www.fpg.unc.edu/~eco/pages/tools.cfm#SurveyVersions..>

<sup>3</sup> Raspa, M., Hebbler, K., & Bailey, D.B., (2009). *A guide to analyzing the data from the Family Outcomes Survey*. Menlo Park, CA: Early Childhood Outcomes Center.

systematic sampling procedure was calculated using a confidence level of 90 percent and an estimated response rate of 20.3 percent to achieve significance.

DDS employed Dillman's Tailored Design Method (2009)<sup>4</sup> for the most recent survey distribution and collection. Six thousand packets were mailed to families via the USPS in September 2012 utilizing the same survey and methods as were used in FY 2010. All packets included cover letters and surveys in English and Spanish, and a self-addressed return envelope. Follow-up postcard reminders were sent six days after the initial survey mailing. One thousand six hundred and seventy two (1,672) valid surveys were returned, yielding an overall response rate of 27.8 percent. No surveys were returned that had missing cases. DDS noted that 351 addresses from the stratified sample were not recognized as valid addresses. Specifically, the majority (80 percent) of addresses was categorized as *not deliverable as addressed* and *attempted not known* and approximately 20 were labeled *incomplete address*. Descriptive statistics (means, frequencies, percentages and standard deviations) were employed to analyze the responses to the three Indicator 4 survey items.

When delineated by ethnicity, results indicated that the Asian, Hispanic, White, and 'Declined to State' subgroups achieved the response rates needed to indicate a representative sample (see Table 2). However, the African American and Native American subgroups did not achieve the response rates needed to adequately represent these families in our State.

Ethnicity	Sample	Frequency	Return Needed	Response Rate	Mean		
					Q1	Q2	Q3
Asian	1,131	391	19.4%	34.5%	5.66	5.88	6.08
African American	759	151	26.4%	19.8%	5.69	6.00	6.13
Declined to State	1,324	369	18.7%	27.8%	5.46	5.86	6.15
Hispanic	1,400	354	18.6%	25.2%	5.76	5.99	6.25
Native American	45	8	86.7%	17.7%	5.50	4.88	5.75
White	1,341	399	18.6%	29.7%	5.43	5.83	6.12
<b>Total</b>	<b>6,000</b>	<b>1,672</b>		<b>27.8%</b>			

<sup>4</sup> Dillman, D., Smythe, J., & Christian, M. (2009). *Internet, Mail and Mixed-Mode Surveys: The Tailored Design Method*. New York: John Wiley & Sons, Inc.

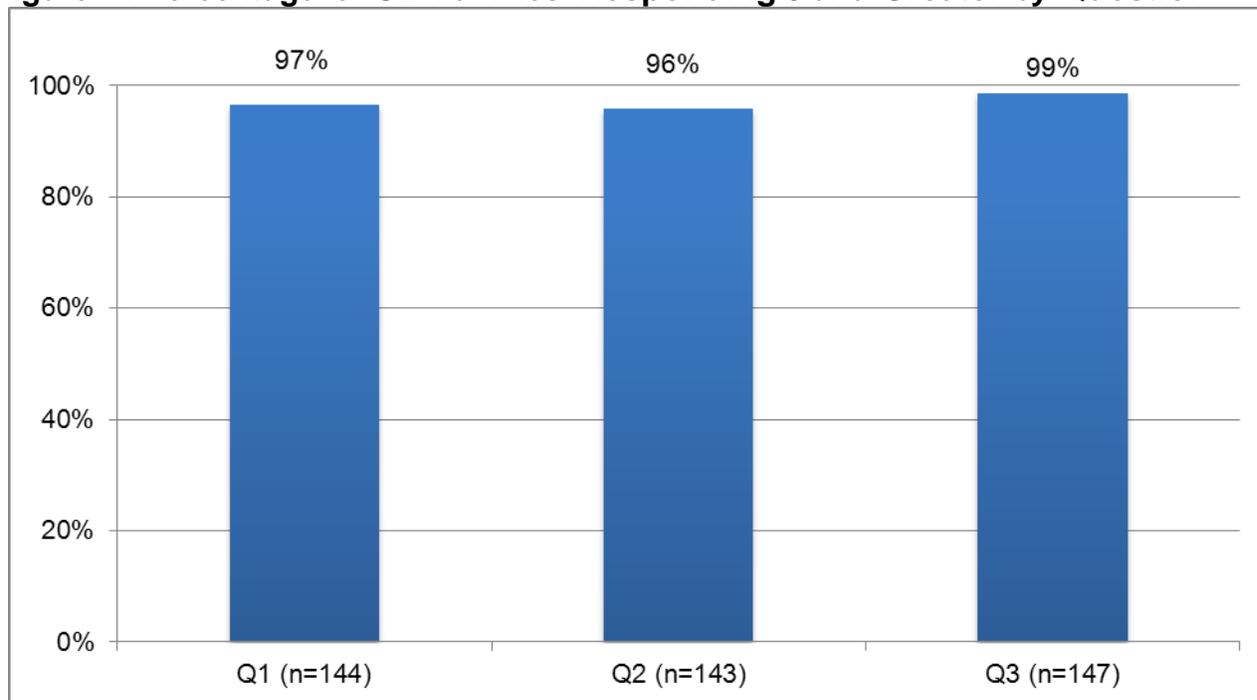
**Families of Children Diagnosed with SLI Disabilities**

To measure the responses of families who have children diagnosed with SLI disabilities (a separate subset of families who are served and monitored by CDE), served by LEAs only, identical cover letters and surveys were provided in an online format to a sampling of families (N=1,600) by the CDE. One hundred and forty-nine (149) families responded to the survey yielding a response rate of 9 percent. Mean ratings demonstrated by Early Start families indicated that overall, families of children with low incidence disabilities rated the questions in between *Good* and *Excellent* for all three survey items. Specifically, they reported:

- (a) Question 1 (M=6.63);
- (b) Question 2 (M=6.63); and
- (c) Question 3 (M=6.78).

Figure 1 displays the percentage of families of children with low incidence disabilities responding 5 and higher to the three items. The results indicated that there were large percentages (97%-99%) indicating families felt *Good* to *Excellent* about each of the questions.

**Figure 1: Percentage of SLI Families Responding 5 and Greater by Question**



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

Target measures met.

**Revisions, with justification, to Proposed Targets, Improvement Activities / Timelines / Resources for FFY 2011 (2011-2012):**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Effective General Supervision Part C / Child Find</b>
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**Indicator 5:** Percent of infants and toddlers birth to one with IFSPs compared to national data.

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

<b>Measurement:</b>
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<p><b>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.</b></p>
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<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2011 (2011-2012)</b>	.96 percent of infants and toddlers birth to one in California will have IFSPs.

**Actual Target Data for FFY 2011 (2011-2012):**

FFY 2011 data indicate that .72 percent (3,660 divided by 506,265 times 100) of infants, ages birth to 1, were served. This figure is .24 percent below the State's rigorous target percentage and .30 percent below the national average of 1.02 percent. Data is derived from Office of Special Education Table C1-9 entitled *Percent of Infants and Toddlers Receiving EIS under Individuals with Disabilities Education Act (IDEA), Part C, by Age and State: Fall 2011*.

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:**

Due to changes in eligibility requirements in FFY 2009, children who were deemed at-risk are no longer included in the percentage of children served, therefore the State did not meet the measurable and rigorous target of .96 percent since the target was set based on the broader eligibility criteria.

**Improvement Activities**

The State has a comprehensive and statewide public awareness, education, and Child-Find system that operates collectively through its RCs, LEAs, FRCs and other Early Start

partners. These activities are mandated by state law and/or required by contract. Efforts are supported and augmented, as follows:

**Materials Distribution:**

As part of the State's ongoing Child Find efforts regarding education and resource development/dissemination, the *Reasons for Concern* brochure is located on DDS' Early Start website at [www.dds.ca.gov/EarlyStart](http://www.dds.ca.gov/EarlyStart). Hard copies of the brochure can be ordered in five languages. The brochure is also posted on the CDE's website, DDS' partner for Part C in California, at <http://www.cde.ca.gov/sp/se/fp/concerns.asp>. The *Reasons for Concern* concept offers families and providers a comparison of development that may warrant further evaluation. The total number of hard copies distributed during FFY 2011 was 28,972. Outreach material were updated with the new eligibility criteria and distributed in the spring of 2012 (See Attachment A)

**Child Abuse Prevention and Treatment Act (CAPTA):**

DDS continues its collaboration with the California Department of Social Services (CDSS) on pursuing outreach and training for those serving infants and toddlers and their families.

In the FFY 2011 reporting period, there were approximately 27,179 substantiated cases of abuse and neglect in the child welfare system. The number of children, aged birth to three years, with an open welfare case was 14,160 children. This is *point in time* data, and includes those children in out of home placements including kinship care. (see Attachment A)

**California Home Visiting Program (CHVP):**

The Patient Protection and Affordable Care Act of 2010, the health care reform package signed into law by President Obama on March 23, 2010, provides funding for a Home Visiting Grant Program for States.

CHVP has identified DDS as a resource which will be included in the referral network that home visiting personnel will utilize with participating families. This collaboration will also be important for Early Start's Child Find efforts. CHVP staff will be performing developmental screenings as a regular part of the family home visits and referring children to RCs who need additional evaluation for developmental concerns. (see Attachment A)

**California Statewide Screening Collaborative (CSSC)**

Since 2007, DDS and CDE have participated on the CSSC. The purpose of the CSSC is to coordinate the efforts of the various state agencies, organizations, and special projects striving to enhance California's capacity to promote and deliver effective and well-coordinated health, developmental, and early mental health screenings for young children, aged birth to five years.

**Newborn Hearing Screening Program (NHSP):**

The purpose of NHSP is to require that every approved California Children's Services (CCS) hospital offer hearing screenings to newborns. Newborn hearing data is currently available from the California Department of Health Care Services on a calendar year basis, and the most current data comes from numbers gleaned in calendar Year 2010. NHSP screened 505,847 infants (99 percent) of the total 510,981 births in California during 2010. Of those infants screened 925 infants were identified with a hearing loss which represents 1.8/1,000 infants screened. All of these infants were referred to Early Start. Data collected from NHSP indicate that 809 infants (87 percent) who were referred to Early Start actually enrolled.

By the end of 2010, there were 252 hospitals certified and participating in the NHSP. There were ten hospitals that received initial NHSP certification during the Fiscal Year 2010. Early Start staff members participate in the NHSP Quality Improvement Collaborative Team which meets biweekly. Further program information can be found at: [www.dhcs.ca.gov/services/nhsp](http://www.dhcs.ca.gov/services/nhsp).

**Newborn Screening Program (NBS)**

The purpose of the NBS Program is to screen for the most common treatable diseases, as recommended by the American College of Medical Genetics and collaborative partner, the March of Dimes. Newborns with positive screens are referred to a CCS-approved Metabolic Center which works with the primary care provider to arrange for confirmatory testing. DDS continues to work with CCS and the Genetic Disease Branch on screening, referral protocols, and policies and will be tracking this program; however, the NBS program does not track referral data. In FFY 2011, the Secretary's Advisory Committee on Heritable Disorders in Newborns and Children (SACHDNC), a federally appointed committee that reviews and recommends nominations for new disorders to the NBS panel, convened to begin a new round of evidenced-based reviews. In FFY 2011, the condition known as Severe Combined Immunodeficiency (SCID) was approved for addition to the NBS panel. The outcomes of this new addition enabled the NBS to screen over one million newborns for SCID and have detected approximately 40 cases of SCID or other t-cell immune deficiencies requiring treatment. More information about this program can be found at the website: [www.cdph.ca.gov/programs/NBS](http://www.cdph.ca.gov/programs/NBS).

**NICU Liaisons:**

RCs continued liaison activities with their local NICUs throughout FFY 2011. Liaison activities included Child Find activities, referral, intakes, and discharge planning with hospital staff to provide continuity of care between hospital and home. In 2011, the statewide total number of infants discharged from NICUs was 15,694, as follows:

- Infants discharged to home: 11,751.
- Infants transferred to another facility: 3,943.

### **The California Children's Services (CCS) High Risk Infant Follow-Up (HRIF):**

The HRIF program identifies infants who might develop CCS-eligible conditions after discharge from a CCS approved NICU. HRIF serves infants who may have one of the following conditions: a serious congenital infection; an endocrine, metabolic or immune disorder; a blood disorder; birth weight less than 1,500 grams; a positive urine toxicology for any drug or signs of drug toxicity or withdrawal; discharge from a NICU; or a congenital anomaly or other conditions, such as intrauterine growth retardation.

These infants and their families, plus families who experience neonatal death, are referred to local health departments and public health nurses may provide the follow-up services. The goals of follow-up services are to promote optimal growth and development, teach the family how to care for the high risk infant, prevent complications, decrease morbidity, and mortality, reduce stress and the potential for abuse, and ensure early identification and referral for further treatment and evaluation. HRIF coordinators ensure that infants participating in the program receive developmental monitoring and referrals are made to the RC when developmental concerns arise. Collaboration between the high risk follow-up and numerous programs such as Primary Care, Early Intervention, Perinatal Follow-up and a referral network provide assistance, depending on the needs of the family. These services continued throughout FFY 2011.

### **Homeless Education Program**

DDS began a collaborative partnership this year with the Homeless Education Program at the CDE. DDS staff members and the CDE Education Program Consultant for the Homeless Education Program in California have met several times this year to discuss strategies for collaboration between Early Start and programs funded by the McKinney-Vento Act. Collaboration activities that were initiated include the sharing and distribution of local contact lists for both programs; Homeless Education Program posters were sent to Early Start managers in English and Spanish; and an ICC presentation was given at the May 2012 meeting to bring increased awareness of the thousands of homeless infants and toddlers in California that are at-risk for developmental delays. Strategies for improving coordination between homeless education liaisons and local Early Start staff are being planned for the coming year. An Early Start presentation is planned for the 2012 Fall Coordinators Training for McKinney-Vento Act grantees.

### **BabyLine**

DDS continues to maintain a toll-free telephone line [referred to as the *BabyLine* [1-800-515-BABY (2229)], which provides information in English and Spanish on Early Start, including resources and referral information for families. During FFY 2011, DDS staff received a total of 680 calls. This information is also posted on the Early Start website at: <http://www.dds.ca.gov/EarlyStart/WhatsES.cfm>.

**DDS and RC Websites**

DDS maintains a comprehensive website where information about Early Start services is located. The website takes into consideration that a new user may not know what services are available and the *Birth to 36 Months* webpage outlines the options for infants and toddlers. The section of this website that houses Early Start information alone received over 15,668 visitors in FFY 2011. <http://www.dds.ca.gov/Birth36Months/Index.cfm>

Additionally, a redevelopment of the webpage for California's Interagency Coordinating Council (ICC) on Early Intervention, which is housed on the DDS Early Start website, commenced in 2011. The renovation was prompted as an outreach effort to attract new parents and professionals to serve on the ICC.

Every RC in the State also maintains its own website, which includes Early Start information. A complete listing of RCs and their websites can be located on the DDS website under the *Regional Centers* tab.

CDE maintains a comprehensive website with information about Early Start services and resources. CDE maintains a link to the DDS Early Start website.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Effective General Supervision Part C / Child Find</b>
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**Indicator 6:** Percent of infants and toddlers birth to three with IFSPs compared to national data.

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

<b>Measurement:</b>
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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.
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FFY	Measurable and Rigorous Target
2011 (2011-2012)	2.0 percent of infants and toddlers birth to three in California will have IFSPs.

**Actual Target Data for FFY 2011 (2011-2012):**

California exceeded the measurable and rigorous target for this indicator. FFY 2011 data indicate that 2.2 percent (32,575 divided by 1,503,741, times 100 equals 2.2) of infants and toddlers served, ages birth to three years old, met the 2011 target of 2.0 percent. Data was derived from OSEP Table C1-9 entitled *Percent of Infants and Toddlers Receiving EIS under Individuals with Disabilities Education Act (IDEA), Part C, by Age and State: Fall 2010*.

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011.**

Target Met.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

**Monitoring Priority: Effective General Supervision Part C / Child Find**

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

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

**Measurement:**

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

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

FFY	Measurable and Rigorous Target
<b>2011 (2011-2012)</b>	100 percent of children have evaluation, assessment, and an IFSP meeting within 45 days.

**Actual Target Data for FFY 2011 (2011-2012):**

FFY 2011 data indicate that 78.2 percent of children served by DDS had an evaluation and assessment completed and an initial IFSP held within 45 days of referral (118 divided by 151, times 100 equals 78.2 percent). This figure represents progress from FFY 2010.

DDS currently documents EFCs and counts these individual records in both the numerator and denominator. EFCs were documented in 18 of the DDS records depicted in the numerator as timely. DDS thoroughly reviewed the information during the site visits to ensure that EFCs are properly documented in each record and used in circumstances allowed by federal law.

Data for children with SLI disabilities served by CDE indicate that 94.3 percent of the children had an evaluation and assessment completed and an initial IFSP held within 45 days of referral (82 divided by 87, times 100 equals 94.3 percent).

The combined data from DDS and CDE indicate that 84.0 percent (200 divided by 238, times 100 equals 84.0) of children had an evaluation and assessment completed and an initial IFSP held within 45 days of referral.

In order to Evaluation and assessment requirements and initial IFSP meeting timelines are compliance items for which performance data is obtained through record reviews during on-site monitoring visits. DDS conducted five on-site reviews for FFY 2011. Of the five RC programs visited, four were performing at an average of 90.4 percent on this indicator. The fifth was significantly lower (44.7 percent). DDS issued a finding and has worked extensively with the low-performing program, drilling down to help identify the root cause of the delays. The RC with the low performance did not have the capacity to meet the demands of the number of children entering the system. The actions they have taken include increasing the capacity in intake (increased staffing and appointments), conducting trainings regarding the regulatory requirement of the 45-day timeline to all six counties in the catchment area and developing a new IFSP form which contains the schedule of activities which must be completed within the 45-day timeline. DDS subsequently provided technical assistance to address the systemic issues causing the delays. CDE data is derived from monitoring for children served with solely low incidence disabilities in FFY 2011.

**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	<b>DDS</b>	<b>118</b>
	<b>CDE</b>	<b>82</b>
	<b>California</b>	<b>200</b>
b. Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted	<b>DDS</b>	<b>151</b>
	<b>CDE</b>	<b>87</b>
	<b>California</b>	<b>238</b>
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)	<b>DDS</b>	<b>78.2%</b>
	<b>CDE</b>	<b>94.3%</b>
	<b>California</b>	<b>84.0%</b>

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

A comparison of the data between FFY 2010 and FFY 2011 shows that California's performance continued to improve on this indicator compared to 2010. DDS continues to work on the online training modules and institutes and address the importance of conducting timely evaluations and assessments, and to building local program capacity through preparing and supporting paraprofessionals to work in the field. Using online modules as a training modality has increased the number of professionals trained in Part C requirements.

DDS continues to provide staff development and capacity building through California's Comprehensive System of Personnel Development (CSPD). (see Attachment A)

**Technical Assistance Provided by DDS to Local Programs:**

DDS continues to work with RCs to address compliance on this indicator. DDS provided specific technical assistance to three RCs with findings of noncompliance in this indicator. DDS assisted the RCs in drilling down to determine the root cause of the noncompliance. Once issues affecting performance (such as efficient and reliable procedures for capturing all data and backup documentation) are identified, DDS works with the RC to develop strategies to address them. This has led to changes in policies and procedures within the service system to better enable them to meet the 45-day timeline requirement.

**Training and Personnel Development:**

(see Attachment A)

**California's Community College Personnel Preparation Project (CCPPP):**

(see Attachment A)

**Speech and Language Pathology Assistant (SLPA) Efforts:**

The ICC work group will discuss current practice in Early Start programs to identify areas of strengths and concerns.

**Verification of Correction:**

California confirms that the IFSP meeting was held, although late for any child whose IFSP meeting did not occur in a timely manner, unless the child is no longer within the jurisdiction of the Early Intervention System (EIS), consistent with OSEP Memo 09-02. In addition, California ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent review of records as soon as possible but in no case later than one year from identification of noncompliance.

### Correction of FFY 2010 Findings of Noncompliance

California reported 76.6 percent compliance on Indicator 1 in FFY 2010. Twenty-Eight findings of noncompliance were issued.

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	<b>28</b>
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)	<b>28</b>
Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

#### Verification of Correction of FFY 2010 noncompliance:

#### Findings identified through the DDS Monitoring Reviews

DDS completed verification reviews at four RCS that were issued findings in FFY 2010 on this indicator. The findings identified for this indicator for FFY 2010 were verified as corrected within the required timeline. Results of these visits are as follows:

1. DDS confirmed that the RCs held the IFSP meeting, although late for all children whose IFSP meetings did not occur in a timely manner unless the child is no longer within the jurisdiction of the EIS program. This verification occurred at the original monitoring visit (Prong 1).
2. DDS verified that the RCs are: (1) correctly implementing the specific regulatory requirements in 34 CFR 303.322 and 303.342 based on verification reviews. The verification reviews occurred in FFY 2011. All records demonstrated that all children (100%) had an evaluation and assessment and IFSP meeting within 45 days of referral (Prong 2).

#### Findings identified through the CDE QAP

CDE has verified that each LEA with noncompliance identified in FFY 2010 has: (1) verified that each LEA is correctly implementing the specific regulatory requirements for each noncompliant finding in this indicator through evidence of student-level correction. Student-level corrective actions are to be completed within 45 days of reporting the finding to the district, and (2) ensured that a more stringent level of follow-up review and reporting is required of districts that have previously corrected noncompliance related to this indicator. The additional reporting ensures that LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures, and practices including dissemination and staff training; and by reviewing a new sample of student records for each district-level finding. District level corrective actions are given a timeline of three months. For all findings, correction must be completed as soon as possible but in no case later than one year.

**Correction of FFY 2009 Findings of Noncompliance:**

Level of compliance (actual target data) reported for FFY 2009 for this indicator 70.3 percent.

1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010)	<b>2</b>
2. Number of FFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	<b>2</b>
Number of FFY 2009 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

Two findings of noncompliance were issued on this indicator in FFY 2009. One of the findings was reported as corrected within the required timeline in the FFY 2009 APR. The other finding was identified on FFY 2009 performance on this indicator in FFY 2010. This finding was corrected in a timely matter.

**Verification of Correction of FFY 2009 noncompliance:**

DDS was able to complete an on-site verification visit of the RC that was issued a finding in FFY 2010 for FFY 2009 performance.

1. DDS confirmed that the RCs held the IFSP meeting , although late for all children whose IFSP meetings did not occur in a timely manner unless the child is no longer within the jurisdiction of the EIS program. This verification occurred at the original monitoring visit (Prong 1).
2. DDS verified that the RCs are: (1) correctly implementing the specific regulatory requirements in 34 CFR 303.322 and 303.342 based on verification reviews. The verification reviews occurred in FFY 2011. All records demonstrated that all children (100%) had an evaluation and assessment and IFSP meeting within 45 days of referral (Prong 2).

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

As noted above, the FFY 2011 data for this indicator includes children with SLI disabilities served by CDE

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Effective General Supervision Part C / Effective Transition</b>
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**Indicator 8A:** 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**

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

<b>Measurement:</b>
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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.
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<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>FFY 2011 (2011-2012)</b>	100 percent of noncompliance findings are corrected within one year of identification.

**Actual Target Data for FFY 2011 (2011-2012):**

FFY 2011 data indicate that 94.8 percent of the children exiting Part C have an IFSP with transition steps and services (128 divided by 135 times 100 equals 94.8 percent). This figure compares to 80.0 percent of children who had an IFSP with transition steps and services in FFY 2010.

The data for this indicator are gathered through a random sample of children who are at least two years, six months or older at the time of the on-site review.

**Children Exiting Part C Who Received Timely Transition Planning:**

a. Number of children exiting Part C who have an IFSP with transition steps and services	<b>128</b>
b. Number of children exiting Part C	<b>135</b>
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 (Percent = [(a) divided by (b)] times 100)	<b>94.8%</b>

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011.**

A comparison of the on-site monitoring data between FFY 2010 and FFY 2011 shows that California's performance improved by 14.81 percent on Indicator 8A (94.81 percent for FFY 2011 compared to 80.00 percent in FFY 2010).

For FFY 2011, DDS conducted five on-site reviews. DDS monitors RCs on a cyclical basis every three years. As stated above, DDS completes a random selection of records that are reviewed at the on-site monitoring review.

As part of DDS' restructuring of the on-site monitoring system, the correction of items in noncompliance continued to be a priority for California in FFY 2011. This resulted in the review of 20 additional transition records and the correction of all outstanding findings. Details on these verification reviews are reflected in the correction of noncompliance portion of this narrative.

**Improvement Activities Completed During FFY 2011**

The following improvement activities and actions conducted during this period continue to improve performance on this indicator:

1. California's CSPD (see Attachment A) continues to include the Early Start Institute Series for service providers, service coordinators, family support personnel and other interested parties. DDS contracts with WestEd to coordinate implementation of these personnel development activities. FFY 2011 training events to improve performance on transition are as follows:
  - a. In May 2012, the Early Start Advanced Practice Institute sponsored by DDS and coordinated by WestEd, featured three workshops *Moving on at Age Three: Changes in Transition, Overcoming Transition Challenges, and Implementing Final Part C Regulations: Making it work in California.*

- b. DDS collaborated with CDE on multiple sessions at the Special Education Early Childhood Administrators Project (SEECAP) conference in 2012. SEECAP was sponsored by CDE, and addressed transition from Part C to Part B, including timely notification, transition steps and the transition conference. Local issues were identified along with strategies and resources available through DDS and CDE. The conference was attended by administrators, parents and professionals representing the care and education of children birth through age five.
2. The following are collaborative activities by DDS and CDE in FFY 2011 to improve transition from Part C to Part B:
  - c. DDS and CDE continue to develop a joint transition handbook to ensure a smooth process for the families transitioning from Part C to Part B.
  - d. DDS and CDE devoted resources to address the transition process in California at the local level. Since February 2012, DDS and CDE have jointly assisted 11 RC's and their respective LEA and Special Education partners. The joint trainings focus on conducting the transition meetings, preparing families for transition, interagency communication and notification, developing and implementing transition steps, defining agency responsibilities and facilitating dialogue between Part C and B personnel.
3. DDS implemented the ESR in June 2011, and continues to refine the transition sections. (see Overview)
4. DDS has availed itself of technical assistance opportunities made available through OSEP including conference calls with OSEP representatives. Additional technical assistance was gleaned through participation in the National Infant-Toddler Coordinators Association meetings, NECTAC webinars and conference calls with the WRRRC. DDS continues to work with a nationally recognized consultant through WestEd for training and technical assistance.

### **Verification of Correction**

DDS gathers data to verify corrections through both on-site verification visits and reviews of subsequent records. DDS confirms that transition steps, LEA notification and the transition conference occurred, although late, for any child whose transition did not occur in a timely manner, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02.

In addition to the above, DDS notifies the RC, in writing, of the noncompliance. A root cause analysis is completed by the RC, with assistance from DDS, to determine if the noncompliance requires a revision to policies or procedures that contributed to the reasons for the delays. If it is determined that revisions are needed, a plan of correction is developed to establish appropriate policies and procedures to ensure compliance with the standard. If this is not the root cause, the RC identifies and documents the action

that needs to be taken to ensure the finding will be cleared. These actions are documented and submitted to DDS. DDS ensures that each agency with identified noncompliance is correctly implementing the specific regulatory requirements based on a subsequent verification review as soon as possible.

### Correction of FFY 2010 Findings of Noncompliance:

California reported 80 percent compliance on indicator 8A in FFY 2010. Two findings were issued.

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

### Verification of Correction of FFY 2010 findings:

DDS completed a verification review of both RCs with outstanding findings from FFY 2010. Both FFY 2010 findings for this indicator were verified as corrected. The following is the result of the verification review at both RCs:

- DDS confirmed that all children with noncompliance with transition planning received a transition plan, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. This occurred during the original monitoring visit (Prong 1);
- DDS verified that both RCs are correctly implementing the specific regulatory requirements in 34 CFR §§ 303.148(b) (4) and 303.344(h). One of the RC verification reviews consisted of a review of 10 transition records in July 2011. The second RC verification review consisted of a review of 10 transition records in February 2012. All of the records reviewed demonstrated compliance with C8A, timely transition planning (Prong 2).

An additional RC cleared a potential finding on this indicator prior to the issuance of the report in FFY 2011. The RC cleared the potential finding on both the individual child level (Prong 1) and systemic level (Prong 2), consistent with OSEP Memo 09-02.

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

Although the information above does not include data regarding children with SLI disabilities, the State is working toward the goal of providing the remaining data in the near future.

**Revisions, with Justification, to Proposed Targets / Improvement Activities Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Effective General Supervision Part C / Effective Transition</b>
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**Indicator 8B:** 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;

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

<b>Measurement:</b>
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Percent = [(# of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
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<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>FFY 2011 (2011-2012)</b>	100 percent of noncompliance findings are corrected within one year of identification.

**Actual Target Data for FFY 2011 (2011-2012):**

FFY 2011 data indicate that notification to the LEA occurred for 93.3 percent of children exiting Part C and potentially eligible for Part B (126 divided by 135 times 100 equals 93.3 percent). This figure compares to 99.0 percent of children who exited Part C where notification occurred in a timely manner in FFY 2010.

The data for this indicator are gathered through a random sample of children who are at least two years, six months or older at the time of the on-site review.

**Children Exiting Part C who Received Timely Transition Planning (Notification to LEA):**

a. Number of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred	<b>126</b>
b. Number of children exiting Part C who were potentially eligible for Part B	<b>135</b>
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 (Notification to LEA) (Percent = [(a) divided by (b)] times 100)	<b>93.3%</b>

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

A comparison of the on-site monitoring data between FFY 2010 and FFY 2011 represents a slippage of 5.64 percent on Indicator 8B (98.97 in FFY 2010 compared to 93.37 in FFY 2011).

For FFY 2011, DDS conducted five on-site reviews. DDS monitors RCs on a cyclical basis every three years. As stated above, DDS completes a random selection of records that are reviewed at the on-site Part C State review.

As part of DDS' restructuring of the on-site monitoring system, the correction of items in noncompliance continued to be a priority for California in FFY 2011. In addition to the transition records discussed above, DDS completed a verification review for one RC that had outstanding findings in Indicator 8B. This resulted in the review of 10 additional transition records and the correction of all outstanding findings. Details on these verification reviews are reflected in the correction of noncompliance portion of this narrative.

**Improvement Activities Completed During FFY 2011:**

The improvement activities completed in FFY 2011 for Indicator 8B are listed in Indicator 8A.

**Verification of Correction** (see Indicator 8A)**Correction of FFY 2010 Findings of Noncompliance:**

California reported 99.0 percent compliance on indicator 8B in FFY 2010. One finding was issued.

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

**Verification of Correction of FFY 2010 findings:**

DDS completed a review of records for the RC with an outstanding finding from FFY 2010. The finding for this indicator for FFY 2010 was verified as corrected. The following is the result of the verification review:

- DDS confirmed that all children with noncompliance with transition planning received a transition plan, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. This occurred during the original monitoring visit (Prong 1);
- DDS verified that the RC is correctly implementing the specific regulatory requirements in 34 CFR § 303.148(b) (1). The RC verification review consisted of a review of 10 transition records in July 2011. All of the records reviewed demonstrated compliance with C-8B, LEA notification (Prong 2).

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

Although the information above does not include data regarding children with solely low-incidence disabilities, the State is working toward the goal of providing the remaining data in the near future.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Effective General Supervision Part C / Effective Transition</b>
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**Indicator 8C:** 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.

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

<b>Measurement:</b>
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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.
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<b>Account for untimely transition conferences, including reasons for delays.</b>
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<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>FFY 2011 (2011-2012)</b>	100 percent of noncompliance findings are corrected within one year of identification.

**Actual Target Data for FFY 2011 (2011-2012):**

FFY 2011 data indicate that the transition conference occurred for 85.9 percent of the children exiting Part C and potentially eligible for Part B (116 divided by 135 times 100 equals 85.9 percent). This figure compares to 93.8 percent of children who exited Part C where the transition conference occurred in a timely manner in FFY 2010.

California currently documents EFCs and counts these individual records in both the numerator and denominator. EFCs were documented in 10 of the 116 records depicted in the numerator as timely. DDS thoroughly reviews the information during the site visits to ensure that EFCs are properly documented in each record and used in circumstances allowed by federal law.

The data for this indicator are gathered through a random sample of children who are at least two years, six months or older at the time of the on-site review.

**Children Exiting Part C who received Timely Transition Planning (Transition Conference):**

a. Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred	<b>116</b>
b. Number of children exiting Part C who were potentially eligible for Part B	<b>135</b>
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 (Transition Conference) (Percent = [(a) divided by (b)] times 100)	<b>85.9%</b>

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

A comparison of the on-site monitoring data between FFY 2010 and FFY 2011 shows slippage on Indicator 8C of 7.9 percent (93.8 in FFY 2010 compared to 85.9 in FFY 2011).

For FFY 2011, DDS conducted five on-site reviews. DDS monitors RCs on a cyclical basis every three years. As stated above, DDS completes a random selection of records that are reviewed at the on-site Part C State review.

As part of DDS' restructuring of the on-site monitoring system, the correction of items in noncompliance continued to be a priority for California in FFY 2011. In addition to the transition records discussed above, DDS completed a verification review for one RC that had outstanding findings in Indicator 8C. This resulted in the review of 10 additional transition records and the correction of all outstanding findings. Details on these verification reviews are reflected in the correction of noncompliance portion of this narrative.

**Improvement Activities Completed During FFY 2010**

The improvement activities completed in FFY 2011 for Indicator 8C are listed in Indicator 8A.

**Verification of Correction** (see Indicator 8A)**Correction of FFY 2010 Findings of Noncompliance:**

California reported 93.8 percent compliance on indicator 8C in FFY 2010. One finding was issued.

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

**Verification of Correction of FFY 2010 noncompliance:**

DDS completed a review of records for the RC with an outstanding finding from FFY 2010. The finding for this indicator for FFY 2010 was verified as corrected. The following is the result of the verification review:

- DDS confirmed that all children with noncompliance with transition planning received a transition plan, although late, unless the child was no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. This occurred during the original monitoring visit (Prong 1);
- DDS verified that the RC is correctly implementing the specific regulatory requirements in 34 CFR § 303.148(b) (1). The RC verification review consisted of a review of 10 transition records in July 2011. All of the records reviewed demonstrated compliance with C-8C, Timely Transition Conference (Prong 2).

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

Although the information above does not include data regarding children with solely low-incidence disabilities, the State is working toward the goal of providing the remaining data in the near future.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

<b>Monitoring Priority: Effective General Supervision Part C / General Supervision</b>
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**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.

<b>Measurement:</b>
---------------------

Percent of noncompliance corrected within one year of identification.
---

- |  |
|--|
| <ul style="list-style-type: none"> <li>a. # of findings of noncompliance.</li> <li>b. # of corrections completed as soon as possible but in no case later than one year from identification.</li> </ul> <p>Percent = [(b) divided by (a)] times 100.</p> |
|--|

FFY	Measurable and Rigorous Target
<b>FFY 2011 (2011-2012)</b>	100% of noncompliance findings are corrected within one year of identification.

**Actual Target Data for FFY 2011:**

FFY 2011 data shows that 100% of noncompliance findings were corrected within one year of identification (140 divided by 140, times 100 equals 100).

**Describe the process for selecting EIS programs for Monitoring:**

DDS monitors the implementation of Part C EIS, provided in California through the Early Start program. The primary focus of State monitoring activities is on improving results and functional outcomes for all children with disabilities and ensuring that local programs meet all Part C requirements. DDS monitors local programs using quantifiable indicators in each of the priority areas specified by OSEP. DDS conducts on-site program monitoring on a three year cycle.

In addition, local programs are selected for monitoring reviews based on factors which include outstanding noncompliance and level of noncompliance on a given indicator. DDS and CDE verify the correction of findings derived from complaints and due process hearings to ensure that decisions rendered are implemented. DDS reviews a random

selection of records during the Part C on-site review. The correction of items in noncompliance continues to be a priority for California. For FFY 2011, DDS completed verification reviews of 5 RCs, all of which were able to demonstrate correction of findings.

Compliance monitoring for the Early Start programs at the LEAs is addressed in the Special Education Division’s QAP. The QAP addresses noncompliance and timelines for corrective action.

The data for this indicator includes children with solely low-incidence disabilities being served through Part C by CDE.

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target that occurred for FFY 2011:**

The state reported 100% compliance on this indicator.

**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)	<b>140</b>
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)	<b>140</b>
Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

**Verification of Correction of FFY 2010 Findings**

**Findings identified through the DDS Monitoring Reviews**

DDS has verified that each RC with noncompliance identified in FFY 2010: (1) has corrected each individual case of noncompliance, unless the child was no longer in the jurisdiction of the program and (2) is correctly implementing the specific regulatory requirements based on verification reviews of subsequent records.

**Findings identified through the CDE QAP**

CDE has verified that each LEA with noncompliance identified in FFY 2010: (1) has verified that each LEA is correctly implementing the specific regulatory requirements for each noncompliant finding in this indicator through evidence of student-level correction. Student-level corrective actions are to be completed within 45 days of reporting the finding to the district, and (2) ensured that a more stringent level of follow-up review and

reporting is required of districts that have previously corrected noncompliance related to this indicator. The additional reporting ensures that LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures, and practices including dissemination and staff training; and by reviewing a new sample of student records for each district-level finding. District level corrective actions are given a timeline of 3 months. For all findings, correction must be completed as soon as possible but in no case later than one year.

**Findings identified through the Dispute Resolution Process**

DDS and CDE have verified each RC and LEA with noncompliance identified through the dispute resolution process in FFY 2010 were verified as corrected within the required timeline. DDS and CDE verified that each RC and LEA completed the required actions to correct the noncompliance.

**INDICATOR C-9 FFY 2010 FINDINGS OF NONCOMPLIANCE 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	8	8	8
	Dispute Resolution: Complaints, Hearings	3	5	5
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	14	14	14
	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	28	28	28
	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	28	28	28
	Dispute Resolution: Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	28	28	28
	Dispute Resolution: Complaints, Hearings	5	10	10
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has: A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	4
	Dispute Resolution: Complaints, Hearings	2	3	3
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has: B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	2	2

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Developmental levels in all 5 developmental domains listed on the Annual Review	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Timely Written Notice of the IFSP	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: IFSPs list services for the child that contain method, frequency, intensity, and duration.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Parental consent for evaluation and assessment	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Evaluation/Assessment in all 5 developmental domains completed prior to the initial IFSP.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Parental consent for early intervention services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution:			

	Complaints, Hearings			
OTHER AREAS OF NONCOMPLIANCE: Service Coordinator assists family in obtaining services	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
<b>Sum the numbers down Column a and Column b</b>			140	140
<b>Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.</b>			<b>(b) / (a) X 100 =</b>	<b>100.00%</b>

**Timely Correction of FFY 2009 Findings of Noncompliance (corrected within one year from identification of the noncompliance):**

1. Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009, through June 30, 2010)	<b>82</b>
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)	<b>82</b>
Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	<b>0</b>

DDS issued three findings of noncompliance in FFY 2010 based on FFY 2009 performance. All three findings were corrected in a timely matter.

CDE issued an additional 79 findings of noncompliance in FFY 2009 that were not included in the APR for FFY 2010. All 79 findings were corrected in a timely matter.

**Verification of Correction of FFY 2009 Findings**

**Findings identified through the DDS Monitoring Reviews**

DDS has verified that each RC with noncompliance identified in FFY 2009: (1) has corrected each individual case of noncompliance, unless the child was no longer in the jurisdiction of the program and (2) is correctly implementing the specific regulatory requirements based on verification reviews of subsequent records.

**Findings identified through the CDE QAP**

CDE has verified that each LEA with noncompliance identified in FFY 2009: (1) is correctly implementing the specific regulatory requirements for each noncompliant finding in this indicator through evidence of student-level correction. Student-level corrective actions are to be completed within 45 days of reporting the finding to the district, and (2) ensured that a more stringent level of follow-up review and reporting is required of districts that have previously corrected noncompliance related to this indicator. The additional reporting ensures that LEAs are correctly implementing the specific regulatory requirements by reviewing policies, procedures, and practices including dissemination and staff training; and by reviewing a new sample of student records for each district-level finding. District level corrective actions are given a timeline of 3 months. For all findings, correction must be completed as soon as possible but in no case later than one year.

**INDICATOR C-9 FFY 2009 FINDINGS OF NONCOMPLIANCE WORKSHEET**

Indicator/ Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2009 (7/1/09 through 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 through 6/30/10)	(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	11	11	11
	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	6	6	6
	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	26	26	26
	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	16	16	16
	Dispute Resolution: Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	13	13	13
	Dispute Resolution: Complaints, Hearings	0	0	0
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:  A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:  B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and	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. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	4	4

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: Developmental levels in all 5 developmental domains	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE: IFSPs contain outcomes, procedures, criteria and timelines.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
<b>Sum the numbers down Column a and Column b</b>			82	82
<b>Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.</b>			<b>(b) / (a) X 100 =</b>	<b>100.00%</b>

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

As discussed above, data regarding findings of noncompliance identified by CDE and the status of correction of those findings is included for this indicator.

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

California does not propose any changes to this indicator.

**Part C State Annual Performance Report (APR) for 2011****Overview of the Annual Performance Report Development:**

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

**[The State is not required to report on Indicator 10 in the FFY 2011 APR.]**

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

### Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY	Measurable and Rigorous Target
2011 (2011-2012)	100 percent of cases will be adjudicated within the 30-day timeline.

#### Actual Target Data for FFY 2011:

Hearing Requests	2011-2012
(3) Hearing Requests total	90
(3.1) Resolution sessions	Not applicable
(a) Settlement agreements	Not applicable
(3.2) Hearings (fully adjudicated)	11
(a) Decisions within timeline	10
(b) Decisions within extended timeline	Not Applicable
(3.3) Hearings pending	9
(3.4) Due Process Complaints withdrawn or dismissed	70

Data from FFY 2011 indicate that 90.9 percent of due process complaints were fully adjudicated within the 30-day timeline (10 plus 0 divided by 11, times 100 equals 90.9 percent). This is an improvement over FFY 2010 where 26.7 percent of complaints were fully adjudicated within the 30-day timeline.

The single due process hearing that was not fully adjudicated within the 30-day timeline was held, but not signed within the required timeline.

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

In FFY 2011, 90.9 percent of due process complaints were fully adjudicated within the 30-day timeline. This represents a 64.2 percent improvement over the FFY 2010 performance of 26.7 percent.

In FFY 2011, 70 of the 90 (77.8 percent) requested hearings (3.4 Due Process Complaints withdrawn or dismissed) were resolved or withdrawn prior to the due process hearing. The high number of requests that were withdrawn or dismissed prior to the due process hearing reflects the successful partnerships our local programs have with the families and providers in California. The system prides itself in these partnerships and resolves issues and disputes in a family friendly and positive manner at the local level whenever possible.

**Improvement Activities Completed During FFY 2011:**

As required by OSEP in response to the State's FFY 2010 APR, the State has revised activities/procedures to ensure compliance in this area, as evidenced by the significantly improved performance. Examples of these improvements include the establishment of an electronic data base in 2011 to track, monitor and ensure timely and accurate data is collected on all hearings and mediations. Additionally, a secure email system was established to allow for timely exchange of files. These and other improvement activities will allow California to continue its improved performance in this area.

**Training Activities**

DDS continues to include training about dispute resolution procedures in the Early Start Institutes.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

**Part C State Annual Performance Report (APR) for 2011****Overview of the Annual Performance Report Development:**

<b>Monitoring Priority: Effective General Supervision Part C / General Supervision</b>
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**Indicator 12:** Percent of hearing requests that went to resolution 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)

**[California does not use the Part B due process procedures for the Part C program; therefore, this indicator does not apply.]**

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

**Overview of the Annual Performance Report Development:** See *Overview of the Annual Performance Report Development* section.

**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 equals (2.1)(a) (i) plus (2.1)(b) (i) divided by (2.1) times 100.

*(Percent equals (number of mediations not related to due process plus number of mediation agreements) Divided by total number of mediations times 100)*

FFY	Measurable and Rigorous Target
2011 (2011-2012)	55 percent of mediations will result in agreements.

**Actual Target Data for FFY 2011 (2011-2012):**

California exceeded the measurable and rigorous targets for this indicator. Data from FFY 2011 indicate that 90.9 percent of mediations held (12 plus 18 divided by 33, times 100 equals 90.9 percent) resulted in mediation agreements.

Mediation Requests	2011-2012
(2) Mediation requests total	97
(2.1) Mediations	33
(a) Mediations related to due process	12
(i) Mediation agreements	12
(b) Mediation not related to due process	21
(i) Mediation agreements	18
(2.2) Mediations pending	7
(2.3) Mediations not held	57

A comparison of data for FFY 2010 and 2011 reveals California's performance on this Indicator improved by 8.8 percent from 82.1 percent to 90.9 percent. This performance is well above the 55 percent measurable and rigorous target set by the State.

**Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011.**

Target met.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:**

California does not propose any revisions to this indicator.

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

**Overview of the Annual Performance Report Development:**

**Monitoring Priority: Effective General Supervision Part C / General Supervision**

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

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

**[The State is not required to report on Indicator 14 in the FFY 2011 APR.]**

# ATTACHMENT A

The following chart shows which of California's Comprehensive System of Personnel Development (CSPD) trainings and other state activities address the assurance of the State that an appropriately prepared and trained pool of early intervention providers are available to meet the requirements for the listed SPP/APR indicators, and/or constitute improvement activities that promote progress for the specified indicator. The pages following the chart describe the major components of the CSPD.

	INDICATOR <sup>5</sup>										
	1	2	3	4	5	6	7	8	10	11	13
<b>TRAINING COMPONENT</b>											
<b><i>Early Start Institute Series*</i></b>											
Early Start Essentials	X	X	X	X	X	X	X	X			
Family Resources and Supports Institute	X	X	X	X	X	X	X	X			
Advanced Practice Institute	X	X	X	X			X	X			
Regional Center Managers' Symposium	X	X	X				X	X			
Service Coordinator's Handbook Training Tool	X	X	X		X	X	X	X	X	X	X
<b><i>Early Start Online Training Series</i></b>											
Foundations I, II & III	X	X	X	X	X	X	X	X	X	X	X
<b><i>Early Start Personnel Model</i></b>											
Development, analysis, and coordination of a Multiple Pathways service delivery model across 21 disciplines.	X	X	X	X			X	X			
<b><i>Statewide System of Focused Monitoring</i></b>											
Coordinate and facilitate the development and implementation of a statewide system of focused monitoring.	X	X	X	X	X	X	X	X	X	X	X
<b><i>Early Start Personnel Development Fund</i></b>											
Provides support for the professional development of personnel who provide early intervention services to infants and toddlers eligible for Early Start services.	X	X	X	X	X	X	X	X	X	X	X

<sup>5</sup> Inclusion of indicators 9, 12, and 14 is not applicable for purposes of this chart.

<b>Community College Personnel Preparation Project</b>											
Supports the development of competencies for early intervention assistants and paraprofessionals who work with young children with disabilities and other special needs and their families in a variety of settings.	X	X	X	X	X	X	X	X			
<b>Public Awareness and Outreach</b>											
Includes resource development and production of multilingual and diverse materials; product management; data collection and tracking; dissemination of materials; website development and maintenance; cross-project collaboration and support; and information, linkage and referral.				X	X	X	X	X	X	X	X
<b>Interagency Support*</b>											
Interagency activities sponsored or supported by DDS.	X	X	X		X	X	X	X			

\* *Monitoring Priority*: Early Intervention Service in Natural Environment

## Introduction

In California, the Early Start Comprehensive System of Personnel Development (CSPD) provides the framework for coordinating the delivery of personnel development and technical assistance activities throughout the state. Pre-service preparation, in-service training, and technical assistance are essential CSPD components delivered at the state and local levels through a variety of activities defined by DDS.

California assures that personnel who provide Early Start services are appropriately prepared and trained according to standards based on the highest entry-level requirements of the state and in accordance with state and federal laws [20 USC 1435 § 635(a)(8) and Title 14 CCR § 95022(d)]. Early intervention personnel may be certificated, registered, licensed, or credentialed by the state or their professional organizations pursuant to applicable state regulations.

The FFY 2011 program year marked the second year of a five-year transition from a traditional, event-based personnel delivery model CSPD and technical assistance to an integrated multi-modal delivery model. Awareness- and knowledge-level content, piloted and launched last year, were delivered this year via web-based training. Face-to-face training institutes continued to deliver a deeper integration of the knowledge and skill practice. This model aligns training approaches to desired levels of synthesis and application, using web-based education technologies to increase access for field professionals, support integration of learning through facilitated interaction, and prepare learners for higher-level learning through the more intensive, live event training. An evaluation plan, also implemented this past year, accomplished two related objectives: assessment of the fidelity of the integrated multi-modal delivery model to achieve participant outcomes and the effectiveness of the design to deliver the content.

## Training and Technical Assistance Activities

### *Early Start Personnel Development System Overview*

The Early Start Training and Technical Assistance (ES TTA) Development Leadership Group, comprised of DDS, CDE, and WestEd staff, convened regularly to address on-going development and implementation of the new multi-modal personnel development system. Components of the Early Start Personnel Development System include:

- **Early Start Online:** Web-based, interactive training modules that address foundational and advanced knowledge-level content.
- **Early Start Institutes:** One- and two-day events, each conducted once per training year. These live Institutes support guided practice and exploration, facilitated interaction, and personal planning for integration of knowledge and skill into real work activities.

- **Early Start Neighborhood:** A forum for job-alike or special topic facilitated, monitored interactive groups to extend the expert and peer support initiated via Online and Institute activities.

Additional webinars and live events are developed as needed to provide timely communication to the field on topics of special or critical interest. Activities conducted in real-time are archived for later reference.

For example, following the release of the federal Part C regulations, California brought a national consultant to present a statewide webinar in December 2011 about the new federal requirements.

### ***Early Start Online Overview***

Design and development of the Early Start Online Series continues to require coordination of collaborative efforts among Early Start partners under direction from DDS. In addition to the ES TTA Development Leadership Group, the Training Delivery Input Team (TDIT), a collaborative, multidisciplinary advisory and input team representative of Early Start stakeholders (DDS, RC, LEAs, vendor, and FRC staff) continues to provide valuable guidance as content is prepared for final review. TDIT members apply their specific areas of expertise or experience in reviewing content and learning outcomes. Input is integrated, as appropriate, prior to submission to DDS for final review and approval.

With DDS input and approval, an ongoing cycle of development, research, evaluation, and improvement has been established for the development and management of web-based delivery systems, e-learning publishing tools and effective practices, and personnel development competencies and curricula.

- *Curriculum development.* The original Early Start core Institute curriculum serves as the foundation for the curricula for Early Start Online. Learning outcomes are aligned with the *ICC-Recommended Early Start Personnel Manual (ESPM)* and have been reviewed for relevance to the Part C SPP indicators. Content and activities to address the learning outcomes are drawn from past training resources, current research, and updated policy and regulation.
- *Course design.* Content and activities are translated into e-learning formats and published as narrated presentations, online activities, and downloadable digital resources. Courses are enriched by illustrative family story videos depicting families sharing recent or current experiences with Early Start services and reflecting California's diversity.

Early Start Online is delivered through a hosted Moodle site: Remote-Learner. Moodle (Modular Object-Oriented Dynamic Learning Environment) is an open-source e-learning course management system; Remote-Learner is a host, providing a server and access to the Moodle platform for education institutions, government agencies, non-profits, and corporations. Early Start Online was transitioned to the Remote-Learner

hosting site after the original host (MoodleRooms) proved inadequate for reporting and in the technical support provided.

- *Course enrollment and activation.* Early Start Online is promoted through mass email communications and website postings. Registration is conducted online as well. Each facilitated course may accommodate up to 80 participants.
- *Course implementation.* During FFY 2011, training was developed and delivered through Early Start Online in the following Foundations series courses:
  - *Foundations I*
    - Family Systems
    - Early Start System
    - Making Decisions Using Evidence-Based Practice
    - The Individualized Family Service Plan Process
    - Supporting Families Using Coaching and Other Help-Giving Practices
  - *Foundations II*
    - Child Development
    - Screening, Evaluation, and Assessment
    - Creating Functional Outcomes Natural Environments for Families
    - Selecting and Developing Interventions

Individual learners access content and participate in discussions housed in a learning content management system via their personal or agency computers. Assistance is provided by Early Start Online Help (WestEd staff) directly to participants or to technology support staff at Early Start partner agencies to facilitate access to the course delivery system.

- *Course facilitation.* Each Early Start Online course is facilitated by a parent/ professional team, with oversight provided by an early child development specialist. Each facilitator monitors and responds to assignment and discussion forum submissions by up to 40 participants. Facilitation activities for assignments focus on checking for and supporting understanding of course content; facilitation activities for discussion forums promote peer interactions and encourage higher-order thinking around specific topics.
- *Course completion.* Participants who complete all requirements (view presentations, submit responses to all assignments, complete quizzes and feedback) receive certificates of completion. Participants who complete all requirements and receive scores above 85 percent (based on correct responses to assignments and quiz questions) receive certificates of achievement.
  - One hundred thirty one (131) participants received certificates of

- completion.
  - One hundred five (105) participants received certificates of achievement.
- *Course evaluation.* Evaluation data is collected from course assignments, pre- and post-course quizzes, and participant feedback surveys. Post-course quizzes consistently document increases in participant knowledge. Participant feedback results confirm that delivery methods are appropriate and effective from the participant perspective.
- *Course improvement.* Based on analysis of evaluation results, course activities, delivery methods, or learning objects are revised. Evaluation results also inform the development of content, activities, and delivery for courses in development. The third and final Foundations course was initiated during the 2011-2012 program year and will be activated during 2012-2013.
  - *Foundations III*
    - Working with Diverse Families
    - Relationship-Based Early Intervention
    - Quality Assurance in Early Intervention
    - Transition Planning
    - Collaboration Within the Early Start Team and Community Resources

### ***Early Start Institutes Overview***

In FFY 2011, DDS sponsored several training events as part of its Early Start Institute series to address the needs of new and seasoned service providers and a variety of other early intervention-related disciplines. Overall Early Start Institutes attendance data for this time period indicate that training reached the intended audience of professionals from early intervention partner agencies:

- Thirty-eight (38) percent of the participants represented RCs and regional center vendors.
- Twenty-three (23) percent of the participants represented FRCs.
- Sixteen (16) percent of the participants represented LEAs.
- Other participants represented community partners including Early Head Start/Head Start and child care agencies.

*The Family Resources and Supports Institute.* The Family Resources and Supports Institute (FRSI), entitled *It's a Small World*, provided a variety of high-quality training sessions for new and veteran family support professionals addressing current issues and critical practice topics.

- Attendance: 188
- Participant feedback ratings for the overall event as well as for breakout sessions: on average 4.1 and 4.7, respectively, on a 5-point scale.

*The Early Start Advanced Practice Institute.* The Early Start Advanced Practice Institute (API), entitled *Super Vision: Recognize Your Power*, provided higher-level training for more experienced early intervention professionals on

- Attendance: 210
- Participant feedback ratings for the overall event as well as for breakout sessions: on average 4.1 and 4.5, respectively, on a 5-point scale.
- Demand for registration exceeded expectations, and registration was closed approximately two weeks prior to the published registration deadline. To facilitate the participation of Early Start personnel who could not be accommodated onsite, several key sessions were offered through simultaneous web conferencing. Approximately 70 participants logged in to these sessions; actual online attendance may be higher as groups may have used one login.

*The Early Start Regional Center Managers' Symposium.* The Early Start Regional Center Managers' Symposium (RCMS) provided an opportunity for Early Start managers from RCs to examine issues, federal requirements, and the use of data for improvement activities.

- Attendance: 37
- Overall feedback ratings: 4.6 on a 5-point scale.

Institute attendance by agency representation indicated that specifically targeted Institutes reached their intended audiences:

- Eighty-one (81) percent of the Advanced Practice Institute participants represented RCs, regional center vendors, and LEAs.
- Sixty (60) percent of the Family Resources and Supports Institute represented family support personnel
- Twelve (12) percent of the Family Resources and Supports Institute participants represented regional center vendor and RC and LEA personnel.

During FFY 2011, 435 individuals were trained in Institutes throughout California; 171 individuals were trained through Early Start Online (not all participants received certificates of completion). A total of 606 early intervention and related service providers received Early Start training through the Early Start Personnel Development System.

### ***California Early Start Personnel Development Fund***

The Early Start Personnel Development Fund provides support for the professional development of personnel who provide early intervention services to infants and toddlers eligible for Early Start services. The FFY 2011 program year represents the fourteenth year of this project. Funds are awarded to local early intervention service providers, agencies, or programs to provide supplemental funding for costs associated with attending or conducting early intervention-related trainings. Funds are awarded through an application approval process

and must meet the specified criteria under the four categories that allow for the diversity of training needs that exist in California's Early Start community:

- Attendance Scholarships
- College Course Work
- Funding to Implement Quality Assurance Activities
- Funding to Implement Local Training Events

During FFY 2011, applicants from 194 programs and agencies applied for and received Early Start Personnel Development funds under the various award categories. A total of 2,137 qualifying early intervention staff from local programs and agencies were provided supplemental funds to attend statewide and local training events as well as to complete related course work through California-accredited universities and colleges. The total fund of \$284,048 was distributed by the end of June 2012.

Additional data indicate:

- A total of 547 applicants received attendance scholarships.
- Twelve direct service providers received course work scholarships to attend various California-accredited universities and community colleges.
- A total of 601 direct service providers were trained through Quality Assurance grants addressing quality assurance and non-compliance findings of Early Start programs. A total of \$24,292 was awarded to early intervention programs/agencies for these activities.
- As a result of training grant fund awards, a total of 997 Early Start direct service providers attended local specialized training events that focused on the specific needs of their communities. A total of \$59,242 was awarded to provide support for these local trainings.
- Eighteen of the 21 RCs accessed scholarships funds.
- Analysis of the role of personnel that accessed Early Start Personnel Funds indicated that the early intervention direct service providers were the largest group of professionals to access funds (65 percent), followed by support personnel (27 percent) and both paraprofessional/transition preschool teacher and administrative staff (4 percent).
- The majority of personnel who accessed scholarships funds were those with either a master of arts/science degree (50 percent) or a bachelor of arts/science degree (39 percent).

### ***California Community College Personnel Preparation Project***

California's two-year public institution system is composed of 112 colleges and represents the largest system of higher education in the nation. The Community College Personnel Preparation Project (CCPPP) is an activity under the Early Start CSPD designed to support the development of early intervention assistants and paraprofessionals to work with young children from birth to age three with disabilities and other special needs and their families in a variety of settings.

Currently, nearly half of the state's 112 community colleges participate in CCPPP (the pilot project in 1998 began with six). Fifty-three community colleges are involved as network colleges and have either the final implementation phase to complete or have completed the project and remain connected to receive current updates and maintain their program's consistency with Early Start CCPPP research and practices. CCPPP program goals include the following:

- Create access to a statewide system of early intervention training for paraprofessionals via community college child development departments.
- Infuse early intervention competencies into all child development courses.
- Support community college child development programs to offer courses and certificates for early intervention assistants.
- Promote interagency coordination and community involvement via supervised field placement and future employment.
- Coordinate early intervention certificates, degrees, and training between two year and four-year colleges and universities, leading to much-needed career pathways.
- Establish statewide networks with field-based mentors who support those who train early intervention assistants and other paraprofessionals.
- Support community colleges through all phases of establishing the certificate program.

A 2011–2012 evaluation of the program conducted by WestEd revealed the following highlights:

- Colleges were successful in developing early intervention-enhanced curricula and early intervention assistant certificate training programs. Students who graduated from early intervention assistant programs were adequately prepared to work with young children with special needs and were likely to be hired by child care organizations in their community.
- Colleges reported significant improvements in their collaborative partnerships within their program and across disciplines, as well as in their communities with families, organizations, and related agencies. The positive impact of their collaboration included an improved program curriculum and better skilled and knowledgeable faculty and staff.
- Students were generally satisfied with the early intervention assistant training provided by their college and found the early intervention-enhanced curriculum to be helpful to their profession. They reported needing more information about career opportunities in early intervention and early childhood special education and about the availability of early intervention/early childhood special education-related jobs in their community. They also requested more assistance in securing these jobs, as well as a greater number of specialty early intervention/early childhood special education course offerings.
- Colleges reported that the supports and resources that most effectively helped them establish and sustain an early intervention assistant curricular framework and early intervention assistant program on their campuses were 1) relationships with their assigned CCPPP mentors and

project liaisons; 2) materials, trainings, workshops, and conferences provided by CCPPP; 3) funding to compensate faculty and to build their own early intervention resource libraries; and 4) professional networking opportunities.

To further opportunities in the profession, CCPPP has also been working in collaboration with the California Professors of Early Childhood Special Education to address strategies to develop articulation agreements and address issues in the implementation of an early intervention career ladder between community colleges and four-year colleges and universities.

## **Public Awareness and Outreach**

### ***Early Start Resources***

Early Start Resources is responsible for public awareness and outreach activities, including resource development and production of multilingual and diverse materials; product management; data collection and tracking; dissemination of materials; website development and maintenance; cross-project collaboration and support; and information, linkage, and referral.

Staff oversees the dissemination and inventory of 46 products. This year, we were able to print and disseminate approximately 20 products that staff updated and redeveloped last year. Approximately 52,336 Early Start materials were disseminated statewide to a variety of early intervention and early intervention-related affiliate agencies and organizations, including child development organizations, community colleges, colleges and universities, county offices of education, early care and education agencies, and related stakeholder organizations. Early Start materials were also disseminated at some 15 meetings, conferences, trainings, and workshops at which staff served as support, presenters, or participants. RCs, LEAs, and FRCs were those who most frequently requested materials for local dissemination.

Staff focused on several other areas at DDS' direction:

- Including ADA 508 compliance as a standard operating procedure when posting product to the Internet;
- Updating, redesigning, and indexing the *California Early Start 2011 Central Directory of Early Intervention Resources*; and
- Helping stakeholders make the transition to the Internet for products that would no longer be produced physically.

To support publications and provide additional resources, Early Start websites supported public awareness and outreach activities. For example, staff has supported research and implementation of a variety of web-based learning and support tools, as well as online registration systems and an automated response system. The Early Start neighborhood online social networking site supported the dissemination of training materials as well as networking prior to and following

training events. Staff also began the redesign of the Early Start website to be more user friendly and handle increased traffic and information.

A physical move prompted reorganization of the bricks and mortar Early Start library that staff maintains as a complement to the e-resource library that is in development. Staff arranged for a library intern to select and install an updated library management system into which to catalogue the Early Start library collection.

## **Interagency Collaboration**

### ***Coordination and Support Activities***

Collaboration contributes significantly to comprehensive, coordinated services. No single agency is able to provide all services to all young children and their families. Cooperation and shared responsibility are vital components for a service-delivery system to be responsive to the varied needs of California's ethnically diverse children and families. Just as agencies establish partnerships at the local level, state departments assume a partnership role to enhance their mutual ability to serve California's infants and toddlers with disabilities and their families.

The following interagency activities are sponsored and/or supported by DDS and executed by WestED staff under DDS' direction:

- *State Interagency Coordinating Council (ICC) on Early Intervention:* Assisted and advised DDS concerning the statewide system of EIS and assisted DDS in achieving the full participation, cooperation, and coordination of appropriate public agencies that serve young children and their families. The ICC serves as a forum for public input from parents, service providers, service coordinators, and others about federal, state, or local policies that support the timely delivery of appropriate EIS. This year, among many other concerns, ICC was particularly interested in supporting DDS to interpret and implement the new federal regulations.
- *Training and Technical Assistance Collaborative (TTAC):* Coordinated meetings and special presentations and served as advisor to this forum for discussion of professional and program development issues important to the early intervention and early childhood field. It is the only statewide forum that convenes training and technical assistance coordinators and providers, as well as representatives from the funding agencies that support them, to discuss issues and explore coordination and collaboration opportunities. In response to member preferences, in addition to exploring collaboration opportunities, the meetings provided in-depth presentations on issues of concern to early intervention providers, such as initiating early intervention among homeless children.

- *Advisory Committee for California Deaf-Blind Services (CDBS)*  
*Representation:* CDBS focuses on building local and state capacity to serve children from birth to age twenty-two who are deaf-blind and to support their families. Collaborative efforts include CDBS staff presenting on topics related to deafness/blindness at California Early Start events and CDBS contributing materials and resources that are provided to the field in the specialized area of deafness/blindness.
- *Child Abuse Prevention and Treatment Act (CAPTA):* DDS collaboratively convened meetings with the CDSS to discuss how RCs and LEAs coordinate with their county DSS agencies regarding CAPTA-related requirements. The year's activities included participation in CAPTA-related webinars hosted by CDSS and the University of California, Davis.
- *Annual State Infant/Toddler Coordinators Meeting and OSEP Annual Leadership Conference:* Participated in the annual OSEP National Early Childhood Conference in Washington, D.C., representing California early intervention stakeholders.
- *NECTAC and WRRRC:* Working with NECTAC and WRRRC in the review of the *Handbook on Transition* from the transition sections of DDS' *Early Start Service Coordinator's Handbook* and CDE Special Education Division. The review identified areas needing clarification in the final draft.
- *Early Childhood Mental Health Steering Committee:* Under direction of DDS and facilitated by WestEd, this interdisciplinary workgroup representing mental health, academia, professional organizations and private practitioners refined the process by which early intervention specialists can meet the competencies aligned with the *California Training Guidelines and Personnel Competencies for Infant-Family and Early Childhood Mental Health (Revised)* to secure endorsement in providing services related to the social and emotional development of infants and toddlers with special needs. This refinement of the process provides an opportunity to assess these specialized competencies and develop a related technical assistance model to support professionals providing EIS. These guidelines are aligned with other state initiatives related to early intervention and childhood social and emotional development.
- *State Partnerships:* To reflect the interagency nature of EIS, DDS, through its CSPD activities, continued outreach to other statewide TTA partners as well as agencies and organizations that represent the interests of young children and families with special needs in the preparation and delivery of professional development activities.

During the 2011–12 program year, the Early Start Institutes included representation from CDE, Supporting Early Education Delivery Systems

(SEEDS), Family Voices of California, University Centers for Excellence in Developmental Disabilities (UCEDD), Early Head Start (EHS) Volunteers of America, the Epilepsy Foundation, Strategies, the Arc of California, California Association of Family Empowerment Centers (CAFEC), Alta California Regional Center, Far Northern Regional Center, Shasta County Office of Education, and the Southwest SELPA.

Strengthened the DDS partnership with the Department of Public Health Maternal Child and Adolescent Health on several fronts:

- Continued support of the interagency coordination aspects of the new federal home visiting program, specifically developing plans for systems development, continuous quality improvement, and formation of a home visiting advisory council.
- Facilitated linkages on the work of California Project LAUNCH, a federal initiative integrating systems that serve young children and address their physical, emotional, social, cognitive, and behavioral growth.
- Collaborated with CDE as participant of the OSEP-funded State Personnel Development Grant (SPDG) Evaluation Task Force to ensure early intervention Part C interests are represented and SPDG evaluation reports are consistent with Early Start services.

DDS and WestEd attended the SEECAP Symposium February 28 and 29, 2012, including sessions on the new Part C regulations, the neuroscience of reflective practice, using digital video to transform early intervention and early childhood education, quality early learning, using technology to enhance professional development, and coaching strategies for new administrators.

West Ed partnered with DDS to present technical training workshops throughout the state on natural environments, IFSP process and other topics.

- *Birth to Three*: To stay abreast on current best-practice strategies and cutting edge research for the birth-to-three population, attended and facilitated meetings and chaired graduate fellow events at the Zero to Three National Training Institute December 8–11, 2011, in Washington, D.C. Topics included the ACE study, the Bucharest Project, and advances since the release of *Neurons to Neighborhoods* 12 years ago. Staff also participated at the annual Zero-to-Three Scientific Meeting in Washington, D.C. featuring a coaching approach to the online teaching model *My Teaching Partner*, the CLASS observation and assessment tool, and implementation of the *My Teaching Partner* model. Staff also chaired the Zero-to-Three graduate fellow events.
- *Help Me Grow*: Coordinated an approach to early identification and links to services for young children. California is one of 16 states selected to receive technical assistance to replicate this model. Already in place in

Orange County, Alameda, and Fresno counties are now implementing this model of early identification through partnerships with RCs, FRCs, and health and education agencies. Plans are in place for a learning community during 2012–2013 for counties interested in learning more about Help Me Grow. Staff participated in site visits, tours, and discussions of screening, referral, data collection, physician outreach, and community training.

- *Statewide Screening Collaborative:* Partnered with the California Department of Public Health/Maternal, Child & Adolescent Health to coordinate and facilitate the Statewide Screening Collaborative (SSC), an interagency group formed to enhance the capacity of the state to promote and deliver effective and well-coordinated health, developmental, and early mental health screenings throughout California. The SSC works to identify and address service gaps by improving the synergies among state programs involved in recognition and response activities and adopting a common language, standard tools and screening protocols for families and children that affect healthy childhood development. The Screening Collaborative also serves as the advisory board for Help Me Grow California.
- *Strengthening Families Roundtable:* Participated in this interagency group that promotes the five protective factors in interagency work, personnel development, and parent engagement. Meeting participants include state and county representatives of First 5, resource and referral agencies, higher education, and FRCs.
- *Center for Social Emotional Foundations for Early Learning (CSEFEL):* Represented early intervention/ Part C Early Start on the California State Leadership Team for CSEFEL with consultation from the national SEFEL center at Vanderbilt University, which is focused on strengthening the capacity of child care and Early/Head Start programs to serve children with special needs in this area.
- *NECTAC/Early Childhood Outcomes Center-Sponsored Conference Calls:* Participated in calls related to the SPP and APR child outcomes indicators. NECTAC representatives discussed suggested formats for providing progress data and discussed examples of revised SPPs. The work has implications for data collection efforts, preparation of the focused monitoring manual and process, ICC committee support, and Early Start training priorities such as the Advanced Practice Institute and the Regional Center Managers' Symposium.
- *Infant Development Association (IDA):* Presented a workshop, Utilizing Evidence-Based Practice in Early Childhood Programs, at the IDA conference in Sacramento, CA on September 23, 2011 and at the

southern conference on April 20, 2012. The workshop reviewed the components of evidence-based practice and implementation science. Participants were service providers and service coordinators from the RC and education systems.

- *Occupational Therapy Association*: At the annual conference in Sacramento on October 15, 2011, presented a workshop on Writing Functional Outcomes in Early Intervention for occupational therapists.

# **ATTACHMENT B**

## **ICC Annual Activities Report**

**CALIFORNIA INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION  
Annual Activities for FY 2011-2012**

*“Together We Make A Difference”*

<b>ICC General Meeting Activities</b>	
<b>Action Items-These are items or business that require approval by ICC Members</b>	<p>Action Items</p> <ul style="list-style-type: none"> <li>• Approved 2011 Annual Activities Report which summarized advice and assistance provided to the lead agency during FFY 2011-2012.</li> <li>• Approved the ICC meeting dates for 2012.</li> <li>• Family Resource Center Network of California granted voting membership by the Council.</li> </ul>
<b>Public Input</b>	<p>Public input was received from parents, professionals and/or others interested in early intervention services. Input was documented and can be found in the ICC minutes. Public input trends were analyzed and presented to the ICC for consideration.</p>
<b>Family Resource Centers Network of California (FRCNCA)</b>	<ul style="list-style-type: none"> <li>• Reported quarterly on various statewide family support activities.</li> <li>• Reported quarterly on Prevention Resource &amp; Referral Service (PRRS) activities.</li> </ul>

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*“Together We Make A Difference”*

<b>ICC General Meeting Activities (Continued)</b>	
<b>State Agency Reports on fiscal and program policies affecting young children</b>	Agency reports centered around the budget crisis and the potential impact on services for young children. Details are available in the ICC minutes.
<b>Special Presentations</b>	<p>The following presentations were made to the ICC:</p> <ul style="list-style-type: none"> <li>• <i>Through Your Child’s Eyes: American Sign Language</i>-Presented by Nancy Sager, CDE.</li> <li>• <i>Center for Social &amp; Emotional Foundations in Early Learning</i>-Presented by Linda Brault,</li> <li>• <i>New Part C Regulations</i>-Presented by Jeannie Smalley, DDS.</li> <li>• <i>Part C Annual Performance Report (APR) FFY 2010</i>-Presented by Erin Paulsen, DDS.</li> <li>• <i>A Tour of the Early Start Report</i>-Presented by Michele Donahue, DDS.</li> <li>• <i>Office of Homeless Education</i>-Presented by Leanne Wheeler, CDE.</li> </ul>
<b>2011 ICC Parent Leadership Award - Annual recognition by the ICC of individuals who make a difference in their Early Start community.</b>	The recipient of the 2011-2012 ICC Parent Leadership Award was Diane Simon Smith. Ms. Smith is a family therapist from Woodland Hills, CA, who specializes in marriage and family counseling to those families with infants and toddlers with developmental disabilities. She is also the parent of two adult sons with developmental disabilities. This unique blend of professional and personal expertise made Ms. Smith the outstanding candidate for the award.

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*“Together We Make A Difference”*

<b>Executive Committee Activities</b>	
<p><b>Specific Priorities developed by the ICC over the course of FFY 2011-2012 included a combination of unfinished work from the FFY 2010-2011 strategic planning year and new items developed in FFY 2011-2012.</b></p>	<p>Priority areas:</p> <ul style="list-style-type: none"> <li>• Data Collection and Analysis.</li> <li>• Child &amp; Family Outcomes.</li> <li>• Issues: Transition, Natural Environments, Surrogacy.</li> <li>• Comprehensive System of Personnel Development</li> <li>• ICC Recruitment.</li> <li>• New Part C Regulations.</li> </ul>
<p><b>Strategic Planning for Standing Committees</b></p>	<p>Identification of strategic items:</p> <ul style="list-style-type: none"> <li>• ICC outreach &amp; recruitment needs.</li> <li>• Development of Speech and Language Pathology Assistant work group and best practices guidelines.</li> <li>• Restructuring of the standing committees to accommodate relevancy.</li> </ul>
<p><b>Other Business</b></p>	<p>Discussion &amp; Activities:</p> <ul style="list-style-type: none"> <li>• Under Representation &amp; Outreach Work Group made the following recommendations:               <ul style="list-style-type: none"> <li>○ Recruited new ICC members and community representatives.</li> <li>○ Added language to by-Laws addressing required attendance/participation.</li> <li>○ Facilitate public input/participation...</li> <li>○ Addressed barriers to/provide supports for participation.</li> </ul> </li> </ul>

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<b>Standing Committee Activities</b>	
<b>Policy Topics Committee (PTC)</b>	<p>Discussions &amp; Assignments:</p> <ul style="list-style-type: none"> <li>• Developed the draft document, <i>Guidance for Early Start Service Coordinators to Request Authorization for Private Insurance</i>. This draft document was developed to provide guidance to service coordinators at the regional centers in assisting families in obtaining authorization from their (private) insurance companies for payment of Early Start services. In the future, the document will be expanded upon to include a guide for parents and other individuals. This draft document is currently under review. Discussed strategies for disseminating information about the new PRRS to the community.</li> <li>• Developed 3-5 strategic items for ICC to focus on in FFY 2011-2012:             <ul style="list-style-type: none"> <li>○ Recommended development of best practices guidance for regional centers on the appropriate use of Speech &amp; Language Pathology Assistants (SLPAs)</li> <li>○ Recommended recruitment strategies of parents to serve as members on the ICC.</li> <li>○ Recommended review of new Part C regulations and the potential impact on the draft document: <i>Guidance for Early Start Service Coordinators to Request Authorization for Private Insurance</i>.</li> </ul> </li> </ul>

**CALIFORNIA INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION  
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<b>Standing Committee Activities (Continued)</b>	
<b>Child &amp; Family Outcomes Committee (CFOC)</b>	<p>Discussions &amp; Assignments:</p> <ul style="list-style-type: none"> <li>• Continued focus on the following indicators to augment Annual Performance Report (APR):               <ul style="list-style-type: none"> <li>○ Indicator 4 (Family Outcomes)</li> <li>○ Indicator 7 (Timely Evaluation &amp; Assessment)</li> <li>○ Indicator 13 (Mediation Agreements)</li> </ul> </li> <li>• Recommended that the Family Resource Center Network of California (FRCNCA) become a voting member on the Council.</li> <li>• Administrated Parent Leadership Award application process and selection of 2011 ICC Parent Leadership Award to Diane Simon Smith.</li> <li>• Reviewed recruitment &amp; retention of ICC parent involvement and identified recruitment strategies.</li> <li>• Continued review of two programs serving the birth to three population, Prevention Program and PRRS.</li> <li>• Recommended that clarification be developed on the issue of consents governing the educational rights of children as they enter the foster care system.</li> <li>• Provided feedback on the ICC Annual Activities Report for FFY 2010.</li> </ul>

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<b>Standing Committee Activities (Continued)</b>	
<b>Quality Data Committee (QDC)</b>	<p>Discussions &amp; Assignments</p> <ul style="list-style-type: none"> <li>• Reviewed complaints and mediation (Indicators 10 &amp; 13) from APR. Reviewed data trends to ascertain possible reasons for hearings.</li> <li>• Reviewed data trends surrounding PRRS.</li> <li>• Reviewed ESR as a data source for the APR.</li> <li>• Review of diagnostic categories which qualify a child for Early Start services to formulate ideas about possible trends that exist in the data presented.</li> <li>• Viewed presentation by John Redman, DDS, who discussed the data collection methods used to build supporting data for APR Indicators 10 (Complaints) and 13 (Mediation).</li> <li>• Discussed new strategic items of ICC recruitment and development of Speech &amp; Language Work Group.</li> <li>• Continued focused review of APR Indicators which govern social and emotional development:             <ul style="list-style-type: none"> <li>○ Indicator 1 (Timely Services)</li> <li>○ Indicator 7 (Timely Evaluation &amp; Assessment)</li> <li>○ Indicator 8 (Transition)</li> </ul> </li> <li>• Reviewed ESR in light of what is</li> </ul>

**CALIFORNIA INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION  
Annual Activities for FY 2011-2012**

***“Together We Make A Difference”***

<b>Standing Committee Activities (Continued)</b>	
<b>Quality Data Committee (QDC)-Continued</b>	<p>currently being offered in training and technical assistance needs and how feedback can be included in on-line training courses and institutes.</p> <ul style="list-style-type: none"> <li>○ Reviewed and analyzed how the monitoring process has been modified with the advent of the ESR.</li> <li>○ Reviewed and provided feedback on draft ICC Public Input form.</li> </ul>
<b>Qualified Personnel Committee (QPC)</b>	<p>Discussions &amp; Assignments:</p> <ul style="list-style-type: none"> <li>● Reviewed ongoing responsibilities related to Comprehensive System of Personnel Development: <ul style="list-style-type: none"> <li>○ Viewed and provided feedback on presentation by Angela McGuire, WestEd, on newly developed <i>Early Start Foundations</i>, an institute for participants of online training.</li> <li>○ Recommended that infant/family mental health be considered for online training.</li> </ul> </li> <li>● Reviewed and summarized monitoring reports in light of what is currently being offered in training and technical assistance, and how feedback can be included in on-line training courses and institutes.</li> </ul>

**CALIFORNIA INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION  
Annual Activities for FY 2011-2012**

***“Together We Make A Difference”***

<b>Standing Committee Activities (Continued)</b>	
<b>Qualified Personnel Committee (QPC)-Continued</b>	<ul style="list-style-type: none"><li>• Reviewed and summarized public input in light of what is currently being offered in training and technical assistance, and how feedback can be included in on-line training courses and institutes.</li><li>• Discussed strategies to recruit ICC nominees and encourage Governor to make appointments</li><li>• Reviewed and provided feedback on the draft ICC Public Input form.</li><li>• Reviewed ESR.</li><li>• Reviewed and questioned how the monitoring process has been modified with the advent of the ESR</li></ul>

**CALIFORNIA INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION**  
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**ANNUAL REPORT CERTIFICATION OF THE INTERAGENCY COORDINATING COUNCIL UNDER PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)**

Under IDEA Section 641(e)(1)(D) and 34 CFR §303.604(c), the Interagency Coordinating Council (ICC) of each jurisdiction that receives funds under Part C of the IDEA must prepare and submit to the Secretary of the U.S. Department of Education (Department) and to the Governor of its jurisdiction an annual report on the status of the early intervention programs for infants and toddlers with disabilities and their families operated within the State. The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) provide this certification with the State lead agency's Annual Performance Report (APR)<sup>1</sup> under Part C of the IDEA. This certification (including the annual report or APR) is due no later than February 15, 2013.

On behalf of the ICC of the State/jurisdiction of California, I hereby certify that the ICC is: [please check one]

1.  Submitting its own annual report (which is attached); or
2.  Using the State's Part C APR for FFY 2011 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C APR for accuracy and completeness.<sup>2</sup>

I hereby further confirm that a copy of this Annual Report Certification and the annual report or APR has been provided to our Governor.

*Jhousa A. Rossini*

Signature of ICC Chairperson

02/15/2013

Date

504 Barringham Lane

Modesto, CA 95350

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Daytime telephone number

<sup>1</sup> Under IDEA Sections 615(b)(2)(C)(i)(II) and 642 and under 34 CFR §80.40, the lead agency's APR must report on the State's performance under its State performance plan and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

<sup>2</sup> If the ICC is using the State's Part C APR and it disagrees with data or other information presented in the State's Part C APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 15, 2013.