

**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 §303.654, 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)¹ under Part C of the IDEA. This certification (including the annual report or APR) is due no later than February 2, 2009.

On behalf of the ICC of the State/jurisdiction of Connecticut, 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 2007 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.²

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

Mark A. Green
Signature of ICC Chairperson

12/1/08
Date

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Address or e-mail

Daytime telephone number

1 Under IDEA Sections 616(b)(2)(C)(ii)(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).

2 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 2, 2009.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Throughout this document years are represented as '06-'07 representing the calendar year of July 1 of the first year ('06) to June 30 of the last year ('07) regardless of the federal fiscal year.

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Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

A stakeholders’ meeting was held on December 1, 2008 to review the proposed APR. The updated APR was also made available to all early intervention programs and parent groups and input was gathered at three statewide meetings during December, 2008. In December, the draft revised APR and SPP were posted on Birth23.org. Revisions were discussed during a conference call with stakeholder in January 2009.

In addition to having Connecticut stakeholders review and revise the draft APR, the lead agency received thorough and helpful reviews from the National Early Childhood Technical Assistance Center (NECTAC), the North East Regional Resource Center (NERRC) as well as staff from the Data and Accountability Center (DAC) and the Early Childhood Outcomes center (ECO).

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

Account for untimely receipt of services.

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	100%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

$$(2246 + 84) / 2369 = .98 \times 100 = 98\% -$$

Connecticut has made progress since the ‘05-’06 year (baseline 97%) and the ‘06-’07 year (97%).

On 6/15/08 there were 4271 children with IFSPs in Part C. Only 2369 of those children had at least one NEW service listed on their current IFSP. 2246 children received timely services (within 45 days from parent consent.) An additional 84 children received at least one service late due to a documented exceptional family circumstance beyond the control of the lead agency. The 84 were added to the numerator for a total of 2330 and kept the denominator.

This data was verified using emails to programs, data verification visits, focused monitoring, self-assessments, and the public reporting of data. In addition, as described more fully in the SPP and previous APR, Connecticut’s real-time Birth to Three Data System contains built-in

reports, edit checks and alerts as well as a real-time “performance dashboard” that is available to local programs and lead agency. Based on user selected date ranges, the performance dashboard runs summaries by APR indicator and produces exception reports.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

There were 37 children remaining with at least one late service not due to documented extraordinary family circumstances. For the most part these were also beyond the control of the lead agency. The breakout by reason with ranges in days includes:

- 18 – due to staff related issues including illness, vacation, maternity/paternity leave, unanticipated staff turnover, coordinating team visits, and sub-contractor challenges (range 47 - 110 days),
- 16 - due to program error in understanding that it is 45 days from the IFSP meeting not from the projected start date as well as confusion about what counts as a *new* service (46 – 89 days), and
- 3 - due to delays in obtaining the primary physician’s signature on the IFSP which is required in CT before new services can begin (range 53 - 126 days),

Connecticut has ensured that all children and families who did not receive the new services on their IFSPs within timelines ultimately received the service.

The timeline related child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively. The state's efforts to prevent future non-compliance are described below."

The only late service for 14 of the 37 children with late services (38%) was a visit scheduled to occur only 1 time per month. A missed new service was considered late (beyond 45 days) even if the families did not accept the offer to make-up the visit before the next month’s visit. Programs were notified to pay closer attention to monthly visits.

The 37 children with at least one late service (not due to documented family circumstances) were enrolled in seven different programs. A root cause analysis revealed that of these 7 programs, one had its Birth to Three program director and fiscal director leave to start a new Birth to Three program that was selected in response to an RFP. A number of staff left the original program between developing IFSPs and beginning services. This affected nine of the 37 children. Sixteen children were served by the largest program in the state (during the '07-'08 year) with a corrective action plan (CAP) in place. Sixteen is an improvement for this program which also had a change in the program director just prior to developing the CAP. A third program had six children with at least one late new service. The remaining four programs had fewer than two children with a late service and all late services were only once per month services.

NOTE: Since the periodic reviews of IFSPs may occur very frequently or may span the full 6 months permitted by IDEA, the measurement, correction and subsequent verification of correction of systemic noncompliance for this indicator is very complex. Sufficient time must pass to assure that the same IFSPs are not being reviewed twice. For example:

According to the Part C APR FAQ dated 9/14/06 which was distributed at the National Accountability Conference, and posted at <http://spp-apr-calendar.rfcnetwork.org/search/results/page/2/sort/default/query/FAQ> (dated 1/15/08) states were informed that a “point in time” may be used for this indicator to determine whether all NEW services on those IFSPs are provided in a timely manner. Connecticut used 6/15/08 for this APR. That

point in time includes ALL children with initial IFSPs or periodic reviews that were in effect on 6/15/08. This means that for one of the children in that cohort, the IFSP meeting could have been held on 6/14/08 or as far back as 12/16/07 (six months before 6/15/08.) If a program wants to demonstrate systemic correction they have no option other than to wait 6 months until 12/15/08 to run their data in order to avoid using IFSPs already analyzed on 6/15/08. This is because for ALL children with IFSPs in effect on 12/15/08, periodic reviews could have occurred as far back as 6/16/08. Any point in time prior to 12/15/08 would overlap the 6 month period between 12/16/07 and 6/15/08. While Connecticut procedures support that ALL new services for ALL children should begin in a timely manner; it is important to acknowledge the complexity of this measurement.

Response to OSEP letter and table regarding FFY06 APR

“In addition, in responding to Indicators 1, 7, and 8C, the State must specifically identify and address the noncompliance identified in this table under those indicators.”

Number of findings made during the '06-'07 year about this measure	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were verified/corrected	Number of findings made during the '07-'08 year about this measure
5	5	NA	10
Number of findings made during the '06-'07 year about requirements related to this indicator	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were verified/corrected	Number of findings made during the '07-'08 year about requirements related to this indicator
5	4	November '07	5

Focused Monitoring

Of the five programs that received a focused monitoring on-site visit in the '06-'07 year using the Service Delivery priority area protocol, three had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. The lead agency canceled its contract with one program after a data verification visit completed in February, 2008. One program had two findings; both of which were corrected within one year and the third program only had one finding. That one finding (all periodic reviews occur at mandated times) was corrected 16 months from identification which was July 15, 2006 - November 1, 2007. The delay in reporting correction was an oversight on the part of the provider. No CAP or TA was required. (See Indicator 9 for the total number of findings.)

Programs were grouped and ranked in December 2007 based on this indicator. One program was selected for an on-site visit using the Service Delivery priority area protocol. That visit did not occur until August 2008 as a result of scheduling Connecticut's external evaluation of its Focused Monitoring System. In addition, the Data Verification visit and contract cancellation mentioned below required substantial resources from the lead agency.

Birth to Three Data System

The data system was modified to permit a real-time analysis of this data at the program level using a “performance dashboard” interface.

Data Verification

Each time the Focused Monitoring rankings and annual reports were run, lists were sent to each program asking them to verify the data in the report. If the service was actually late, the program was required to explain the reason and to identify when the service began.

A data verification visit was completed in February 2008 to a program that had received a Focused Monitoring visit in the '06-'07 year using the Service Delivery protocol. There were a number of findings from the Focused Monitoring visit, and the program reported that correction was made within one year. This was the third time this program's self – assessment and reported correction could not be verified by the lead agency and so in February the contract was canceled.

Biennial Performance Report (BPR)

This indicator was added to the revised BPR in August 2007. Of the nine programs that completed a Biennial Performance Report in the '06-'07 year, three had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. All three programs corrected all identified non-compliance within one year. (See Indicator 9 for the total number of findings.)

Fifteen programs completed a BPR in the '07-'08 year. Six of the 15 had at least one finding of non-compliance identified due to be corrected in the '08-'09 year based on the IDEA requirements determined to be related to this indicator.

Public Reporting of APR Data

The data for this indicator were posted by program in February 2008 on Birth23.org. In addition, data reports were routinely shared with the ICC.

Complaints

There were 4 written complaints in the '06-'07 year. Two of the 4 were related to the timely provision of IFSP services. Two findings were made, both were all child-specific and were all timely corrected.

Determinations

Two programs were determined to need assistance in Spring 2008 in part based on this indicator. Corrective action plans were developed to identify clear steps and timelines for correction.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

Biennial Performance Report (BPR)

The entire BPR will be reviewed and modified in '08-'09 once Cohort II completes their self-assessments in September 2008.

Birth to Three Data System

Connecticut is beginning to develop a new web-based data system and the new build will include enhancements for tracking and monitoring this indicator.

Public Reporting of APR Data

Findings were identified based on this data in the '08-'09 year. The data by program for this indicator will be posted in February 2009 on Birth23.org and shared with the ICC throughout the year.

Determinations

Determinations will be made in March 2009 and this will continue to be an indicator used in that process.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	95%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

Below is from the 618 setting tables submitted for children with IFSPs on December 1, 2007.

PRIMARY SETTING OF INFANTS AND TODDLERS, AGES BIRTH THROUGH 2	
	(3939+220)/4182 = 99%
TOTAL (ROWS 1-3)	4182
1. HOME	3939
2. COMMUNITY-BASED SETTING	220
3. OTHER SETTING*	23

Connecticut maintains a high percentage since the '04-'05 year (baseline 99%), the '05-'06 year (99%) and the '06-'07 year (99%).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

Focused Monitoring (FM)

The location of services, including the extent to which strategies are embedded into daily routines, is part of the FM protocols. As reported last year, one program monitored in the '06-'07 year was found to be providing services in a day-care center but the service was performed in a "motor room" and there were no justifications in the IFSPs. This resulted in a finding of non-compliance with individual child correction due by 8/1/07 and systemic correction due by 5/31/08. Program improvement strategies included revising the IFSPs, and submitting copies of all justifications as required. The program's service data, submitted

to the lead agency with their invoice, were analyzed for services provided in the community and the IFSP was reviewed. Systemic non-compliance was corrected within one year. This finding is included in Indicator 9.

Biennial Performance Report (BPR)

Of the nine programs that completed a Biennial Performance Report in the '06-'07 year, none had any findings of non-compliance identified based on the IDEA requirements determined to be related to this indicator.

Fifteen programs completed a BPR in the '07-'08 year. None of the 15 had any findings of non-compliance identified based on the IDEA requirements determined to be related to this indicator due to be corrected in the '08-'09 year.

Public Reporting of APR Data

The data for this indicator were posted by program in February 2008 on Birth23.org. In addition, data reports were routinely shared with the ICC.

Correction of Identified Non-compliance

As described above there was one finding that was timely corrected

Number of findings made during the '06-'07 year about this measure	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
1	1	NA	0
Number of findings made during the '06-'07 year about requirements related to this sub-indicator	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this sub-indicator
0	0	NA	0

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

Connecticut met its target, no revisions or justifications are required.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development: Same as described in Indicator #1.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

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

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

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

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

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

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

C. Use of appropriate behaviors to meet their needs:

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

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

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	NA

CHILD Progress Data for FFY07 (July 1, 2007-June 30, 2008):

Out of 4665 children who exited in the '07-'08 year, 2097 entered Birth to Three after 1/1/06 when data collection began. 1694 of those had at least six months between their first service and exit dates. Those 1694 children are represented below. This has also been included in the Connecticut [Part C SPP – REVISED 2008 posted on birth23.org](http://www.birth23.org)

Outcome A (Positive social-emotional skills)	Number	Percentage
a: Children who did not improve functioning	7	<1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	127	7%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	637	38%
d: Children who improved functioning to reach a level comparable to same-aged peers	741	44%
e: Children who maintained functioning at a level comparable to same-aged peers	182	11%
total	1694	100%

APR Template – Part C (4)

Connecticut
State

Outcome B (Acquisition and use of knowledge and skills)	Number	Percentage
a: Children who did not improve functioning	3	<1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	128	8%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	592	35%
d: Children who improved functioning to reach a level comparable to same-aged peers	836	49%
e: Children who maintained functioning at a level comparable to same-aged peers	135	8%
total	1694	100%

Outcome C (Use of appropriate behaviors to meet their needs.)	Number	Percentage
a: Children who did not improve functioning	6	<1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	124	7%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	581	34%
d: Children who improved functioning to reach a level comparable to same-aged peers	876	52%
e: Children who maintained functioning at a level comparable to same-aged peers	107	6%
total	1694	100%

The accountability and monitoring manager presented an analysis of preliminary data at the Early Childhood Conference in December, 2007. Connecticut routinely participates in the ECO COSF community of practice. Below is a **very preliminary** analysis of this data and how the 5 levels of measurement relate to each other. NOTE: the age at referral for the 1694 children ranges only from 0 to 28 months.

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

Proposed Summary Statement 1: Of those children who entered the program below age expectations in each outcome area, the percent that substantially increased their rate of growth by the time they exit the program $(((c) + (d)) / ((a) + (b) + (c) + (d))) \times 100 = \%$

$$(637+741) / (7+127+637+741) = .91 \times 100 = \mathbf{91\%}$$

Proposed Summary Statement 2: The percent of children who are functioning within age expectations by the time they exit the program $(((d)+(e)) / ((a)+(b)+(c)+(d)+(e))) \times 100 = \%$

$$(741 + 182) / (7+127+637+741+182) = .54 \times 100 = \mathbf{54\%}$$

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

Proposed Summary Statement 1: Of those children who entered the program below age expectations in each outcome area, the percent who substantially increased their rate of growth by the time they exit the program $(((c) + (d)) / ((a) + (b) + (c) + (d))) \times 100 = \%$

$$(592+836) / (3+128+592+836) = .92 \times 100 = \mathbf{92\%}$$

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

Proposed Summary Statement 2: The percent of children who are functioning within age expectations by the time they exit the program $(((d)+(e)) / ((a)+(b)+(c)+(d)+(e))) = X 100 = \%$

$$(836 + 135) / (3+128+592+836+135) = .57 \times 100 = \mathbf{57\%}$$

C) Use of appropriate behaviors to meet their needs

Proposed Summary Statement 1: Of those children who entered the program below age expectations in each outcome area, the percent who substantially increased their rate of growth by the time they exit the program $(((c) + (d)) / ((a) + (b) + (c) + (d))) \times 100 = \%$

$$(581+876) / (6+124+581+876) = .92 \times 100 = \mathbf{92\%}$$

Proposed Summary Statement 2: The percent of children who are functioning within age expectations by the time they exit the program $(((d)+(e)) / ((a)+(b)+(c)+(d)+(e))) = X 100 = \%$

$$(876 + 107) / (6+124+581+876+107) = .58 \times 100 = \mathbf{58\%}$$

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

NOTE: Even though Connecticut started collecting this data earlier than many states (Jan. 1, 2006), there will not be a full three-year cohort until January 1, 2009 which will already be halfway into the '08-'09 year.

Connecticut presented with Minnesota's 619 coordinator about analyzing the quality of the child outcome data at the Annual DEC conference in October 2008. In addition, Connecticut teamed with ECO and NECTAC, California and Minnesota to lead a pre-conference session at the OSEP Early Childhood Conference in December 2008. This was followed by a working session to show states basic tables to run to check the quality of their data.

Data Verification

Meetings were held with all programs in September 2007 to review how teams include families when using the curriculum embedded assessments, the Early Childhood Outcomes (ECO) Center's crosswalks, the ECO Center decision tree and the Child Outcome Summary Form (COSF). Thirty-nine programs had at least one child in Birth to Three for at least six months who exited in the '07-'08 year and all 39 programs reported entry and exit data for at least one child. The range of number of children per program was from 1 (new programs) to 179 children. The percent by program of all children who had been in Birth to Three at least 6 months and who exited with two sets of COSF scores ranged from 13-100% with an average of 68%, a median of 73%. This data was collected on ALL children who exited during the fiscal year regardless of reason. 206 (12%) of the 1964 exited before age 3 for reasons other than completion of the IFSP therefore a range around 88% participation could be acceptable.

Biennial Performance Report (BPR) Two measures were added to the revised BPR to capture whether the data are entered in a timely manner and whether the scores are based in part on a curriculum embedded assessment.

Public Reporting of APR Data

The entry data by program for this indicator was posted in February 2008 on Birth23.org. In addition, data reports were routinely shared with the ICC.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

The lead agency will work with programs that have low participation rates to explore the reasons.

Once a full and reliable three-year cohort has been collected we will analyze the results based on length of enrollment, ICD9 codes, as well as levels and types of services.

Part C State Annual Performance Report (APR) Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

The process for analyzing a group of surveys representative of the Target Group (618 Table 1A from the '07-'08 year APR year) was the same as the previous two years.

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.

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	4a) 83% 4b) 80% 4c) 91%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

Using the Rasch analysis, the percent of families who met the target are listed by both the total number of respondents (Response Pool) and a randomly selected representative sample that was adjusted for race/ethnicity representation. Note that CT is choosing to use the results from the Representative Sample which a cross tabulation of the 618 race/ethnicity X gender.

FY08 Family Outcome	Response Pool (N=772)	Representative Sample (N=530)
4a (know my rights)	82% (631)	81% (427)
CI at 95%CL	79%-84%	77% - 84%
SD / Standard Error	39% / 1%	41% / 2%

FY08 Family Outcome	Response Pool (N=772)	Representative Sample (N=530)
4b (communicate about my child)	79% (612)	79% (417)
CI at 95%CL	76%-82%	75% - 82%
SD / Standard Error	41% / 2%	41% / 2%

FY08 Family Outcome	Response Pool (N=772)	Representative Sample (N=530)
4c (help me help my child)	91% (705)	91% (480)
CI at 95%CL	89%-93%	88% - 93%
SD / Standard Error	28% / 1%	29% / 1%

Using A) 81-82%, B) 79% and C) 91% Connecticut did not meet the targets set last year for outcomes A) and B). However, Connecticut continues to make progress since the '05-'06 baseline year (A) 73%, B) 71%, C) 84%), and the '06-'07 year (A) 80%, B) 77%, C) 88%).

The calibration was based on Connecticut's '07-'08 year baseline results and is slightly different than the other states' and NCSEAM pilot states' values. The survey has not changed since the SPP was submitted and a copy is attached to the FFY2005 SPP and the FFY2006 APR.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

The total number of families whose eligible children had IFSPs on 3/1/08 was 4172.

The total number of families whose children who had been in Birth to Three for at least 6 months on 3/1/08 was 1948. Therefore, using a census model, surveys were sent out to 1948 families.

772 completed surveys were returned.

This return rate equals 40% which is lower than last year by 1% despite two strategies to increase the return rate.

- a) books were given to all families who completed a survey – this had no apparent impact.
- b) seven programs piloted having families return their completed surveys in a sealed envelope to their home visitor. This had an impact as the return rate for the seven programs was 54% (207/384) as opposed to the remaining programs where families mailed their surveys directly to the lead agency with a return rate of 36% (565/1564)

Even though Connecticut used a census model, unless every survey is completed and returned, the results will never truly be 100% representative. In addition, the families to whom surveys were sent might not match the make-up of the child count data submitted to OSEP on 2/1/08 for children with IFSPs on 12/1/07.

Therefore, the tables that follow walk the reader through the process used in Connecticut to develop a group of surveys that are representative of the '07-'08 year Section 618 of IDEA - Table 1A child count data which in Connecticut is referred to as the Target Group.

Target Group (618 Table 1A) - Race/Ethnicity x Child Count (N=4182)

Race/Ethnicity	Total	% of Total	F	% of total	% of R/E	M	% of total	% of R/E
American Indian or Alaskan Native	10	0.2%	3	30.0%	0.2%	7	0.2%	0.3%
Asian or Pacific Islander	102	2.4%	50	49.0%	3.4%	52	1.2%	1.9%
Black (Not Hispanic)	452	10.8%	171	37.8%	11.6%	281	6.7%	10.4%
Hispanic	941	22.5%	322	34.2%	21.8%	619	14.8%	22.9%
White (Not Hispanic)	2677	64.0%	928	34.7%	63.0%	1749	41.8%	64.6%
Totals	4182		1474	35.2%	100.0%	2708	64.8%	100.0%

The next table shows the breakout for all the children whose families were sent surveys. In the case of siblings and multiples, the race/ethnicity and gender of the first child enrolled was used. This group is called the Census since, as mentioned above; all families with children in Birth to Three for at least 6 months by 3/1/08 were given surveys.

Census - Race/Ethnicity x Gender Crosstab (N=1948)

Race/Ethnicity	Total	% of Total	Female	% of total	% of R/Eth	Male	% of total	% of R/Eth
American Indian or Alaskan Native	3	0.2%	3	100.0%	0.4%	0	0.0%	0.0%
Asian or Pacific Islander	50	2.6%	29	58.0%	4.0%	21	42.0%	1.7%
Black (Not Hispanic)	202	10.4%	75	37.1%	10.4%	127	62.9%	10.4%
Hispanic	430	22.1%	159	37.0%	22.0%	271	63.0%	22.1%
White (Not Hispanic)	1263	64.8%	456	36.1%	63.2%	807	63.9%	65.8%
Totals	1948		722	37.1%	100.0%	1226	62.9%	100.0%

This next table shows the breakout for the completed surveys that were returned. In Connecticut this is referred to as the Response Pool.

Response Pool - Race/Ethnicity x Gender Crosstab (N=772)

Race/Ethnicity	Total	% of Total	Female	% of total	% of R/Eth	Male	% of total	% of R/Eth
American Indian or Alaskan Native	2	0.3%	2	100.0%	0.7%	0	0.0%	0.0%
Asian or Pacific Islander	23	3.0%	13	56.5%	4.7%	10	43.5%	2.0%
Black (Not Hispanic)	57	7.4%	17	29.8%	6.1%	40	70.2%	8.1%
Hispanic	128	16.6%	44	34.4%	15.9%	84	65.6%	17.0%
White (Not Hispanic)	562	72.8%	201	35.8%	72.6%	361	64.2%	72.9%
Totals	772		277	35.9%	100.0%	495	64.1%	100.0%

Finally, the data that Connecticut feels is the most representative is based on a sample pulled from the Response Pool. This is referred to as the Representative Sample group.

Random Representative Sample - Race/Ethnicity x Gender Crosstab (N=530)

Race/Ethnicity	Total	% of Total	Female	% of total	% of R/Eth	Male	% of total	% of R/Eth
American Indian or Alaskan Native	2	0.4%	2	100.0%	1.1%	0	0.0%	0.0%
Asian or Pacific Islander	13	2.5%	4	30.8%	2.2%	9	69.2%	2.6%
Black (Not Hispanic)	57	10.8%	17	29.8%	9.2%	40	70.2%	11.6%
Hispanic	119	22.5%	42	35.3%	22.8%	77	64.7%	22.3%
White (Not Hispanic)	339	64.0%	119	35.1%	64.7%	220	64.9%	63.6%
Totals	530		184	34.7%	100.0%	346	65.3%	100.0%

Since the gender of children in the response pool was representative of the target population, separate samples for race/ethnicity and gender were not drawn.

Connecticut's Part C accountability and monitoring manager was asked to present this approach at the Early Childhood Conference in August, 2008.

Response to OSEP letter and table regarding FFY06 APR

In the '05-'06 year, the '06-'07 year, and the '07-'08 year APRs, Connecticut reported the total number of surveys returned and the response rate. Please review them and the related [SPPs](#) for more detail.

Data Verification

If any surveys were received with all negative responses and no comments or all positive responses and all very negative comments, a call was made to the family to verify the responses. In 9 out of 9 cases the parents were not dissatisfied but they had simply reversed the order of the response columns and requested that their survey be corrected.

Each program was given a two year compilation of their performance for each measure along with the statewide performance. De-identified comments were also given to programs.

Public Reporting of APR Data

The data by program for this indicator was posted in February 2008 on [Birth23.org](#). In addition, data reports were routinely shared with the ICC.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

The targets were adjusted statistically in the last [SPP](#) based on the new results. In research, targets should be set each year based on the current year's data to assure that the change is at least a significant increase. The changes in targets from the '06-'07 year [SPP](#) to the '07-'08 year [SPP](#) may have been too great. Since there were only two data points, a trend could not be established. This year however there were three data points and a trend analysis was completed. All the options were presented to stakeholders who ultimately chose not to revise the targets. So for the '08-'09 year the targets remain;

4a) 83%, 4b) 80% 4c) 91%.

Birth to Three Data System

The data system is now capturing the new ethnicity and race categories. This may impact the calculations of representativeness now that "more than one" is going to be one of the reporting categories.

Biennial Performance Report (BPR)

Now that the state has three years of results to look at trends, a group of stakeholders will meet to revise/update the BPR in the '08-'09 year. More emphasis will be placed on family outcome items that have consistently produced low percentages.

Public Reporting of APR Data

The data by program for this indicator will be posted in February 2009 on [Birth23.org](#) and shared with the ICC through the year.

(A sample of the survey used is attached to the [SPP](#) as Appendix 1)

**Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007
Overview of the Annual Performance Report Development:**

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measurement:

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

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	1.2%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

Below is part of the 618 table submitted for children with IFSPs on December 1, 2007.

A.1. AGE AND RACE/ETHNICITY OF INFANTS AND TODDLERS, AGES BIRTH THROUGH 2

	Total	Birth to 1 (0 to <12 months)	Census Population 0 only	Percent
TOTAL	4182	392	41785	0.94%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

Connecticut now ranks 6th among 16 states and territories with narrow eligibility definitions and 30th among the 56 states and territories. Connecticut's percent served decreased and the state did not meet its target. However, as discussed on the next page, performance on this indicator has been variable since the '04-'05 year (baseline 1.03%), the '05-'06 year (.93%) and the '06-'07 year (1.23%).

Connecticut's 618 data due 2/2/09 shows 496 children under age 1 with IFSPs on 12/1/08 which is clearly a significant increase of 27% from 392.

Changes to eligibility determinations that were developed in response to a fiscal crisis in July 2003 were restored to their original status on 7/1/07. This included birth weights of less

than 1000g or gestations of 28 weeks or less. In addition, mild and unilateral hearing losses were added to the diagnosed conditions list for the first time.

The data for this year only reflects five months since this change was implemented (7/1/07 – 12/1/07.) It is expected that the percent will be higher next year since the dissemination of the changes to referral sources will have been in place for 17 months (7/1/07 – 12/1/08).

The related Indicator 6 shows an increase in the total number and percent of children 0-3 served in Connecticut. The pool of available children who could be impacted by the changes to eligibility is higher for Indicator 6 than for Indicator 5 since children must first be born to be counted as served under 1 by 12/1 of each year. Any children born weighing less than 1000g or at 28 weeks gestation or less as well as infants with mild and unilateral hearing loss detected *after* 12/1/07 may have been served in the '07-'08 year but they will not be counted until 12/1/08 which will be reported in the '08-'09 year's APR due 2/1/2010.

The changes in year to year estimates from the U.S. Census Bureau and subsequent changes in year to year percent served for this indicator raise questions about the validity of a single target percent instead of a range. Using the corrected population estimates below the standard deviation is 0.08% and using the original projected population estimates results in a standard deviation of 0.13%. Therefore Connecticut's target range for this indicator could be viewed as 0.97% - 1.13% if corrections to the population estimates are made or 0.92% - 1.18% if not.

	Percent of children under 12 months of age served by year				
	<u>Child Count</u>	<u>CT 0-1 Census</u>	<u>CT Census%</u>	<u>CT DPH</u>	<u>CT DPH %</u>
12/1/07	392	41,785	0.94%	41,048	0.95%
12/1/06	442	41,349	1.07%	41,789	1.05%
12/1/05	387	41,602	0.93%	41,393	0.93%
12/1/04	441	42,701	1.03%	41,753	1.05%
12/1/03	419	43,046	0.97%	42,826	0.98%
12/1/02	476	42,434	1.12%	41,990	1.13%

Source: <http://www.census.gov/popest/states/asrh/files/SC-EST2007-AGESEX-RES.csv>

NOTE: Population estimates for previous years are adjusted by the Census Bureau annually. The percentages reported above are based on the 2007 estimate file and do not match previously submitted APRs.

Birth to Three Data System

The system was modified to return to the eligibility process used before July 2003.

Public Reporting of APR Data

The data by county for this indicator was posted in February 2008 on Birth23.org. In addition, reports were shared with the ICC throughout the year.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

There will continue to be broad dissemination of changes to eligibility and targeted public awareness to referral sources, particularly pediatricians and hospital discharge planners.

Public Reporting of APR Data

The data by county for this indicator will be posted in February 2009 on Birth23.org and shared with the ICC throughout the year.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Measurement:

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

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	3.15%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

Below is part of the 618 table submitted for child with IFSPs on December 1, 2007.

A.1. AGE AND RACE/ETHNICITY OF INFANTS AND TODDLERS, AGES BIRTH THROUGH 2			
	Total	Census Population 0+1+2	Percent of Population
TOTAL	4182	124,987	3.35%

Connecticut's percent served decreased however the state continues to meet its targets. As discussed on the next page, performance on this indicator has trended up since the '04-'05 year (baseline 3.10%), the '05-'06 year (3.16%) and the '06-'07 year (3.41%).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

Connecticut ranks 1st among 16 states and territories with narrow eligibility definitions, 12th among the 56 states and territories. Connecticut continues to meet its target.

It should be noted that the Connecticut's success with child find is most likely related to the challenges faced by the system as a whole to provide timely IFSPs (Indicator 7.)

Connecticut's 618 data due 2/2/09 shows 4603 children with IFSPs on 12/1/08 which is clearly a significant increase of 10% from 4182.

The corrected population estimates indicate that the state is in fact now serving more children and a higher percentage of children under 3 overall than last year (3.35% an increase from 3.20% instead of a decrease from 3.41% as was reported in the FFY06 APR)

Percent of children under 12 months of age served by year

	<u>Child Count</u>	<u>CT 0-3 Pop</u>	<u>CT%</u>
12/1/2007	4182	124,987	3.35%
12/1/2006	4018	125,602	3.20%
12/1/2005	3970	127,389	3.12%
12/1/2004	3948	128,854	3.06%
12/1/2003	3701	129,355	2.86%
12/1/2002	4033	129,194	3.06%

Source: <http://www.census.gov/popest/states/asrh/files/SC-EST2007-AGESEX-RES.csv>

NOTE: Population estimates for previous years are adjusted by the Census Bureau annually. The percentages reported above are based on 2007 estimate file and do not match previously submitted APRs.

Changes to eligibility determinations developed in response to a fiscal crisis in July 2003 were restored to their original status on 7/1/07 to include children with speech as the only area with a significant developmental delay when one of six biological factors is present. The medical advisory committee also recommended the addition of several other diagnosed conditions which the lead agency approved.

Birth to Three Data System

The system was modified to return to the eligibility process used before July 2003.

Public Reporting of APR Data

The data for this indicator were posted by county in February 2008 on Birth23.org. In addition, data reports were routinely shared with the ICC.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

Public Reporting of APR Data

The data by county for this indicator will be posted in February 2009 on Birth23.org and shared with the ICC throughout the year.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Account for untimely evaluations and IFSPs.

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	100%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

Timely initial evaluations and assessments were completed in the '07-'08 year for 4337 children. 313 of those children exited Birth to Three before proceeding to an IFSP. Of the 4024 that proceeded to initial IFSP meetings, 2422 were held within 45 days from referral. An additional 998 were delayed due to documented exceptional family circumstances beyond the control of the lead agency and were included in the numerator and the denominator.

$$(2422 + 998) / 4024 = X \cdot 100 = 85\%$$

As expected and reported in the '06-'07 year APR and SPP improvement strategy revisions, Connecticut did not meet its target and demonstrated significant slippage. Prior to this year, performance on this indicator had trended up since the '04-'05 year (baseline 94%), the '05-'06 year (95%) and the '06-'07 year (97%).

This data was verified using emails to programs, data verification visits, focused monitoring, self-assessments, and the public reporting of data. In addition, as described more fully in the SPP and previous APRs, Connecticut’s real-time Birth to Three Data System contains built-in reports, edit checks and alerts as well as a real-time “performance dashboard” that is available to local programs and lead agency. Based on user selected date ranges, the performance dashboard runs summaries by APR indicator and produces exception reports.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

Connecticut anticipated significant slippage on this one indicator. The '06-'07 year APR reported that 126 of the 142 late meetings were delayed due to the challenges in locating an available program. Since the report was written during late 2007, we were able to view more current data and with stakeholder input developed a number of strong improvement strategies to address the developing statewide capacity crisis. The SPP was revised and approved to reflect Connecticut's quick response to a growing problem.

Only 9 of the 604 initial IFSP meetings that were not timely were delayed by issues at the local programs. This is a significant improvement at the local level. For the most part these were also beyond the control of the lead agency.

The reasons for the 9 with a late initial IFSP meeting included:

4 due to program error / staff errors (range 46 - 57 days).

2 due to delays in finding available staff (range 47 - 58 days);

2 due to delays in finding an available interpreter (range 52 - 56 days);

and

1 due to eligibility determinations of "not eligible" being reversed (96 days);

This represents only 7 out of 42 possible programs.

As expected, 595 of the 604 late meetings in the '07-'08 year were delayed due to the challenges associated with locating an available Birth to Three program (range in days 46-118).

Connecticut has ensured that all families who did not receive an initial IFSP meeting within timelines ultimately had an IFSP meeting.

The timeline related child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively. The state's efforts to prevent future non-compliance are described below."

The capacity crisis was not completely resolved until August 2008 after the lead agency successfully implemented the planned and approved improvement strategies.

1) Five Requests for Proposals (RFPs) were issued between 9/1/06 and 4/1/08 to increase capacity in the Birth to Three system. As a result, 19 new programs were created as of August 2008. This is an increase of 19 programs from a base of 33 programs (58%) over the course of 19 months.

The RFPs were for two different type of programs; autism-specific programs and general programs. The decision to create programs that specialize in serving families with children who meet the IDEA classification for autism was made with extensive stakeholder input. These programs are able to retain trained staff based on the expectation that they will have new referrals requiring intensive services. This relieves the general programs of the need to find and train staff when perhaps only 1 child in their program is identified as meeting the IDEA classification for autism. Of the 19 new programs, 10 are autism specific programs and 9 are general programs.

In addition, two general programs closed between 5/08 and 8/08 for a new total of 50 programs. Only 31 of those programs are experienced programs so while the capacity concerns that resulted in such poor performance on this indicator have been eliminated, there are significant new stresses to the system as the lead agency provides TA to 19 new

programs. Fortunately, out of the 19, 12 were part of larger agencies that either provide Birth to Three services in neighboring states or run existing Connecticut general programs which leaves only seven that are really new to the current Part C.

2) On July 1, 2007, a new category of “Early Intervention Specialist” was added to the personnel standards to allow someone with a closely related BA degree, infant-toddler coursework, experience, and a B-3 early intervention credential to work as a "professional" in early intervention. This means they can perform evaluations and work totally independently. Although it may take programs up to a year to get some of their staff qualified for this position, this may help programs increase their evaluation capacity. Seven Early Intervention Specialists have been approved as of 8/21/08.

3) The lead agency formed a workgroup to develop rules about the use of smaller service areas called sub-regions and taking new referrals via “rotation” (vs. parent choice) and the Fiscal Unit will monitor this from a contract management perspective. A report of referrals by program by town was provided and 11 programs changed the towns served to increase efficiencies and as a result serve more children.

4) The lead agency is conducting a study to screen up to 100 children referred for evaluation to see whether it will be cost-effective to screen referrals statewide or not when the proposed IDEA regulations are finalized. Preliminary data as of August 2008 reveal that only 4 out of 30 children would not have been referred to a program for a comprehensive evaluation.

5) The lead agency held a statewide provider meeting in January 2008 to gather input on challenges faced at the local level and suggested changes.

As a result of these improvement strategies Connecticut’s performance on this measure improved, but too late for this APR which collapses the entire year into one performance percentage.

When the ‘07-’08 year is viewed in quarters, the improvement is obvious.

(Timely + Documented Family Circumstances) / Total IFSPs = Rate X 100 = Percent

Q1) 7/1/07 – 9/30/07
(553 + 261) / 1014 = .80 X 100 = 80%

Q2) 10/1/07 – 12/31/07
(493 + 271) / 952 = .80 X 100 = 80%

Q3) 1/1/08 – 3/31/08
(564 + 244) / 961 = .84 X 100 = 84%

Q4) 4/1/08 – 6/30/08
(812 + 222) / 1097 = .94 X 100 = 94%

2 new general programs
began in Spring 2007
3 new general programs
began in Summer 2007

6 new autism-specific programs
began in Spring 2008

The progress is also evident based on data from the first two quarters of the ‘08-’09 year.

Q1) 7/1/08 – 9/30/08
(891 + 143) / 1045 = .99 X 100 = 99%

Q2) 10/1/08 – 12/31/08
(1014 + 91) / 1111 = .99 X 100 = 99%

4 new general programs
began in late Summer 2008
4 new autism-specific programs
began in late Summer 2008

Since Connecticut has a single point of entry, the data system is sophisticated enough to differentiate how long the program took to complete evaluations and initial IFSP meetings after receiving the referral. Whatever the cause, programs were required to include this measure on their improvement plans if not at 100%.

Of the 11 programs that had at least one finding of non-compliance identified in the '06-'07 year based on the IDEA requirements determined to be related to this indicator, 10 corrected all findings of non-compliance within one year. The remaining program had five findings related to this indicator and corrected four within one year. In Spring 2008 an IDEA Determination of Needs Assistance was made for that program for the second time primarily based on this delay in correction and the corrective action plan was revised to include required TA and organizational changes. Unique data reports were developed to show the very large program their performance by regional office. Their one remaining finding was corrected in 16 months (April 15, 2007 - August 1, 2008.)

Three programs had at least one finding of non-compliance identified in the '07-'08 year based on the IDEA requirements determined to be related to this indicator due to be corrected in the '08-'09 year.

Response to OSEP letter and table regarding FFY06 APR

“In addition, in responding to Indicators 1, 7, and 8C, the State must specifically identify and address the noncompliance identified in this table under those indicators.”

Number of findings made during the '06-'07 year about this measure	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
8	7	August '08	1
Number of findings made during the '06-'07 year about requirements related to this indicator	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this indicator
14	14	NA	3

Focused Monitoring

Three programs received a focused monitoring on-site visit in the '06-'07 year using the Child Find priority area protocol; one large, one medium and one small sized program. All three had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator and all three corrected those findings within one year. (See Indicator 9 for the total number of findings.)

Programs were grouped and ranked in December 2006 and October 2007 based on this indicator. Two programs were selected for an on-site visit during the '07-'08 year using the Child Find priority area protocol. One large and one very small sized program were selected. Both of the programs had findings of non-compliance identified based on the IDEA

requirements determined to be related to this indicator due to be corrected in the '08-'09 year. All the reports were posted on Birth23.org within two weeks of the end of the visit.

Data Verification

Verification emails were sent to each program about every late meeting whenever data was run for the APR or program ranking. On-site visits include data verification of the documentation of extraordinary family circumstances and all other reasons for late meetings.

Biennial Performance Report

Of the nine programs that completed a Biennial Performance Report in the '06-'07 year, all nine had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. Eight of the nine programs corrected all identified non-compliance within one year. As mentioned above, the one remaining program required 16 months to correct one of the five findings identified to that large program. (See [Indicator 9 for the total number of findings.](#))

15 programs completed a BPR in the '07-'08 year. Two of the 15 had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator due to be corrected in the '08-'09 year.

Public Reporting of APR Data

The data for this indicator were posted by program in February 2008 on Birth23.org. In addition, data reports were routinely shared with the ICC.

Determinations

One program was determined to Need Assistance based primarily on this indicator. A Corrective Action Plan was developed with clear next steps and timelines.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]*Focused Monitoring*

The lead agency has contracted with WESTED to evaluate the focused monitoring system in the '08-'09 year. A contract was developed with an additional parent to participate on the focused monitoring team.

Biennial Performance Report (BPR)

The entire BPR will be reviewed and modified in '08-'09 once Cohort II completes their self-assessments in September 2008.

Public Reporting of APR Data

Findings were identified based on this data in the '08-'09 year. The data by program for this indicator will be posted in February 2009 on Birth23.org and shared with the ICC throughout the year.

Birth to Three Data System

Connecticut is beginning to develop a web-based data system. Data verification continues to improve the accuracy of the performance dashboard at the local level/

Determinations

This indicator will continue to be used for determinations which will be made in March 2009.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Measurement:

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

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	A-C) 100%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

8A) <u>Transition Plan included in IFSP</u>	/	<u>Total Exiting at Age Three with IFSP</u>	<u>Percent</u>
2716		2719	99.9%

Connecticut maintains a high percentage since the '04-'05 year (baseline 100%), the '05-'06 year (99.9%) and the '06-'07 year (99.9%).

8B) <u>Number of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred</u>	/	<u>Number of children exiting Part C who were potentially eligible for Part B</u>	<u>Percent</u>
2351		2351	100%

Connecticut continues to meet its target.

8C)

Conference <u>On time</u> (1660	Documented <u>Family Circumstance</u> + 53)	Total <u>Conferences Due</u> / 1720	<u>Percent</u> 99.6%
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While Connecticut did not meet its target by 0.4% the state continues to make progress since the '04-'05 year (baseline 95%), the '05-'06 year (98%) and the '06-'07 year (99.4%).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

8A) Transition Plans

The three children exiting Part C who did not have transition plans in their IFSPs were triplets from one program. As explained under Indicators 1 and 9, the lead agency's contract with this one program was canceled. The children turned three and "aged out" of Birth to Three before the omission was found.

This data was verified using emails to programs, data verification visits, focused monitoring, self-assessments, and the public reporting of data. In addition, as described more fully in the SPP and previous APRs, Connecticut's real-time Birth to Three Data System contains built-in reports, edit checks and alerts as well as a real-time "performance dashboard" that is available to local programs and lead agency. Based on user selected date ranges, the performance dashboard runs summaries by APR indicator and produces exception reports.

The since this indicator reports about children exiting Part C, child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively. The state's efforts to prevent future non-compliance are described below."

Correction of Identified Non-compliance

Number of findings made during the '06-'07 year about this measure	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
0	0	NA	0
Number of findings made during the '06-'07 year about requirements related to this sub-indicator	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this sub-indicator
5	5	NA	1

Connecticut has ensured that all children and families have transition plans.

Focused Monitoring

This continues to be monitored as part of the transition protocol. The focus has been to evaluate the quality of the plans, not the mere presence of steps in a plan which is a required page in the statewide IFSP.

Of the two programs (one large and one medium sized) that received a focused monitoring on-site visit in the '06-'07 year using the Transition priority area protocol, both had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. All identified non-compliance was corrected within one year. (See [Indicator 9 for the total number of findings.](#))

Programs were grouped and ranked in December 2007 based on Timely Transition Conferences. One large program was selected for an on-site visit during the '07-'08 year using the Transition priority area protocol. The program had no findings of non-compliance identified based on the IDEA requirements determined to be related to this indicator.

Biennial Performance Report (BPR)

Of the nine programs that completed a Biennial Performance Report in the '06-'07 year, three had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. All three programs corrected all identified non-compliance within one year. (See [Indicator 9 for the total number of findings.](#))

15 programs completed a BPR in the '07-'08 year. One program had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator due to be corrected in the '08-'09 year.

Public Reporting of APR Data

The data for this indicator were posted by program in February 2008 on [Birth23.org](#). In addition, data reports were routinely shared with the ICC.

8B) Notification

There were 248 children who exited Birth to Three in the '07-'08 year for whom parents actively chose not to consent to a referral to their school district and also opted out of any notification to their district. Connecticut's Transition Procedure was submitted to OSEP in March 2005.

Focused Monitoring

The timeliness of referrals to the LEA continues to be monitored during on-site visits. Reasons for missing referrals, revocation of referrals, or decisions to not refer by age 2 ½ are reviewed in home visit notes.

Birth to Three Data System

If a referral decision has not been made (i.e. the parent has not signed "yes" or has not opted out by signing "no" on the LEA referral form) and the data has not been entered into the data system by 90 days before age three, directory information is sent to the LEA.

Data Verification

This is completed during BPR reporting, focused monitoring and verification visits.

Public Reporting of APR Data

The data for this indicator were posted by county in February 2008 on [Birth23.org](#). In addition, data reports were routinely shared with the ICC.

8C) Timely Conferences

1720 children had transition conferences due in the '07-'08 year. 1660 were held at least 90 days and no more than 9 months before age three. Verification emails were sent to each program about each late or missing conference. An additional 53 conferences were held late due to documented extraordinary family circumstances beyond the control of the lead agency. These 53 were included in the numerator and the denominator for a total of 1713 held on time out of 1720 conferences due. Of the children who exited in the '07-'08 year, 115 were referred within 90 days of their 3rd birthday.

Only 7 transition conferences were delayed by issues at the local programs and the reasons were primarily human error such as projecting out the incorrect due date, still waiting for the school district to schedule the meeting even though this is not required by Part C, or not planning far enough in advance so that there was little time available before 90 days to reschedule due to staff illnesses or unexpected resignations (range 89-36 days).

Connecticut has ensured that all untimely conferences were ultimately held.

This data was verified using emails to programs, data verification visits, focused monitoring, self-assessments, and the public reporting of data. In addition, as described more fully in the [SPP](#) and previous [APRs](#), Connecticut's real-time Birth to Three Data System contains built-in reports, edit checks and alerts as well as a real-time "performance dashboard" that is available to local programs and lead agency. Based on user selected date ranges, the performance dashboard runs summaries by APR indicator and produces exception reports.

The timeline related child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively. The state's efforts to prevent future non-compliance are described below."

Focused Monitoring

Of the two programs (one large and one medium sized) that received a focused monitoring on-site visit in the '06-'07 year using the Transition priority area protocol, both had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. The identified non-compliance was corrected within one year. ([See Indicator 9 for the total number of findings.](#))

Programs were grouped and ranked in December 2007 based on Timely Transition Conferences. One large program was selected for an on-site visit during the '07-'08 year using the Transition priority area protocol. The program had no findings of non-compliance identified based on the IDEA requirements determined to be related to this indicator. All the reports were posted on Birth23.org within two weeks of the end of the visit.

Response to OSEP letter and table regarding FFY06 APR

"In addition, in responding to Indicators 1, 7, and 8C, the State must specifically identify and address the noncompliance identified in this table under those indicators."

Number of findings made during the '06-'07 year about this measure	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
6	6	NA	1

Number of findings made during the '06-'07 year about requirements related to this sub-indicator	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this sub-indicator
1	1	NA	0

Biennial Performance Report (BPR)

Of the nine programs that completed a Biennial Performance Report in the '06-'07 year, four had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator. All four programs corrected the identified non-compliance within one year. (See Indicator 9 for the total number of findings.)

Fifteen programs completed a BPR in the '07-'08 year. Only one had at least one finding of non-compliance identified based on the IDEA requirements determined to be related to this indicator due to be corrected in the '08-'09 year.

Complaints

There were 4 written complaints in the '06-'07 year. Only 1 was related to a service coordinator's attendance at the transition conference. One child-specific finding was made and it was timely corrected.

Public Reporting of APR Data

The data for this indicator were posted by program in February 2008 on Birth23.org. In addition, data reports were routinely shared with the ICC.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

8A) Transition Plans

Biennial Performance Report (BPR)

The entire BPR will be reviewed and modified once Cohort II completes their self-assessments in September 2008.

Birth to Three Data System

Connecticut is beginning to develop a web-based data system. The accuracy of the way this indicator is measured automatically in the data system will continue to improve as any errors are identified through data verification.

Public Reporting of APR Data

No findings were identified based on this data in the '08-'09 year. The data for this indicator will be posted by program in February 2009 on Birth23.org and shared with the ICC throughout the year.

8B) Notification

Birth to Three Data System

The lead agency will determine whether reports that are sent to each district may be modified to include Connecticut State Department of Education State Assigned Student Identifier (SASID) numbers.

Biennial Performance Report (BPR)

The entire BPR will be reviewed and modified once Cohort II completes their self-assessments in September 2008.

Public Reporting of APR Data

The data by county for this indicator will be posted in February 2009 on Birth23.org.

8C) Timely Conferences

Biennial Performance Report (BPR)

The entire BPR will be reviewed and modified once Cohort II completes their self-assessments in September 2008.

Birth to Three Data System

Connecticut is beginning to develop a web-based data system. The accuracy of the way this indicator is measured automatically in the data system will continue to improve as any errors are identified through data verification.

Public Reporting of APR Data

Findings were identified based on this data in the '08-'09 year. The data by program for this indicator will be posted by program in February 2009 on Birth23.org and shared with the ICC throughout the year.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

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

FFY07	Measurable and Rigorous Target
7/1/07- 6/30/08	100%

NOTE: Connecticut Part C identifies one finding per regulatory reference even if multiple instances (records) are found to be out of compliance.

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

61 findings timely corrected / 63 findings identified in the '06 – '07 year = 97%

While Connecticut did not meet its target, the state has made progress since the '05-'06 year (baseline 93%) and the '06-'07 year (93%).

As of August, 2008, all findings of non-compliance identified in the '06-'07 year were corrected.

Two of three groups of programs completed their Biennial Performance Reports (BPR) self-assessments in the '05-'06 year, there was only one group of nine programs left with BPRs due in the '06-'07 year. In addition to BPRs, there were 10 focused monitoring visits made in the '06-'07 year.

In the '07-'08 year the BPR was revised and a second round of BPRs were completed beginning in Sept. 2007. This time the 38 programs were split into 2 cohorts of 19 programs each. (The second cohort completed its BPRs in Sept 2008.)

APR Template – Part C (4)

There were only four focused monitoring visits in the '07-'08 year and this number is expected to remain low to ensure adequate resources for follow-up and TA.

There was one data verification visit in the '07-'08 year which led directly to the lead agency cancelling their contract with the program after transferring the families to other programs.

For the APR compliance indicators, all programs were monitored using the data system with data verification. During the OSEP/DAC meeting in June 2008, the August 2008 National Accountability Conference and in the October 2008 letter from OSEP, it appears as if APR public reporting data should be reviewed to make findings. Once the data '07-'08 year data was verified, findings were identified in writing early in the '08-'09 year if the non-compliance had not been corrected prior to the date of the letter.

Indicator (Findings for related requirements are included under each indicator.)	General Supervision System Components	# of Programs Monitored	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06-6/30/07)	(b) # of Findings 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	35	8	7
	Dispute Resolution	3	2	2
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring	34	1	1
	Dispute Resolution	0	0	0
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring	9	0	0
	Dispute Resolution	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring	9	0	0
	Dispute Resolution	0	0	0
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring	NA	0	0
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution	NA	0	0

Indicator (Findings for related requirements are included under each indicator.)	General Supervision System Components	# of Programs Monitored	(a) # of Findings of noncompliance identified in FFY 2006 (7/1/06-6/30/07)	(b) # of Findings from (a) for which correction was verified no later than one year from identification
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring	35	22	21
	Dispute Resolution:	0	0	0
8a. IFSPs with transition steps and services;	Monitoring	35	5	5
	Dispute Resolution	0	0	0
8b. Notification to LEA, if child potentially eligible for Part B	Monitoring	11	0	0
	Dispute Resolution:	0	0	0
8c. Transition conference, if child potentially eligible for Part B.	Monitoring	33	6	6
	Dispute Resolution:	1	1	1
Other: Procedural Safeguards	Monitoring	35	18	18
	Dispute Resolution	0	0	0
Sum the numbers down Column a and Column b			63	61
			(61/63)X100=	97%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

The new lead agency staff member who spends 50% of her time tracking the correction of non-compliance was able to attend an MSIP meeting in Baltimore in 2007 and gained a greater understanding of this indicator. The manager for Accountability and Monitoring developed and revised a database specifically for tracking all the findings of non-compliance and the related requirements.

APR Template – Part C (4)

Connecticut
State

Since Part C in Connecticut is a small system, the few findings that are not timely corrected have a greater impact on the overall state percentage.

Indicator 1: *The timeline related child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively. The one finding of non-compliance that was not corrected within one year was corrected in 16 months (July 15, 2006 - November 1, 2007.) The delay in reporting correction was an oversight on the part of the provider. No Corrective Action Plan or TA was required. (See Indicator 1 for more.)*

Number of findings made during the '06-'07 year for non-timely services	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were verified/corrected	Number of findings made during the '07-'08 year about this measure
5	5	NA	10
Number of findings made during the '06-'07 year about requirements related to Indicator 1	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were verified/corrected	Number of findings made during the '07-'08 year about requirements related to this indicator
5	4	November '07	5

Connecticut has ensured that all services began for children and families who did not receive a new service on their IFSP within timelines. (See Indicator 1 for the range of days.)

Indicator 2: The one finding was corrected within one year. See Indicator 2 for more details.

Number of findings made during the '06-'07 year about this measure	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
1	1	NA	0
Number of findings made during the '06-'07 year about requirements related to this sub-indicator	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this sub-indicator
0	0	NA	0

Indicator 3 & 4: The related requirements for these were counted under other indicators.

Indicators 5 & 6: Child Find is the responsibility of the lead agency and as such there were no findings. For more information about the single point of entry please see the State Performance Plan and previous Annual Performance Reports. The related requirements for these were counted under other indicators.

Indicator 7: *The timeline related child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively.* The one finding of non-compliance that was not corrected within one year was corrected in 16 months (April 15, 2007 - August 1, 2008). The very large program received a determination of Needs Assistance in Spring 2008. A corrective action plan was developed and TA was provided including data reports disaggregated by region. (See Indicator 7 for more details.)

Number of findings made during the '06-'07 year about timely initial evaluations and IFSPs	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
8	7	August '08	1
Number of findings made during the '06-'07 year about requirements related to indicator 7	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this indicator
14	14	NA	3

Connecticut has ensured that all evaluations were completed and initial IFSP meetings were held for children and families who did not receive an evaluation and initial IFSP within timelines. (See Indicator 7 for the range of days.)

Indicator 8a: *The since this indicator reports about children exiting Part C, child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively.* All findings were corrected within one year. See Indicator 8a for more details.

Number of findings made during the '06-'07 year about missing transition plans	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
0	0	NA	0
Number of findings made during the '06-'07 year about requirements related to indicator 8a	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this sub-indicator
5	5	NA	1

Connecticut has ensured that transition plans were present for all children and families exiting Part C. (See Indicator 8a for more details.)

Indicator 8b: Notification was made to school districts about all children near age three who were potentially eligible for preschool special education.

Indicator 8c: *The timeline related child-specific non-compliance reported for this indicator in the '06-'07 APR and in this '07-'08 APR cannot be corrected retroactively. All findings were corrected within one year. (See Indicator 8c for details.)*

Number of findings made during the '06-'07 year about timely transition conferences	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about this measure
6	6	NA	1
Number of findings made during the '06-'07 year about requirements related to indicator 8c	Number of those findings that were timely corrected and verified	When finding(s) that were NOT timely corrected were ultimately verified/corrected	Number of findings made during the '07-'08 year about requirements related to this sub-indicator
1	1	NA	0

Connecticut has ensured that all transition conferences were held for children and families who did not receive a transition conference within timelines. (See Indicator 8c for the range of days.)

Other: This grouping includes procedural safeguards such as consent to release information, written prior notice, and communication in the family's native language. All findings were corrected within one year and all non-timeline related child-specific non-compliance was corrected within 2 weeks.

Focused Monitoring

Through this monitoring process seven programs had non-compliance identified in the '06-'07 year. Of those seven programs, six corrected all identified non-compliance within one year.

The lead agency contracted with WESTED to evaluate the focused monitoring system in the '08-'09 year. A contract was developed with an additional parent to participate on the focused monitoring team. The report is posted on Birth23.org

Birth to Three Data System

The real-time performance dashboard was modified to include exception reports for Indicator 8A (Transition plans) and Indicator I (Timely Services)

Data Verification

This is completed as one of many components of Connecticut's accountability and monitoring system. One Data Verification visit was completed in the '07-'08 year after a program with a Determination of Needs Assistance reported correction of all findings from and the '06-'07 year Focused Monitoring visit and 100% compliance on their BPR in Sept 2008. The correction was not verified and the contract with the program was cancelled by the lead agency.

Biennial Performance Report (BPR)

Nine programs completed BPRs in the '06-'07 year. Through this monitoring process all nine programs had non-compliance identified for at least one measure. Of those nine programs, eight corrected all identified non-compliance within one year. The one program that did not, received a determination of Needs Assistance

Determinations

Two programs were determined to need assistance in Spring 2008 and corrective action plans were developed with both. As of December 2008, one program has corrected all findings of non-compliance as well as any concerns about untimely data. The other has corrected 12 of 13 findings made in the '07-'08 year and is expected to demonstrate correction by 12/28/09. If so this program may meet requirements. If not they will move to Need Intervention with sanctions.

Complaints

There were 4 written complaints in the '06-'07 year that resulted in 3 findings. All three findings were child-specific and were timely corrected.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

Biennial Performance Report (BPR)

The entire BPR will be reviewed and modified once Cohort II completes their self-assessments in September 2008.

Public Reporting of APR Data

Findings based on the '07-'08 data were identified early in the '08-'09 year once the '07-'08 data was collected and verified.

Determinations

The timely correction of identified non-compliance will continue to be a factor in local determinations each year. Determinations will be made again in March 2009.

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY07	Measurable and Rigorous Target
7/1/07- 6/30/08	100%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

100% - There were three written complaints received and all three reports were issued on time.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

NA

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

NA

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

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.

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	100%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

NA - There were no fully adjudicated hearings.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

NA

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

NA

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	NA

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

NA – Does not apply to Part C in CT

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

NA

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [if applicable]

NA

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement: Percent = $[(2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1] \text{ times } 100.$

FFY07	Measurable and Rigorous Target
7/1/07- 6/30/08	NA

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008):

NA - There were no mediations held during the reporting period.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

NA

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

NA

Part C State Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2007

Overview of the Annual Performance Report Development:

Same process as described in Indicator #1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY07	Measurable and Rigorous Target
7/1/07-6/30/08	100%

Actual Target Data for FFY07 (July 1, 2007-June 30, 2008): 100%

Indicator 14 - APR Data			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8a	1	1	2
8b	1	1	2
8c	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	NA	NA	NA
13	1	1	2
		Subtotal	28
APR Score Calculation		Timely Submission Points (5 points for submission of SPP/APR by February 2, 2008)	5
		Grand Total	33

Indicator 14 - 618 State-Reported Data					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/08	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/1/08	1	1	1	1	4
Table 3 - Exiting Due Date: 11/1/08	1	1	1	NA	3
Table 4 - Dispute Resolution Due Date: 11/1/08	1	1	1	NA	3
				Subtotal	14
			Weighted Total (subtotal X 2.5; round ≤ .49 down and ≥ .50 up to a whole number)		35

Indicator #14 Calculation	
A. APR Total**	33
B. 618 Total	35
C. Grand Total	68
Percent timely and accurate data = (C divided by 68** times 100)	100%

**“Consistent with what we told states last year, states that do NOT have data for an indicator should score themselves with a "NA" Since there is no self-calculating worksheet this year, states should make sure that they reduce the denominator by 1 for every "NA" they enter. This will ensure that they will not be penalized for making this entry.”

Ken Kienas, OSEP/MSIP Nov. 17, 2008 email

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY07 (July 1, 2007-June 30, 2008):

Connecticut met its target because the 618 Child Count and Settings tables, due to OSEP on February 1 along with to the APR, were sent in on time this year...

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY07 (July 1, 2007-June 30, 2008) [If applicable]

No revisions

U.S. DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION
AND REHABILITATIVE SERVICES
OFFICE OF SPECIAL EDUCATION
PROGRAMS

TABLE 4
REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE
INDIVIDUALS WITH DISABILITIES EDUCATION ACT
20'07-'08

PAGE 1 OF 1

OMB NO.: 1820-0678

FORM EXPIRES: 11/30/2009

STATE: CONNECTICUT

SECTION A: Written, signed complaints	
(1) Written, signed complaints total	3
(1.1) Complaints with reports issued	3
(a) Reports with findings	1
(b) Reports within timeline	3
(c) Reports within extended timelines	0
(1.2) Complaints withdrawn or dismissed	0
(1.3) Complaints pending	0
(a) Complaints pending a due process hearing	0

SECTION B: Mediation requests	
(2) Mediation requests total	0
(2.1) Mediations	
(a) Mediations related to due process	0
(i) Mediation agreements	0
(b) Mediations not related to due process	0
(i) Mediation agreements	0
(2.2) Mediations not held (including pending)	0

SECTION C: Hearing requests	
(3) Hearing requests total	0
(3.1) Resolution meetings (For States adopted Part B Procedures)	0
(a) Settlement agreements	0
(3.2) Hearings (fully adjudicated) (For all states)	0
(a) Decisions within timeline SELECT timeline used {30 day Part C, 30 day Part B, or 45 day Part B}	0
(b) Decisions within extended timeline (only applicable if using Part B due process hearing procedures).	0
(3.3) Resolved without a hearing	0