

Vermont

Part C State Performance Plan (SPP) FFY 2005 through FFY 2012

Inclusive of Revisions as of February 3, 2014¹

¹ Revisions made 2-14, 2-13, 2-12, 2-11, 2-10, 4-09, 2-09, 4-08 and 4-07 – please see pp. 2, 3, and 4h for summary of revisions.

Summary of Revisions to VT Part C State Performance Plans (SPPs)

A copy of Vermont Part C's SPP that contains the following revisions is available on the Children's Integrated Services-Vermont Part C Early Intervention Web Site at:

http://dcf.vermont.gov/cdd/reports/IDEA_Part_C. Vermont Part C reports to the public on the performance of each EIS program against the State's targets in its SPP. These reports are at: http://dcf.vermont.gov/cdd/reports/IDEA_Part_C/public_reports.

1. State Performance Plan (SPP) submitted 2-13 – revisions as of February 3, 2014 submission:

- Indicators 1 through 9: highlighted in **magenta** revised timeline for revisions to VT Part C policies and procedures
- Indicator 9: highlighted in **magenta** revised timeline for development of the General Supervision Manual

2. State Performance Plan (SPP) submitted 2-12 - revisions as of February 1, 2013 submission:

- Indicators 1 through 9, and 14: **highlighted in yellow** revision to timeline and resources for development and implementation of electronic data management system
- Indicators 1, 7, 8 and 9: **highlighted in yellow** new activity for CIS provider requirements for online training modules related to Part C timeline and transition requirements
- Indicator 4: **highlighted in yellow** revisions to baseline data and state target data for FFY 2012
- Indicator 9: **highlighted in yellow** revised timeline for development of General Supervision Manual

3. State Performance Plan (SPP) submitted 2-11 - revisions as of February 1, 2012 submission:

Improvement Activities/Timelines/Resources

- Indicators 1 through 13: ***bolded and italicized*** revisions to two activities and timelines related to the Part C-B Interagency Agreement and VT Part C rules, regulations, policies and procedures
- Indicators 1 through 9, and 14: ***bolded and italicized*** revised timeline for phase-in of electronic data management system
- Indicators 1, 7, 8 and 9: ***bolded and italicized*** new activity for completion/dissemination of online training module related to Part C timeline requirements
- Indicator 4: ***bolded and italicized*** new activity related to use of revised ECO Family Outcomes Survey
- Indicator 5: ***bolded and italicized*** new activity related to implementation of Targeting Indicator Improvement Action Plan
- Indicator 9: ***bolded and italicized*** revised timeline for development of General Supervision Manual

4. State Performance Plan (SPP) submitted 2-10 - revisions as of February 1, 2011 submission:

General Narrative

- Changed "Family, Infant and Toddler Program/FITP" to "Children's Integrated Services (CIS)-Early Intervention (EI)" to reflect name change during FFY 2009 (CIS-EI)
- Changed "Regional Host Agencies" to "Children's Integrated Services (CIS)-Early Intervention Programs (EIPs)" (CIS-EIPs)

Overview of the State Performance Plan Development

- Added paragraph **in red font on** page 5 describing review/revision process for SPP 2-11 submission

Targets

- Extended through FFY 2012 for Indicators 1 through 14 (pp. 8, 13, 38-39, 45, 51, 56, 60, 64, 70, 74, 77, 78-79, 81, 83)
- Revised FFY 2010 targets for Indicator 3, Child Outcomes, page 39

Baseline

- Indicator 3, page 38: FFY 2009 data serves as new baseline

Improvement Activities/Timelines/Resources

- Are extended through FFY 2012 for Indicators 1-14 (pp. 8-10, 13-14, 36-37, 47-48, 51-53, 56-57, 60-61, 64-65, 70-72, 75, 77, 79, 81, 83-84)
- Are in consistent table format throughout document
- Are bolded where there are significant revisions to current improvement activities and additions of new activities. The purposes of the revisions/additions are to: 1) be more specific; and 2) ensure activities that are relevant to multiple indicators are consistently included within the indicators, including annual revisions to the current manual data management system and the in-process development and FFY 2011 phase-in of the electronic data management system
- Were deleted from Indicators 1-9 and 14 when completed and/or no longer relevant

Overview of Issue/Description of System or Process

- Added paragraphs **in red font** to Indicators 1 (pp. 6-7), 7 (p.58), 8 (pp. 62-63) and 9 (pp. 67-68) describing:
 - transition from cyclical to focused, ongoing monitoring process in FFY 2008
 - planned development/implementation of electronic data management system in FFYs 2010 and 2011
- Added paragraph **in red font** to Indicators 2 (p. 11), 3 (p. 19), 4 (p. 41), 5 (p. 49), 6 (pp. 54-55) and 14 (p. 82) describing planned development/implementation of electronic data management system in FFYs 2010-2012

5. State Performance Plan (SPP) submitted 4-09 - revisions February 1, 2010 submission:

Indicator 1, Timely Services: revisions **in bold** to the Measurement instructions consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.

Indicator 2, Natural Environments: Revisions **in bold** to the Indicator and Measurement language consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.

Indicator 3, Child Outcomes: Revisions **in bold** to the Measurement instructions **on p. 33** consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012 and reporting of baseline data and targets for FFY 2009 and FFY 2010.

Indicator 4, Family Outcomes: Revisions **in bold** to the Improvement Activities to refine the activities.

Indicator 5, Child Find for Infants Birth to One: Revisions **in bold** to the Indicator language and to the Measurement instructions consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.

Indicator 6, Child Find for children birth through two: Revisions **in bold** to the Indicator language and to the Measurement instructions consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.

Indicator 7, Child Find 45 Day timeline: Revisions **in bold** to the Measurement instructions consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.

Indicator 8, Transition: Revisions **in bold** to the Measurement instructions consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.

Indicator 9, General Supervision, Timely Correction of Findings:

- Revisions **in bold** to the measurement instructions consistent with Part C Indicator Measurement Table, Expiration Date 11/30/2012.
- Addition of two new improvement activities to ensure Vermont Part C identifies noncompliance through its General Supervision system.

Indicator 14, Timely and Accurate State-Reported Data: Revisions **in bold** to the Measurement instructions for Indicator 14.

6. State Performance Plan (SPP) submitted 2-09 - revisions April 2009 per OSEP's request:

Indicator 1, Timely Services: revisions to the SPP made on improvement activities.

Indicator 2, Natural Environments: revisions to the SPP made on improvement activities.

Indicator 3, Child Outcomes: progress reporting for child outcomes added and also submitted in Appendix A of the FFY 2007 APR.

Indicator 4, Family outcomes: revisions to the SPP made on improvement activities.

Indicator 5, Child fined for infants under age one: revisions to the SPP made on improvement activities.

Indicator 6, Child find for children birth through two: revisions to the SPP made on improvement activities.

Indicator 7, Child Find 45 Day timeline: revisions to the SPP made on improvement activities.

Indicator 8, Transition: revisions to the SPP made on improvement activities.

Indicator 9, General Supervision, Timely Correction of Findings: revisions to the SPP made on improvement activities.

Indicator 14, Timely and accurate reporting: revisions to the SPP made on improvement activities.

7. State Performance Plan (SPP) submitted 2-08 - revisions April 2008 per OSEP's request:

Indicator 2, Natural Environments: The performance target of 95% for FFY 2010 is changed to 96.10%

Indicator 4, Family outcomes: FFY 2010 target changed to 88.1%.

8. State Performance Plan (SPP) submitted 2-07 - revisions April 2007 per OSEP's request:

Indicator 2, Natural Environments: The performance target of 97% is changed to 94% for FFY 2006 to FFY 2010, when it is changed to 95% in the revised SPP.

Indicator 3, Child Outcomes: Progress reporting for child outcomes is in the revised SPP.

Indicator 4, Family outcomes:

Targets for return rate are revised to 30% from 35% in the SPP for FFY 2006 to FFY 2010, when it becomes 31%.

Outcome 4 C = SPP revised to 85% from 88%

Indicator 5, Child find for infants under age one: There is one revision in the SPP that revises the wording in the second improvement activity to state “regions below the target” from “regional EIPs below state average” from FFY 2006 through FFY 2010.

Indicator 6, Child find for children birth to three: The revision to the SPP changes the wording in the first Improvement Activity deleting two categories of proposed reporting (category of eligibility and referral sources).

Indicator 7, Child Find 45 Day timeline: The only change to the SPP is a revision that now reports a statewide measure instead of separate regional ones.

Indicator 9, General Supervision, Timely Correction of Findings: Improvement activity 9 revised to delete the word “Consider.” Vermont added one improvement activity at the end, “Engage Federal and other Technical Assistance Centers (e.g. NERRC, NECTAC) to support this work.”

Revised Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development:

The Vermont Part C of the Individuals with Disabilities Education Improvement Act, formerly known in Vermont as the Family, Infant and Toddler Program (FITP) and known as Children's Integrated Services (CIS)-Early Intervention (EI) as of FFY 2009, is supported by both the Department of Education and the Agency of Human Services acting as Co-Lead Agencies for CIS-EI. The administrative agency holding operational responsibility for CIS-EI is the Agency of Human Services, Department for Children and Families, Child Development Division. In that role, the state office staff for CIS-EI as part of the Child Development Division, planned a process for stakeholder input that covered a three month period of time in the fall of 2005. Vermont was pleased to access the services of the Northeast Regional Resource Center (NERRC) to assist us in presenting information on the Office of Special Education Programs' Monitoring Priorities and Indicators/State Performance Plan (SPP) and obtaining helpful feedback on them during the Vermont Interagency Coordinating Council (VICC) two day Annual Planning Session that included a broad array of additional "stakeholders."

The process during the period September through November 2005 for obtaining broad stakeholder input and review on the State Performance Plan (SPP) included:

- meetings of the ICC Executive Committee
- a half day session on the SPP at the Annual Planning meeting of the ICC – additional stakeholders from the broader Child Development, Family Support and Disability Services Communities attended, including Head Start/EHS, University of Vermont, Community College of Vermont, Disability Rights Advocacy, Disability Law Services, Vermont Parent Information Center, University Center for Excellence in Developmental Disabilities, Northern Lights Career Development Center, Department of Education Early Education Team and others.
- conference calls with Regional CIS-EIP Directors (Directors of the grantees that are responsible for carrying out CIS-EI in Vermont/Part C of IDE IA);
- a full day meeting with CIS-EIP Directors and Supervisors;
- discussions with the leadership of the Child Development Division
- a CIS-EIP staff and partners meeting devoted to child outcomes planning

SOMETHING HERE RE HOW WE OBTAINED SH INPUT INTO REVISIONS, E.G., ICC, VFACTS STEERING COMMITTEE

During the fall of 2010, state CIS-EI staff and members of the ICC: 1) discussed and identified targets for results indicators 2, 3, 4, 5, and 6 for FFYs 2011 and 2012; and 2) reviewed and made revisions to improvement activities/timelines/resources for Indicators 1, 2, 3, 4, 5, 6, 7, 8a, 8b, 8c, 9, and 14, extending the timelines through FFY 2012 when appropriate. Staff from the Northeast Regional Resource Center provided technical assistance to facilitate this review and revision process. As noted on page 2, a complete copy of the revised SPP is available at: http://dcf.vermont.gov/cdd/reports/IDEA_Part_C.

Along with posting the State Performance Plan on the web site of the Agency of Human Services, Department for Children and Families, Child Development Division at the link above, dissemination of the SPP also will occur by posting the SPP to the Vermont Department of Education and Vermont Family Network web sites. Hard copies will be distributed to each Regional Children's Integrated Services (CIS)-Early Intervention Program, ICC members, Co-Lead Agency Leadership, and key partners. Announcements will be sent to the Vermont Coalition for Disability Right, the Developmental Disabilities Council, The Vermont Children's Forum, Building Bright Futures state and regional councils, the Special Education Advisory Council and other key organizations about the availability of downloadable copies from the web sites, or hard copies from the Child Development Division. Annual public reporting on the performance of each Children's Integrated Services-Early Intervention Program against the targets in the SPP is available at: http://dcf.vermont.gov/cdd/reports/IDEA_Part_C/public_reports.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

Overview of Issue/Description of System or Process:

“Timely” is defined in Vermont as within 30 days of the family’s signature on the consent for services page of the Individualized Family Services Plan (IFSP). In addition, any services added to and/or revised on the IFSP at the periodic and annual reviews or at any other time, must also begin within 30 days of the parent’s consent for services, or if the services are one-time or periodic, that they occur on the date specified in the IFSP.

The **general systems** in place to collect, assess, measure and report on baseline data for this SPP and in future APRs for all indicators include the following systems for Vermont Part C of IDEA, formerly called the Family, Infant and Toddler Program, and renamed Children’s Integrated Services-Early Intervention (CIS-EI) in FFY 2009: (a) a hand posted time-defined child and family data system used to produce 618 child count data and related service information; (b) monitoring of regional Part C CIS-EI Programs (CIS-EIPs) and partners that consists of regular desk audits to ensure regional CIS-EI Programs meet compliance and performance standards, file reviews, parent focus groups, provider focus groups, and annual family surveys; (c) early intervention policies, procedures and forms; (d) a grant accountability system; (e) a system of dispute resolution; (f) a system of parental rights and due process and complaints review; and (f) a system of personnel development and support.

During FFY 2008, VT CIS-EI initiated the transition from a cyclical monitoring process (i.e., monitoring a regional CIS-EIP once every three years) to a more focused, ongoing monitoring process. As part of this transition, VT CIS-EI required all regional EIPs to conduct annual self-assessments. The purposes of the self-assessment include: 1) verifying timely correction of findings of noncompliance, 2) verifying subsequent correction of remaining noncompliance from previous years, 3) reinforcing self-assessments as part of ongoing supervision to promote program improvement in the regional CIS-EIPs, and 4) providing a vehicle for on-site technical assistance, i.e., state CIS-EI staff schedule follow-up visits to regional EIPs to verify and discuss results and address specific needs identified by regional CIS-EIP staff. Vermont Part C staff continue to monitor regional EIPs through their monthly desk audit of the child count data and discuss the data during weekly staff meetings and with the regional CIS-EIPs. These data, along with other data and information, enable state CIS-EI staff to follow up on any data “anomalies,” identify systemic noncompliance, and provide targeted and intense technical assistance.

Beginning December 2011, Children’s Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children’s Integrated Services staff anticipate this data management

system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

REGION	# of child-family files reviewed	# of children who received all services within 30 days	# who did not receive services w/in 30 days due to child-family reasons	Total OSEP counts as timely (all in & those w/child-family reasons	# of children who DID NOT receive services within 30 days NOT due to child/family circs	Reason for delay when not child/family circs	% Compliant
Addison	10	8	2	10	0		100%
Bennington	10	10	0	10	0		100%

Revised FFY 2004 Baseline Data: 107 of 125 (86.3%) of the infants and toddlers reviewed received their IFSP early intervention services in a timely during the reporting time period of July 2004 through June of 2005. 18 of the 125 (14.4%) did not receive timely services. Of the 107 who did receive timely services, 25 were due to child or family circumstances.

Caledonia – Southern Essex	10	4	4	8	2	Lack of SLP and EI staff	80%
Chittenden	15	7	3	10	5	Lack of SLP	66%
Franklin and Grand Isle	10	8	1	9	1	Lack of PT	90%
Lamoille	10	6	0	6	4	Lack of PT, OT and SLP and wait for HOP appt	60%
Orange Windsor	10	4	2	6	4	Lack of SLP and EI's	60%
Orleans Essex	10	4	5	9	1	No start date documented	90%
Rutland	10	6	4	10	0		100%
Washington	10	9	1	10	0		100%
Windham	10	8	2	10	0		100%
Windsor South	10	8	1	9	1	no start date documented	90%
TOTALS	125	82	25	107	18		86.3 %

Revised Discussion of Baseline Data:

Prior to December 2006 (Child Count 2004-2005) Vermont had not been collecting data on the initiation date of IFSP services. Data had been collected on the **projected** start dates. Beginning in December regions were notified that they must begin to record and report the **actual** start date of services and the child count forms were revised to capture this information along with the consent date. The Vermont child count data system beginning with December 2006 contains IFSP service information including, the date parents consented to services, the projected start date for each IFSP service and the actual start date of each IFSP service.

Based on OSEP instructions regarding collecting retroactive data for this indicator (phone calls with federal project officer), the Vermont State Part C Central Office collected data from each region for two periods of time FFY 2004 and FFY 2005. The information reviewed included: the number of days from the parent consent for services signature to the first occurrence of each service. In addition, for services that were not begun within 30 days of parent consent for services, the record was further reviewed for the reason for the delay. In circumstances where the delay was due to exceptional family circumstances, these circumstances were documented and were included in the count of children receiving timely services. If any service did not begin within 30 days of the projected start date and the reasons were not due to family circumstances, reasons were noted and the entire record was counted as not timely.

For the 7 regional programs with less than 100% timely service provision, 3 programs were between 99% and 90%, and 4 programs were below 90%. In regional programs where services were not begun within 30 days of parent consent, for reasons other than child and family circumstances, service coordinators listed the reasons services were delayed. In examining these data, the primary reason mentioned for the delays were lack of availability of Speech and Language Pathologists, in addition shortages of Occupational Therapists and Physical Therapists were noted.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%

2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities Indicator 1	Timelines	Resources
Revise forms annually to gather valid and reliable data, ensure accurate documentation by regional CIS/EIP staff and avoid collection of duplicate information. This includes revising monthly and annual child count instructions, forms, and service grids delineating that each service must begin within 30 days of family’s written consent and requiring regional CIS-EI staff to self-report compliance/noncompliance prior to submitting data.	Annually through FFY 2011 (note: electronic data management system to be phased in FFY 2011)	State CIS-EI Staff
Conduct bi-monthly data checks and submit data grids to CIS-EIPs to gather complete and accurate data. Generate weekly “extract report” to flag incorrect social security numbers, spelling of names and/or dates of birth.	Ongoing through FFY 2012	State CIS-EI staff
Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify regional CIS-EIPs below 100% target in analysis of data. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans.	Annually through FFY 2012	State CIS-EI staff

Activities Indicator 1	Timelines	Resources
Regional CIS-EIPs conduct annual self-assessment – to be analyzed by state CIS-EI staff and verified on-site, if necessary	Beginning FFY 2008 and annually through FFY 2012	Regional CIS-EIP Directors/Supervisors and state CIS-EI staff
Restructure funding system to better enable resources in the SLP-Communication, OT and PT fields to work with CIS-EI staff and families.	FFY 2009	State CIS-EI Coordinator, HPES Staff
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
Continue to disseminate information and rationale re 30-day timeline requirement/100% compliance target to CIS-EIP staff, ICC, partner schools and any partners doing service coordination via CIS blog, CIS listserv, annual CIS-EIP conference, monthly CIS-EIP Director conference calls, etc.	Ongoing through FFY 2012	State CIS-EI staff
Provide individualized technical assistance to CIS-EIPs when ongoing data analysis indicates need. These data may include targeted onsite file reviews, CIS-EIP self-assessments, and/or regular desk audits of monthly and annual data submissions.	Ongoing through FFY 2012	State CIS/CIS-EI staff
Collaborate with Vermont Association of Speech and Language Pathologists and Occupational and Physical Therapy Associations to address shortages	Ongoing through FFY 2012	State CIS-EI staff, community partners and SLP/OT/PT professional associations
Continue to collaborate with State Department of Education on State Improvement Grant and other personnel prep and development resources on recruiting, training and maintaining pediatric SLPs, PTs, OTs and other key personnel.	Ongoing through FFY 2012	Staff CIS-EI staff and DOE staff
CIS-EI/CIS/DOE monitoring and TA system: assess status of compliance, performance and support needed for regions, private providers and schools through ongoing and regular data review, analysis and feedback of CIS-EI child count/CIS data, file reviews, self assessments, complaints review, etc.	Ongoing through FFY 2012	State CIS-EI/CIS Team, DOE personnel and VICC Family Leadership and Support Committee
Continue to prepare for and deliver meaningful technical assistance, training, professional development and other improvement and support strategies.	Ongoing through FFY 2012	State CIS-EI/Part B 619 team along with CIS partners and regional CIS-EIPs and SUs/EEE staff
Continue to ensure effective multi-way communication system regarding continuous improvement activities/strategies with regional CIS-EIPs via CIS-EI/CIS TA liaisons, regular conference calls, CIS blog & listserv, CIS Community of Practice calls and annual conferences , email, on-site TA visits, guidance materials, etc. (multiple partners including SEA, CIS, and regional CIS-EIPs).	Ongoing through FFY 2012	State CIS-EI/CIS staff
Continue to seek resources through the SIG grant and	Ongoing through	State CIS-EI/CIS staff,

Activities Indicator 1	Timelines	Resources
other grants in the SLP-Communication, ASD, OT, PT and advanced child development fields to work with CIS-EI/CIS staff and families.	FFY 2012	community partners, University of Vermont CDCI-UCEDD, DOE and SLP/OT/PT professional associations
Complete and make available to CIS administrators and providers online technical assistance and training module clarifying Part C timeline requirements	Spring 2012	State CIS-EI/CIS staff
Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP	By March 2012	AHS and DOE staff
Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement	June 30, 2013	AHS and DOE staff
Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013	June 30, 2014	AHS and AOE staff
Require all CIS providers to complete, with 100% accuracy, the timeline module and submit documentation of completion to the state CIS office.	Beginning with SF 2014 contracts, July 1, 2013	State CIS Staff

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Early Intervention Services In Natural Environments

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

This indicator language as of 2-1-10 replaces indicator language in prior SPPs.

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

Measurement:

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

This change to the measurement language as of 2-1-10 replace measurement language in prior SPPs.

Revisions in bold to the Indicator and Measurement language in SPP-Revised 2-10 replaces that in prior SPPs.

Overview of Issue/Description of System or Process:

Vermont currently and historically has put high value on the use of natural environments for carrying out the IFSP strategies and outcomes. Nearly 100% of our services are provided in family's homes, child care or Early Head Start settings. Natural environments are discussed during IFSP meetings and home visits and documented in the IFSP. Professional development addresses the use of daily routines in natural environments. In the past several years Vermont Part C has brought OSEP sponsored technical assistance on natural environments. Vermont Part C considers natural environments and the use of daily routines to be best practice that is of great use to the broader child development and family support services and therefore offered these trainings to this broad group of early childhood practitioners.

All data reported to OSEP via the annual 618 reports are reviewed thoroughly by the state CIS-EI staff and discussed with regional CIS-EIPs if there are questions about the data as they come in and before entered. The data used for the baseline for indicators 2, 5 and 6 come from the CIS-EI child count database. The child count database is generated annually in each region by hand by service coordinators and submitted to the State Data Coordinators for review and data entry into a stand-alone annual Access data base. The data used for the 618 data reporting are carefully reviewed and discussed with regional CIS-EIP staff if there are any questions prior to data entry. The accuracy and validity of the system was reviewed and approved by OSEP in their site visit to Vermont in July of 2004.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

The data in the table below are from the current child count data system and are used to report data on this indicator to OSEP via the 618 data reporting system.

Baseline Data for FFY 2004 (2004-2005) from 618 data base:

SPP Indicator 2 Region	Number of children with active IFSPs 12/1/04 Child Count 618 Data Collection	Number and percent of children with active IFSP's who primarily receive early intervention services in the home or programs for typically developing children.	Notes
Addison	26	26 100%	
Bennington	41	39 95%	2 (5%) Service Provider Location
Caledonia	24	24 100%	
Chittenden	129	125 97%	3 (2%) Service Provider Location 1 (.007%) School
Franklin/Gl	55	55 100%	
Lamoille	29	29 100%	
Orange/Windsor	63	33 100%	
Orleans/Essex	31	30 97%	1 (3%) Service Provider Location
Rutland	52	35 67%	16 (31%) Service Provider Location 1 (2%) School
Washington	58	57 98%	1 (2%) School
Windham	55	54 98%	1 (2%) Service Provider Location
Windsor South	36	36 100%	
TOTALS	599	573 96%	23 (4%) Service Provider Location 3 (.002%) School

Discussion of Baseline Data:

Of the 599 children served by Vermont Part C 96% (573 of 599) received services in natural environments. Of these 599 children, 106 (18%) were served primarily in community based settings such as child care, Early Head Start etc; 467 of the children (78%) were served primarily in their home. The remaining 26 children (5%) were served primarily through the service provider location, in mainly one region. The region with the highest number of children receiving services primarily through the Service Provider Location was recently monitored and has submitted a corrective action plan to address this issue. The situation in this region has to do with a lack of resources for physical therapy, occupational therapy and speech and

language services. Most of these services are provided at a group practice that has historically not provided home visiting or community based services. In the few situations where the school is listed it means that speech and language services for that child are being offered at the office of a school based SLP or a school based autism program. In addition, feedback from regions indicate that there are parent preferred providers in combination with a lack of well trained infant toddler therapists in the areas of speech, physical therapy and/or occupational therapy.

FFY	Measurable and Rigorous Target <u>Revised Based on OSEP Request for 2/07</u>
2005 (2005-2006)	96%
2006 (2006-2007)	95%
2007 (2007-2008)	95%
2008 (2008-2009)	95%
2009 (2009-2010)	95%
2010 (2010-2011)	96.1%
2011 (2011-2012)	96.2%
2012 (2012-2013)	96.2%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities Indicator 2	Timelines	Resources
Clarify regulations and procedure for service provision outside the natural environment in memo and on child count instructions and forms. Emphasize justification requirement and clarify IFSP team decision-making process. Reinforce planning for services to be	Annually through FFY 2012	State CIS-EI staff

Activities Indicator 2	Timelines	Resources
subsequently provided in natural environment.		
Develop and disseminate standardized form to regional CIS-EIPs to ensure accurate documentation for children receiving services outside their home or community-based setting.	FFY 2010	State CIS-EI staff
Provide individualized technical assistance to CIS-EIPs when ongoing data analysis indicates need. These data may include targeted onsite file reviews, CIS-EIP self-assessments, and/or regular desk audits of monthly and annual data submissions.	Annually through FFY 2012	State CIS/CIS-EI Staff
Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify regional CIS-EIPs below 100% target in analysis of data. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans.	Annually through FFY 2012	State CIS-EI staff
Meet with identified group practices (including Kids Rehab Gym) as needed to clarify practices under Part C. Meet with DOE/EEE-SPED Unit on school office-based service provision and with LEA with CIS-EIP director.	January 2006 and ongoing, as needed through FFY 2012	State and regional CIS-EI staff, SEA and LEA as needed
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
<i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i>	<i>By March 2012</i>	<i>AHS and DOE staff</i>
<i>Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i>	<i>June 30, 2013</i>	<i>AHS and DOE staff</i>
<i>Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013</i>	<i>June 30, 2014</i>	<i>AHS and AOE staff</i>

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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:

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

Overview of Issue/Description of System or Process:

The purpose of measuring infant and toddler developmental outcomes is to have data that will inform the regional programs, the State of Vermont, the US. Department of Education's Office of Special Education Program and Congress of the impact early intervention have on helping to produce positive child outcomes. Linking child outcomes in groups of children in three functional areas of development to typically developing children for program evaluation and continuous improvement purposes is expected to provide information that will allow Vermont to look at the conditions associated with successful outcomes (such as type and intensity of services, training and qualifications, methods of service delivery, by region and statewide etc). The data will not be used to compare individual children; child data from outcome measurement will be anonymous and coded and stored separately from child records.

The individual child's ongoing assessment information, part of the IFSP and child's file, indicates progress in a manner that families and service providers find useful to them. This assessment information will be enhanced and will continue to be the first line of information used in discussing child functioning, progress outcomes, strategies and improvements. Several families, state agency representatives, advocates and service providers at the fall, 2005 VICC meeting expressed grave concern over the impact that the child outcomes rating process might have on them emotionally. They felt many families, whose children are so young and quite vulnerable, may prefer to not enter the world of comparing how well their child is doing in relationship to children who are typically developing. The purpose for collecting child outcomes data was reiterated (for purposes of program evaluation, not particular child evaluation), the plan to collect data was described and the policy/procedure, after considering the input, includes an option for family involvement in the process.

Vermont's plan to measure infant and toddler outcomes, at entry and exit, who receive CIS-EI services for at least six months will include the following elements:

- The collaborative development of policies and procedures that describe the rationale, as well as who will be involved, what practices will be used, when it will be done, where and how the data will be collected, reported, analyzed and used for program evaluation/continuous improvement;
- A budget to support cost projections and estimates of time to collect data for IFSP teams, and costs associated with revisions and operation of data management-reporting system;
- Dissemination of the rationale, policies and procedures to the field;
- Provision of initial and ongoing professional development and/or technical assistance to the CIS-EIP Directors, supervisors, staff and partner- providers;
- Quality of data collection, reporting, storing – methods to assure the accuracy and appropriate use of the infant-toddler outcomes data;
- Procedures to be used in regional and statewide analysis of the data and follow-up to the analysis;

Each of these elements is described below.

The **development of policies and procedures** to guide Vermont's infant and toddler outcomes assessment and measurement practices in collaboration with other stakeholders.

The policy and procedure for administering the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Rating Scale will be built on the CIS-EI initial and ongoing assessment process. This process involves the collection and analysis of multiple sources of information on the current level of child functioning in each of the five developmental areas as part of the multi-disciplinary evaluation for eligibility/IFSP service planning activities completed initially by the child and family's team and assessed over time by the child's IFSP team, using timelines already in place. The evaluation and ongoing assessment process includes information from state-approved assessment tools (current tools include the DAYC, AEPS, HELP, and the IDA). The selection of additional tools will depend on further identification of tools that are considered especially useful for infants, toddlers, their families and to providers planning or delivering early childhood (special education) services for children ages three and up. Vermont expects to link with efforts by Early Head Start, child care and other early childhood development services as improved assessments become available. The CIS-EI initial evaluation and ongoing assessment process also includes observations from families and providers, reviews of health and medical information, clinical opinion and other relevant information, required by Part C of IDE IA and best practices.

The information from this assessment process will be integrated, analyzed and used to produce the Child Outcomes Summary Rating Scale data required by OSEP:

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

The Child Outcome Summary Rating Scale is completed for children on entry. Using the information garnered from the developmental assessment process, this rating scale is done within one week of the initial IFSP. The second rating scale is completed for children who have received at least six months of early intervention services. This is done during the transition process before children exit from CIS-EI. The rating scale is completed by qualified personnel (e.g., Developmental Educator, family if they wish, Community Resource Parent and key service providers) who are responsible for conducting the initial and/or ongoing all domain developmental assessments. Staffs are encouraged to use the IFSP meetings to engage all providers in the process of completing the rating scale.

Child Outcomes Summary Rating Scale data are coded regionally and documented on a statewide form that all regions will submit to the state office where it will be hand entered into a spreadsheet for state and regional reporting and analysis until the development of a data management system is operational.

The VICC's Executive Committee reviewed the policy, procedure and overall plan elements as did the Early Education Team of the Vermont Department of Education and the Child Development Division's Leadership Team.

Costs/budget related to the work of administering the ECO Center's Child Outcomes Summary Rating Scale.

Costs of IFSP team assessment on entry and exit, regional coding, separate storage, data entry on to statewide forms, statewide data management system completion and personnel to enter and analyze data regionally and statewide, etc. was discussed with CIS-EIP Directors, Co-Lead Agencies and the Department for Children and Families/Child Development Division leadership – the administrative agency for CIS-EI.

Dissemination of rationale, policy, procedures to the field is coordinated whenever possible with dissemination of the early childhood special education policy and procedures. Information will also be available on the AHS/Department for Children and Families, Child Development Division web site, with copies or links from the SEA special education and early childhood web sites to the Child Development Division and the web site of the Vermont Parent Information Center. Paper copies will be sent to the VICC membership and any other individuals who may request a copy.

This plan was presented and discussed at the combined meeting of the 619 – Early Childhood Special Education Coordinators, the regional CIS-EIP lead staff, and the Early Education Initiative Coordinators meeting on December 8th, an event sponsored by the Early Education Team, which includes these three services plus Even Start.

The VICC received copies and discussed the plans, policy and procedures at their quarterly meeting in February, 2006 and at meetings throughout the year.

Provision of initial and ongoing professional development, training and/or technical assistance to the CIS-EIP Directors, supervisors, staff and partner- providers.

Statewide training and technical assistance on the assessment process that is the foundation for the infant and toddler outcomes work was offered in the spring, 2006. Both the HELP (May 12, 2006) and the IDA (June 9, 2006) were offered to a statewide audience consisting of regional CIS-EIP administrators, staff and partner providers as well as to state personnel and staff from 619 programs, early childhood mental health programs, Head Start and the VNA. Ongoing pre and in-service efforts addressing assessment of young children are occurring across the state. A required University of Vermont course for undergraduate and graduate students in Early Childhood Special Education (ECSE) is offered on Assessment of Young Children with Disabilities and their Families, funded in part through the OSEP State Improvement Grant. In addition course work planned for the near future includes a course on Assessment and Eligibility for those obtaining the ECSE endorsement.

A coordinated statewide training between DOE 619 and Part C programs was offered at the December 8, 2005 meeting of EEE, EEI and regional CIS-EIP personnel on the rationale for and plan to collect, analyze and publish the program evaluation data on outcomes for children from birth to five. The initial all day training for the regional CIS-EIP pilot was held in March, 2006 which addressed the foundation and expectations for a statewide system of program evaluation, OSEP's three child outcomes and logistics for conducting, summarizing and reporting on the child outcomes. A PowerPoint presentation with accompanying materials and state forms was developed for the pilot and subsequently modified for the statewide roll out to all regional CIS-EIP staff and partner providers in September. The three pilot regions received ongoing technical assistance through monthly conference calls and an on-site visit towards the end of the reporting period. As a result of the pilot, additional refinements were made to types of descriptive data collected as well as to the methodology. Statewide training occurred in the fall, 2006 through a half day interactive TV session followed by a full day onsite training, one week later. Regions have been offered technical assistance on an individual basis and a statewide follow-up is planned for February, 2007.

Training will continue to be available on an annual basis to new CIS-EIP practitioners and ongoing technical assistance will be available to CIS-EIP practitioners and through monthly statewide meetings. It will also be

available through individual technical assistance to regions as follow up to their correction action plans that occur as a part of monitoring, and it will be available on request. Issues that are priorities for professional development and training/technical assistance include the OSEP monitoring priorities and indicators as well as other compliance and/or performance issues that come to attention during regional monitoring, through the complaints system and/or other general supervision systems.

In the fall of 2007, a statewide training will prepare service providers and administrators on how to use and interpret the reports of child outcome data for program improvement.

Quality of data collection, reporting, storing – methods to assure the accuracy and appropriate use of the infant-toddler data on outcomes are as follows:

Prior to completing the ECO Child Outcomes Summary Form, accuracy of the evaluation and assessment data is assured by the IFSP team that includes the parent/guardian.

In addition, focused monitoring and selected file reviews will include a review of the summary ratings and compare these ratings with the child's assessment data and the rationale for rating (given on the summary rating form).

Procedures for the analysis and use of the regional and statewide child outcomes data.

A small workgroup consisting of the Research Associate in charge of developing the data management system, with state CIS-EI staff, a regional CIS-EI director, a representative from the Early Education Team and several key staff from the Bright Futures Child Care Management System/Child Development Division Leadership Team, and staff from Marketing Partners will develop a plan (objectives and curriculum outline) to train Regional CIS-EIP Directors and state CIS-EI staff on how to use the data from the Child Outcomes Summary Rating Scale Summary for program evaluation and continuous improvement, including what are the appropriate questions to ask when the data are presented – pre and post analysis (the role of staffing, qualifications, caseloads, child status/conditions impacting development, intensity of services etc).

Administrators participated in the fall, 2006 trainings, as well as CIS-EIP Directors' meetings to learn the purpose and potential impact of the child outcomes program evaluation. Additionally, information sessions addressing concerns specific to administrators will be conducted in February, 2007, including how to interpret and use the evaluation results to benefit their program.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012.

New Baseline Data for FFY 2004 (2004-2005):

Entry Data:

The ECO Center’s Child Outcomes Summary Rating Scale was used to collect data on children who are under 30 months of age and entering CIS-EI beginning April 1, 2006 from three regions/programs that are representative of Vermont’s child and family population.

Entry data on each of three child outcomes for period April 1, 2006 through June 30, 2006 in two OSEP reporting categories:

Outcomes	Children functioning at a level comparable to same age peers		Children functioning at a level below same age peers*	
	Number	Percent	Number	Percent
Outcome 1: Positive Social Relationships	9	26%	25	74%
Outcome 2: Acquire and use knowledge and skills	2	6%	32	94%
Outcome 3: Take appropriate action to meet needs	9	26%	25	74%

*Percentages are based on 34 children who participated in the pilot.

“Criteria for defining “Comparable to same age peer”: Vermont utilized the ECO Child Outcome Summary Form to arrive at a score from 1 through 7 based on how a child’s performance compared to same age peers. The child’s score was derived from assessment data including a state approved child assessment tool (listed above), child observations, caregiver interviews and record reviews. As recommended by ECO, scores of 6 or 7 were defined as “a level comparable to same age peer” whereas scores from 1 to 5 were defined as “a level below same aged peers”.

Vermont will use the following measurement strategies to respond to the five OSEP reporting categories for the 2008 APR:

1. All children (from the three pilot regions plus the nine other Vermont regions) who were referred to CIS-EI as of October 1, 2006 and are found eligible for CIS-EI with an expected length of service to be a minimum of 6 months will be included in the child outcome data. Measurement will occur at two points. Entry data will be collected within one week of completing the IFSP. Exit data will be collected 30 days prior to transition from CIS-EI.
2. Vermont utilizes multiple data sources as part of its evaluation process to arrive at the ECO child outcome ratings. These measures include a state approved assessment tool (i.e., AEPS, DAYC, HELP and the IDA), child observations and caregiver reports and interviews. Assessments are conducted by early interventionists (e.g. developmental educators and health related service providers) with knowledge and expertise in infant/toddler development and assessment.
3. Data will be summarized using the ECO Child Outcome Summary Forms. A team, consisting of those conducting the evaluation and the service coordinator will be involved in determining the ratings on the ECO scale. This 7-point system summarizes the child’s level of functioning in each of the three outcome areas in relation to typically developing peers. The high point (7) on this scale

indicates outcome achieved at an age-expected level. The low point (1) indicates the farthest distance from age-expectations.

4. Vermont's regional programs will submit hard copies of the child outcome summary data along with the child count data on a monthly basis to the state office. The summary scores will then be entered into the state's data system.
5. To obtain data on the OSEP's five reporting categories, Vermont will match and compare the three outcome ratings for each child at entry with the three outcome ratings scored for that child at exit. The comparison of ratings at entry and exit for children entering and exiting between 10/1/2006 and 6/30/2007 will yield the baseline data for the SPP/APR 2008. These data will then be analyzed into the following five OSEP reporting categories for each of the three child outcomes using the procedures outlined by ECO.
 - a. Children who did not improve functioning.
 - b. Children who improved functioning but not sufficient to move nearer to functioning comparable to same aged peers.
 - c. Children who improved functioning to a level nearer to same aged peers but did not reach it.
 - d. Children who improved functioning to reach a level comparable to same aged peers.
 - e. Children who maintained functioning at a level comparable to same aged peers.

In addition, the state will analyze by state and region the mean and distribution of the entry status, exit status, and percentages of children who increased ratings from time 1 to time 2 and generate statewide and regional reports.

Discussion of Baseline Data:

Baseline data are not available at this time.

Targets will be set once baseline data are available.

New Improvement Activities/Timelines/Resources:

To ensure the quality of data, Vermont plans to build a reliable and valid data collection system through the following:

1. Ongoing training and technical assistance will continue, utilizing conference calls, periodic statewide learning community meetings and ITV. The purpose of these TA sessions will be to address the ongoing challenges and questions that crop up in the system as well as issues that come to light as a result of focused monitoring. In addition, the state's FAQ will continue to be updated. Training will also be available on an annual basis to new CIS-EI practitioners. A PowerPoint and CD of the original statewide training are available to individual practitioners and regions.
2. The quality of the evaluation and assessment data is assured through the quality of the personnel that conduct the assessments and through the review of the assessment data by the IFSP team that includes the family. Focused monitoring and file reviews will address the accuracy of the summary ratings through a comparison of the child's assessment data and rationale for rating (given on the summary rating form) with the ratings. In addition, missing data will be identified through comparing number of new referrals identified through monthly child count data with the number of child outcomes for a selected period. The same process will identify any missing data for the point of exits, through the comparison of exits on the monthly child count with number of child outcome ratings at exit.

Revised for 2/1/08 reporting on Indicator 3 is italicized.

Overview of the State Performance Plan Development:

Please refer to the description provided under Indicator 1 as it applies to each indicator in Vermont's Part C State Performance Plan (SPP) for 2005-2010.

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);*
- c. *Use of appropriate behaviors to meet their needs.*

Measurement:

(as stated by OSEP, please see beginning of Indicator 3)

Overview of Issue/Description of System or Process:

Revisions/Updates to the process reported 2/1/08:

The following activities were conducted to enhance the reliability and validity of the COSF data:

- *In spring, 2007 reviewed COSF forms to identify incomplete and inaccurate data and revise FAQ's.*
- *A statewide ITV session was held to review and update data collection and reporting procedures and address errors and omissions on COSF data in June, 2007*
- *Comparison of COSF data with '618' data for the same period to ensure all appropriate families are receiving child outcomes (completed for 2005 – 2006 child count). In the future, COSF entry and exit data will be monitored against monthly child count data reports by the state office.*
- *Developed criteria to review COSF forms for alignment between supporting evidence and ratings. A sample of COSF forms from each region has been reviewed by state representatives from EEE and CIS-EI.*

All other processes described in the 2005-06 SPP remain the same.

Progress Data:

The data in the following tables are not baseline data. Rather, they contain the first year of progress data for children exiting during the 2006-2007 reporting period. The data represent the first group of children (n = 20) who had both entry and exit data by June 30, 2007 and had participated in the Family, Infant and Toddler Program a minimum of 6 months.

Table 1: Progress Data for Child Outcome 1 (number and percentage of children)

Outcome 1: Positive social-emotional skills (including social relationships)	Number of children	Percentage of children
<i>a: Children who did not improve functioning</i>	0	0%

Outcome 1: Positive social-emotional skills (including social relationships)	Number of children	Percentage of children
<i>b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers</i>	1	5%
<i>c: Children who improved functioning to a level nearer to same-aged peers but did not reach it</i>	9	45%
<i>d: Children who improved functioning to reach a level comparable to same-aged peers</i>	7	35%
<i>e: Children who maintained functioning at a level comparable to same-aged peers</i>	3	15%
<i>Total</i>	N=20	100%

Table 2: Progress Data for Child Outcome 2 (number and percentage of children)

Outcome 2: Acquisition and use of knowledge and skills (including early language/communication)	Number of children	Percentage of children
<i>a: Children who did not improve functioning</i>	0	0%
<i>b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers</i>	0	0%
<i>c: Children who improved functioning to a level nearer to same-aged peers but did not reach it</i>	11	55%
<i>d: Children who improved functioning to reach a level comparable to same-aged peers</i>	5	25%
<i>e: Children who maintained functioning at a level comparable to same-aged peers</i>	4	20%
<i>Total</i>	N=20	100%

Table 3: Progress Data for Child Outcome 3 (number and percentage of children)

Outcome 3: Use of appropriate behaviors to meet their needs	Number of children	Percentage of children
<i>a: Children who did not improve functioning</i>	0	0%
<i>b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers</i>	1	5%
<i>c: Children who improved functioning to a level nearer to same-aged peers but did not reach it</i>	9	45%
<i>d: Children who improved functioning to reach a level comparable to same-aged peers</i>	8	40%

Outcome 3: Use of appropriate behaviors to meet their needs	Number of children	Percentage of children
<i>e: Children who maintained functioning at a level comparable to same-aged peers</i>	2	10%
<i>Total</i>	<i>N=20</i>	<i>100%</i>

Discussion of Progress Data:

Progress data reported in 2010 will be considered baseline data.

Progress data were available on 20 children this year. Results from this group may not be representative of all children participating in Vermont’s Family, Infant and Toddler Program at any given time. This report represents children who received services in the pilot sites beginning April 1, 2006 and statewide, beginning October, 1, 2006 and exited after 6 months of service on or before June 30, 2007. Therefore, these children were probably between the ages of 23 and 30 months of age at entry and were in the program from between 6 to 13 months.

In contrast, children can enter the program at any point between birth and 36 months and conceivably receive programming for upwards of three years if they entered at birth. Age at entry and time in program are not the only factors where a discrepancy exists between current progress data and the entirety of children served in CIS-EI. Additionally, children who enter the program at younger ages (rather than at 2 years and older) tend to have more intense needs, and it is important to capture the results of programming for these children as well. The first complete data set, including children who have received services for anywhere from 6 to 36 months should be available in 2010.

Measurable and Rigorous Target

Targets will be set once baseline data are available (2010).

Improvement Activities/Timelines/Resources FFY 2005 through FFY 2010:

Ongoing training and technical assistance will continue, utilizing conference calls, periodic statewide learning community meetings and interactive television. The purpose of these TA sessions is to address the ongoing challenges and questions that crop up in the system as well as issues that come to light as a result of focused monitoring. In addition, the state’s FAQ will continue to be updated. Training will also be available on an annual basis to new CIS-EI practitioners.

The quality of the evaluation and assessment data is assured through the quality of the personnel that conduct the assessments and through the review of the assessment data by the IFSP team that includes the family. Focused monitoring and file reviews address the accuracy of the summary ratings through a comparison of the child’s assessment data and rationale for rating (given on the summary rating form) with the ratings.

Based on the findings from the COSF review of alignment between supporting evidence and outcome ratings, training will be developed and implemented. Continuous review of the accuracy, completeness and validity of the data is assigned to a team that consists of the TA liaison for the region, the Director of Professional Development and the Part B – 619 Consultant. Training, TA and other activities to assure the process and the data will be carried out throughout the complete period of the SPP (through the FFY 2010) to facilitate practitioner’s observation and documentation of child functioning.

End of 2-1-08 revisions for Indicator 3, and revisions as of 4-14-08

Progress reporting for FFY 2007: Overview of the State Performance Plan Development:

Please refer to the description provided under Indicator 1 as it applies to each indicator in Vermont’s Part C State Performance Plan (SPP) for 2005-2010.

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);
- c. Use of appropriate behaviors to meet their needs.

Measurement:

(as stated by OSEP, please see beginning of Indicator 3)

Overview of Issue/Description of System or Process:

(as stated in previous version for Indicator 3)

FFY	Measurable and Rigorous Target
FFY 2007 (reporting period 7-07 6-08)	NA: Baseline data will be reported in SPP in FFY 2010

Baseline (Progress) Data for FFY 2007 (July 2007 through June 2008):

The data presented in the following tables are not baseline data. Rather, they contain the second year of progress data for children exiting during the FFY 2007 reporting period. The data represented infants and toddlers who had both entry and exit data between July 1, 2007 and June 30, 2008 and had been in the program a minimum of six months.

Progress Data for Infants and Toddlers Exiting During FFY 2007

A. Positive social-emotional skills (including social relationships):	Number of Infants/Toddlers	Percentage of Infants/Toddlers
a. Children who did not improve functioning.	2	1%
b. Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	41	22%
c. Children who improved functioning to a level nearer to same-aged peers but did not reach it.	26	14%
d. Children who improved functioning to reach a level comparable to same-age peers.	61	33%
e. Children who maintained functioning at a level comparable to same-aged peers.	57	30%
Total	N = 187	100%

B. Acquisition and use of knowledge and skills (including early language/communication):	Number of Infants/Toddlers	Percentage of Infants/Toddlers
a. Children who did not improve functioning.	1	<1%
b. Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	33	18%
c. Children who improved functioning to a level nearer to same-aged peers but did not reach it.	49	26%
d. Children who improved functioning to reach a level comparable to same-age peers.	80	43%
e. Children who maintained functioning at a level comparable to same-aged peers.	24	13%
Total	N = 187	100%

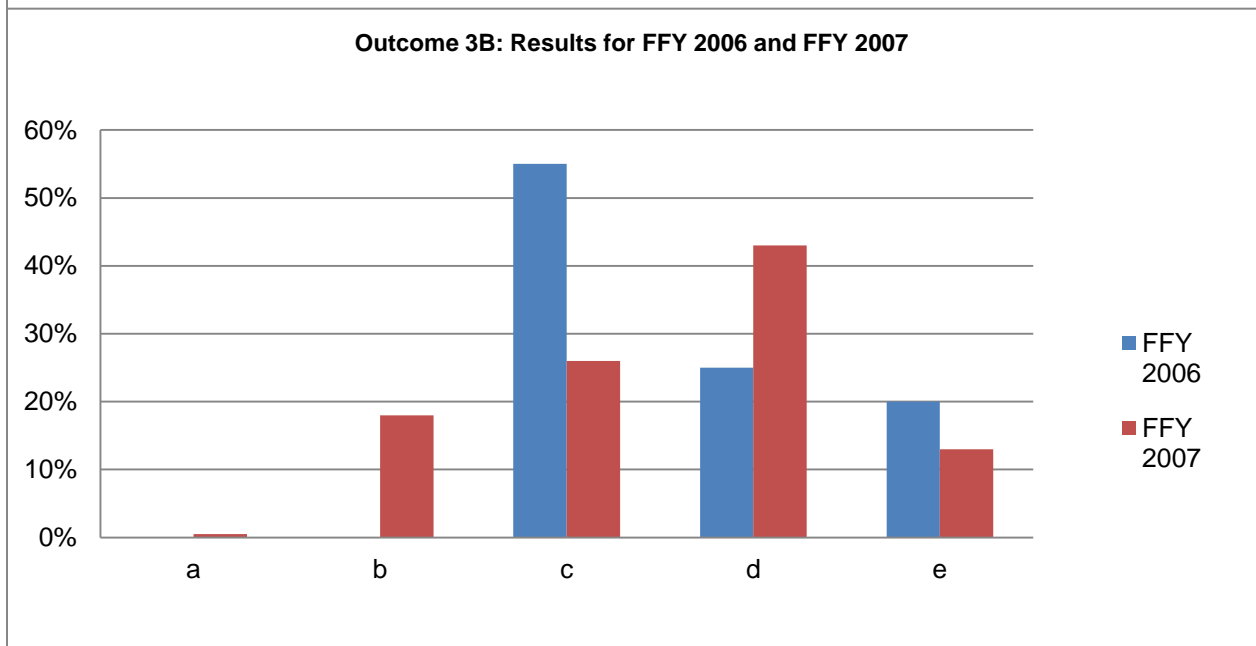
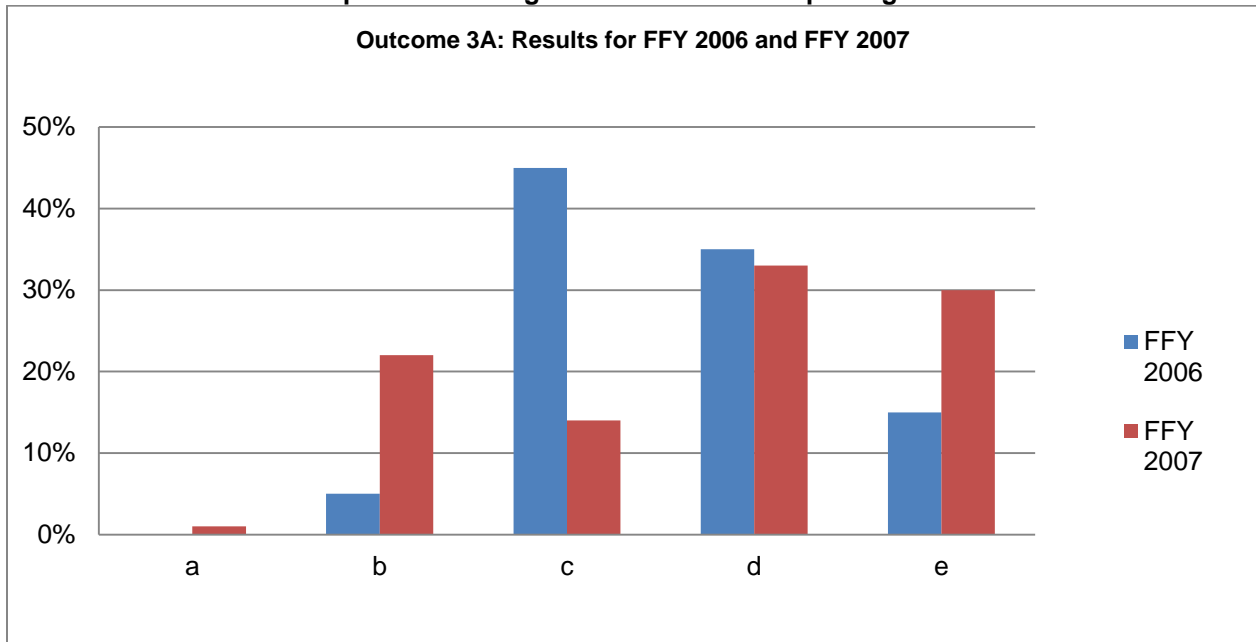
C. Use of appropriate behaviors to meet their needs:	Number of Infants/Toddlers	Percentage of Infants/Toddlers
a. Children who did not improve functioning.	0	0
b. Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	34	18%
c. Children who improved functioning to a level nearer to same-aged peers but did not reach it.	29	15%
d. Children who improved functioning to reach a level comparable to same-age peers.	80	43%
e. Children who maintained functioning at a level comparable to same-aged peers.	44	24%
Total	N = 187	100%

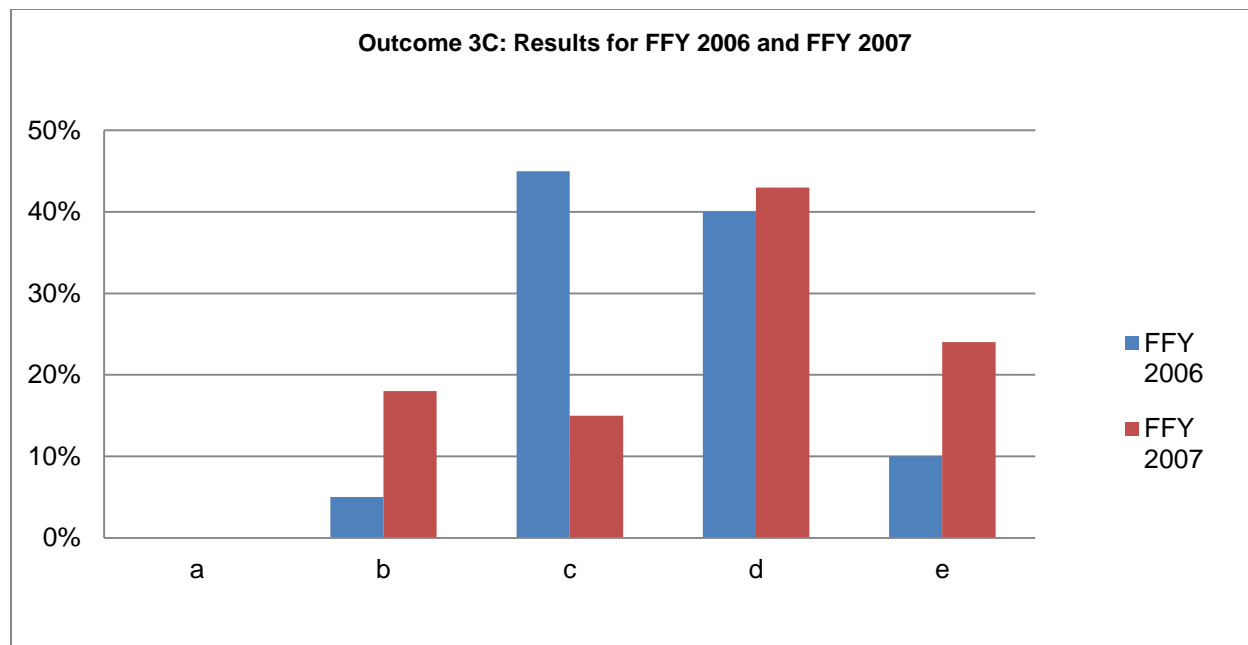
Discussion of Baseline (Progress) Data:

Progress data reported in FFY 2010 will be considered baseline data.

Progress data are available on 187 children for the reporting period, July 1, 2007 through June 30, 2008. Results from the FFY 2007 analysis are not yet representative of all children from all regions of the state. This report represents data for children in the three pilot sites beginning April 1, 2006, with a potential range of program participation between six and 26 months as of June 30, 2008. Statewide collection of child outcome data began October 1, 2006 and therefore the potential range for program participation for all Vermont children for the reporting period ending June 30, 2008 is between six and 20 months.

Comparison of Progress Data for Two Reporting Years





As one would expect, category ‘a’ numbers are very small to non-existent across all three outcomes for both years. This category may represent children with significant delays, a degenerative condition, or an infant who hasn’t begun to exhibit delays at entry. It is expected that this category may grow slightly as the period of program participation is extended to include all children.

There are only a few discernable patterns in the data at this early stage. For FFY 2007, all three outcomes show the largest gain in category ‘d’, signifying improved functioning for this population of infants/toddlers (34% to 44% of children exiting from program) that is comparable to same-aged peers. In category ‘e’, Outcome 2 has the lowest percentage of children who came into the program with age appropriate skills that were maintained. This is not surprising considering the high number of children eligible for communication delays that would fall into this outcome. Also, it is notable that the percentages of children in the combined categories of d and e across all outcomes are high (For FFY 2007, 55% to 66%) and might be reflective of the fact that younger children (with potentially more significant delays) are not represented in the data yet.

Targets will be set once baseline data are available.

Revised SPP (as of 2/2/09) Improvement Activities/Timelines/Resources FFY 2005 through FFY 2010 are located at: <http://dcf.vermont.gov/cdd/reports/IDEA Part C>

Outlined below are the revised as of 2/2/09 Program Improvement Activities for Indicator 3.

Activities Indicator 3	Timelines	Resources	Notes
Provide procedural guidance/clarifications based on review of reliability and validity checks of COSF data	Special Professional Development-TA sessions Spring 2009 and ongoing	Professional Development Director/Part C State and regional resources, including Part B	Increase joint C-B regional TA sessions regarding feedback on COSF validity issues on reporting forms in Spring 2009

Activities Indicator 3	Timelines	Resources	Notes
C/CIS/DOE monitoring and TA system: assessing accuracy and completeness of data submitted on child outcomes via on-site monitoring and other means of regular review.	Spring of 2006 and ongoing through FFY 2010	State Part C/CIS Team, DOE personnel and VICC Family Leadership and Support Committee	
Preparation for and delivery of meaningful technical assistance, training, professional development and other improvement and support strategies.	Ongoing through 2010	Professional Development Director, State Part C – B team along with regional EIP resources as needed	Make sessions available to CIS and interested partners as well as C-B providers.
Using multi-way communication system regarding continuous improvement activities/strategies with regional EIPs via C/CIS TA liaisons, regular conference calls, email, onsite TA visits, regional trainings, guidance materials, etc. (multiple partners including SEA, CIS, regional EIPs)	Spring 2009	State Part C/CIS staff, NERRC	Consider regular CIS staff briefings to review regional issues regarding child outcome data system and identify regional TA needs
Infrastructure infusions and/or adjustments: Regional and State capacity - resource/personnel issues addressed through annual budgeting and planning process (caseloads, workloads, expertise needed).	Ongoing beginning January 2006 through FFY 2010	State staff	As more funds become available use to buy time for Professional Development and TA for Child Outcomes efforts, integrated with other key indicators like initial and ongoing assessment in CIS (and across other services).
Data management system developed – web based, regionally driven, practice based, real time is used for child outcomes data collection and analysis purposes. Further develop strategies to review data accuracy and use findings to inform regional professional development activities. Regional EIPs are trained and supported	Through FFY 2010	Part C/CIS staff/Child Development Division and Department IT staff & Part C – B Professional Development	Develop data system to link demographic data to child outcome ratings

Activities Indicator 3	Timelines	Resources	Notes
in converting to an electronic regionally entered data system.			
<p>Continue to seek national and other technical assistance and professional development resources related to the meaningful use of these data in program evaluation and continuous improvement.</p> <p>Continue participation in ECO Communities of Practice, including COSF data analysis and TA cadre.</p> <p>Continue to embed child and family outcomes into Vermont Foundation for Early Learning framework and the evolving Infant and Toddler Early Learning Guidelines.</p>	Ongoing through 2010	<p>Professional Development Director/State Part C/CIS staff, Early Education Team, University of Vermont CDCI, other DOE; CSEFEL, CELL and Zero To Three, ECO</p> <p>State FEL Team</p> <p>Infant and Toddler Early Learning Guidelines Team</p>	Consider linking related data, (demographic, type of group care settings etc.) to child outcomes (COSF ratings).

End of 2/2/09 revisions for Indicator 3.

Part C State Performance Plan (SPP) Revised for FFY 2008

Revised SPP Indicator C3 as of 2-1-10

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)

<p>Measurement:</p> <p>Outcomes:</p> <p>A. Positive social-emotional skills (including social relationships);</p> <p>B. Acquisition and use of knowledge and skills (including early language/communication); and</p>

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes (use for FFY 2008-2009 reporting):

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

Measurement for Summary Statement 1:

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

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

Overview of Issue/Description of System or Process:

As stated previous version for Indicator 3

Baseline Data:

The data reported in the following tables are of children exiting from Vermont's Part C program between July 1, 2008 and June 30, 2009 who had both entry and exit data and had been in the program a

minimum of 6 months. Infants/toddlers were considered ‘comparable to same aged peers’ when they were rated a ‘6’ or ‘7’ on the COSF rating scale.

Progress Data for Infants and Toddlers Exiting 2008-2009

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	6	2.0%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	51	16.6%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	47	15.3%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	94	30.6%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	109	35.5%
Total	307	100%
B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	3	1.0%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	52	16.6%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	77	24.5%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	130	41.4%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	52	16.6%
Total	314	100%
C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	1	0.3%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	52	16.8%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	53	17.2%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged	128	41.4%

peers		
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	75	24.3%
Total	309	100%

Baseline Data for Infants and Toddlers Exiting 2008-2009

Summary Statements	% of children
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	71.2%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	66.1%

Summary Statements	% of children
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	79%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	58%
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	77.4%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	65.7%

Discussion of Baseline Data:

This is the first year that baseline data are available for this indicator. Baseline data are available on 315 infants and toddlers for the reporting period, July 1, 2008 through June 30, 2009. This represents a substantial increase over last year’s total of infant/toddlers (n = 187).

Participation Rate:

Results from the FFY 2008 (7/1/08 – 6/30/09) analysis is not yet inclusive of a full cohort of children receiving services statewide (i.e., children receiving Part C services for between 6 and 36 months). This report represents data for children in the three pilot sites beginning April 1, 2006, with a potential timeframe for child participation in COSF data collection between 6 and 38 months, as well as statewide data beginning October 1, 2006 with a potential timeframe for child participation in COSF data collection between 6 and 33 months. The potential for a complete statewide cohort will occur 3 years from the date of statewide initiation of COSF data collection, October, 2009.

In terms of statewide participation rate, data were available on at least one outcome for 315 children, while data were available for 302 children on all three outcomes. As a result, data totals for each of the three outcomes are different (Outcome 3A = 307, Outcome 3B = 314, and Outcome 3C = 309). COSF data were reviewed for completeness and accuracy which would impact the totals for each outcome. Issues included missing data (either entry or exit ratings, or progress categories) or data mistakes (inaccurate ratings or progress responses) on 13 children (5%).

To reduce COSF errors and to increase reliability of COSF data, regional trainings were conducted in 6 of the 12 regions during the spring, 2009. The trainings reviewed FAQs, COSF forms and ratings, and addressed data inconsistencies. In addition, child outcome purpose and results from FFY 2007 were presented at the spring 2009 meeting of the CIS-EIP directors. Recently (12/09), Vermont Parts B- 619 and C invited our NECTAC representatives to conduct a statewide conference that stressed the importance and benefits of collecting data on Child Outcomes and reviewed processes for determining rating and progress. At this conference, Part C regions were given a report of their COSF data along with some charts that are calculated in the ECO conversion excel spreadsheets. This strategy had a major impact on many of the regions, helping them to experience the impact of incomplete and inaccurate data on their region's outcomes. Follow-up statewide calls and targeted TA will occur this spring in order to address reliability issues. In addition, regions will continue to receive reports of COSF data on an ongoing basis.

Another challenge to the data participation rate is whether all children who exited Part C during the APR 2008 timeframe (July 1, 2008 through June 30, 2009) and had 6 months of service are represented in the COSF data base. In order to track this, a baseline for missing child outcome data was calculated for each region by comparing the number of complete sets of COSF data to the total number of exits for the reporting period. Despite our 'pencil and paper' status, this is now possible, as exits are entered into the data base by the state on an ongoing basis. In order to support region accountability, regions were recently sent a table identifying children who were missing 'entry ratings only', 'exit ratings only' or 'both entry/exit ratings', as well as the percentage this missing data represented for their region. The range of missing data for regions was from 5% to 48%. The state will continue to report these data to regions and expect regions to identify strategies that support collection of complete and accurate child outcome data.

Results:

As was the case in the previous two years, percentages for OSEP's category 'a' across all three outcomes are very small. This category may represent children with significant delays, a degenerative condition, or an infant who hasn't begun to exhibit delays at entry. As expected, there was a slight increase in this category this year, since the data now include children in the program upwards of the potential 33 months and therefore, infants/toddlers with more significant delays.

Statewide results for children in OSEP category 'b' were approximately 17% across all three child outcomes (Outcome 3A = 16.6%, Outcome 3B = 16.6%, Outcome 3C = 16.8%). The range of results for regions in this category is given in the following table:

High/Low percentages in category 'b' for each outcome FFY 2008			
	Outcome 3A	Outcome 3B	Outcome 3C
High Percentage/ EIP	33.3%/ EIP 9	37%/EIP12	41%/ EIP 6
Low Percentage/ EIP	0%/ EIP 8	0%/EIPs 2 and 8	0%/ EIP 8

Of the three to five regions that had a higher percentage of children in this category (over 25%), three regions were high in this category across all three outcomes. A closer examination is needed to determine the root cause of these findings, including whether this continues to be a pattern in these regions. Potential causes could include a higher percentage of children with more challenging disabilities, rating inaccuracies, or programmatic needs. Another finding demonstrated in the above table is that one region had no children in this category across all three outcomes. Upon closer examination of this region's performance in the other progress categories, Region 8 had between 55% and 60% of their children in category 'c' (an outlier when compared to other regions in category 'c').

In category 'e', there is a large difference between findings for Outcome 3A (36%) and Outcomes 3B (17%) and 3C (24%). Findings from FFY 2008 indicate that a larger number of children enter and maintain functioning at a level 'comparable to same age peers' in the outcome on social emotional relationships. It is expected that as a CSEFEL and CELL state in its third year, Vermont will experience improvement in Outcomes 3A and 3B over time. Another finding regarding this category was that 25 children (8.28%) were identified in category 'e' across all three outcomes. This occurred in 10 out of 12 regions and ranged from 4% to 20%. A higher percentage of category 'e' impacts the results of OSEP's Summary Statement 2.

The results from these three categories will continue to be monitored through the ongoing regional reports as they affect reliability of summary statement findings. Inconsistencies will continue to be addressed through technical assistance and highlighted for regions in their COSF data reports.

Measurable and Rigorous Target:

Targets for Infants and Toddlers Exiting in FFY 2009 (2009-10) and FFY 2010 (2010-2011) and Reported in Feb 2011 and Feb 2012

Summary Statements	Targets for FFY 2009 (% of children)	Targets for FFY 2010 (% of children)
Outcome A: Positive social-emotional skills (including social relationships)		
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	71.4%	71.9%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	61.3%	61.8%
Summary Statements	Targets for FFY 2009 (% of children)	Targets for FFY 2010 (% of children)
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	79.2%	79.7%

2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	58.2%	58.7%
Outcome C: Use of appropriate behaviors to meet their needs		
1 Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	77.6%	78.1%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	65.9%	66.4%

Targets were set at a slight increase (.2%) for FFY 2009 and .5% increase for FFY 2010. Potential targets and state improvement activities were reviewed and approved by the ICC at its annual retreat in November and a sub-committee of the ICC was named to give the final approval as well as provide ongoing support and guidance on this Indicator. The committee agreed that many of the improvement strategies in place will have a positive effect on data quality over time. However, it was thought that data results may be inflated for several reasons, including the inclusion of children who are rated in category 'e' across all three outcomes, a data base not yet inclusive of all children with the most significant delays, and the category 'e' being high in some regions. Consideration of all these factors led the ICC to be cautious in setting targets for FFY 2009.

Program improvement strategies addressing missing and inaccurate data will be addressed by ongoing COSF data entry at the state level following child count data entry, and periodically giving data reports to regions with missing and inaccurate data highlighted. Analyses that highlight challenging areas and help to improve data quality will also be shared with regions. Regional TA and statewide calls/webinars (with continued support from NECTAC) will be continued with the purposes of gleaning regional issues interfering with quality data collection, and supporting the development and implementation of regional EIP Program Improvement Plans addressing this indicator.

Improvement Activities/Timelines/Resources:

State improvement activities for this indicator remain the same and can be found in the February 1, 2010 revised version of the SPP posted on the Vermont Part C website:
http://dcf.vermont.gov/cdd/reports/IDEA_Part_C.

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities Indicator 3	Timelines	Resources
Provide procedural guidance/clarifications based on review of reliability and validity checks of COSF data and ongoing Professional Development-TA sessions	Ongoing through Spring 2012	Professional Development Director/ CIS:EI team, State and regional resources, including Part B

Activities Indicator 3	Timelines	Resources
<p>CIS: EI/DOE monitoring and TA system: assessing accuracy and completeness of data submitted on child outcomes via onsite monitoring and other means of regular review.</p>	<p>Ongoing through FFY 2012</p>	<p>State CIS:EI Team, DOE and VICC</p>
<p>Preparation for and delivery of meaningful technical assistance, training, professional development and other improvement and support strategies.</p>	<p>Ongoing through 2012</p>	<p>Professional Development Director, CIS:EI team/DOE along with regional EIP resources as needed</p>
<p>Using multi-way communication system regarding continuous improvement activities/strategies with regional EIPs via CIS:EI TA liaisons, regular conference calls, email, onsite TA visits, regional trainings, guidance materials, etc. (multiple partners including SEA, CIS, regional EIPs)</p>	<p>Ongoing through 2012</p>	<p>CIS:EI and CIS staff, NERRC</p>
<p>Infrastructure infusions and/or adjustments: Regional and State capacity -resource/personnel issues addressed through annual budgeting and planning process (caseloads, workloads, expertise needed).</p>	<p>Ongoing through FFY 2012</p>	<p>State CIS staff</p>
<p>Continue to seek national and other technical assistance and professional development resources related to the meaningful use of this data in program evaluation and continuous improvement.</p> <p>Continue participation in ECO Communities of Practice, including COSF data analysis and TA cadre.</p> <p>Continue to embed child and family outcomes into Vermont Foundations for Early Learning (FEL) framework and the evolving Infant and Toddler Early Learning Guidelines</p>	<p>Ongoing through 2012</p>	<p>Professional Development Director/CIS:EI staff, ECO, NECTAC, University of Vermont CDCI, other DOE; CSEFEL, and CELL</p> <p>State FEL Team</p> <p>Infant and Toddler Early Learning Guidelines</p>
<p>Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.</p>	<p>State of Vermont terminated contract with vendor January 2013 – timeline to be determined</p>	<p>State of Vermont and State of Vermont Information Technology</p>
<p><i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i></p>	<p><i>By March 2012</i></p>	<p><i>AHS and DOE staff</i></p>
<p><i>Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i></p>	<p><i>June 30, 2013</i></p>	<p><i>AHS and DOE staff</i></p>
<p>Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations,</p>	<p>June 30, 2014</p>	<p>AHS and AOE staff</p>

Activities Indicator 3	Timelines	Resources
<i>revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013</i>		

Revisions, with Justification, to Proposed Baseline and Targets as of 2-1-11 submission:

The VICC has approved the revised baseline and proposed targets reported in the following tables. Because of the significant increase in number of children represented by the FFY 2009 data (73% increase over FFY 2008), it is believed that FFY 2009 data better reflects child progress. The VICC recommends that FFY 2009 results serve as the new baseline, and targets were revised as follows:

Revised Baseline:

Summary Statements	% of children
Outcome A: Positive social-emotional skills (including social relationships)	
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program	60.8%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	59.4%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program	67.9%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	53.4%
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program	72.9%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	60.6%

Revised Targets:

Summary Statements	Targets FFY 2010 (% of children)	Targets FFY 2011 (% of children)	Targets FFY 2012 (% of children)
Outcome A: Positive social-emotional skills (including social relationships)			
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	61%	61.2%	61.4%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	59.6%	59.8%	60%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
1. Of those children who entered or exited the program below age	68.1%	68.3%	68.5%

Summary Statements	Targets FFY 2010 (% of children)	Targets FFY 2011 (% of children)	Targets FFY 2012 (% of children)
expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program			
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	53.6%	53.8%	54%
Outcome C: Use of appropriate behaviors to meet their needs			
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	73.1%	73.3%	73.5%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program	60.8%	61%	61.2%

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Early Intervention Services In Natural Environments

New 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.

Overview of Issue/Description of System or Process:

The general systems in place to measure, collect, analyze, and report on baseline data for the Family Outcomes Indicators in the SPP and in the future APR's include the following systems for Vermont Part C of IDEA, the Family, Infant and Toddler Program: (a) the annual collection and analysis of a statewide survey of families by region that uses the Early Childhood Outcomes Center draft survey as the primary source of survey questions. In addition, Vermont will use family focus groups that occur as part of the monitoring of Part C host agencies and partners process as another level of verification of outcomes.

The plan to collect data on family outcomes includes the following elements:

The purpose and process for collecting and analyzing data statewide and by region was described to Host Agencies and partners between February and April, 2006 and feedback regarding the initiation of the Family Outcomes survey was sought in the fall, 2006.

The "state of the surveys" issue from the family perspective, is assessed annually so as to integrate with or be aware of other Agency of Human Services or Department of Education survey of families requirements or intentions.

CIS-EI is actively involved with the Child Development Division's Leadership Team, University of Vermont Research Partnership and the Vermont Parent Information Center (VPIC) to review and revise as needed the ECO Family Survey Instrument . The work plan will address the administering of the survey and the role of the above organizations.

Protocol was established and will be revised this year (2007) for who will gather names, addresses, set demographic categories (length of stay, child status on entry, active, exited etc), production, distribution and collection of surveys; coding and data entry; data analysis and reporting formats; and instructions on how to analyze and use data for program evaluation – continuous improvement.

Vermont used the last 3 questions on the ECO Family Outcomes Survey, those that directly address OSEP's three family outcomes: early intervention helped families 1). Know their rights, 2). Effectively communicate children's needs and 3). Help children develop and learn. In addition, families were asked to fill in demographic information that helped to identify the child's eligibility criteria, gender, age, and length of time in program. A copy of the 2006 letter and the 2006 survey is found at the end of this section.

The Family Outcomes survey was distributed via mail to 663 Vermont families across all twelve regions in May of 2006. All families who had received early intervention services for a minimum of six months were mailed a survey. Families were asked to return the surveys in a SASE to the Vermont Part C state office. Regions were asked to promote the survey in their interactions with families, including the information that all survey responses would be anonymous and confidential.

The responses were entered and analyzed in July, 2006 and a report of the statewide and regional results was sent to Host Agencies in August, 2006 for discussion and use in program assessment/improvement. In addition, the results from one region were incorporated into their focused monitoring.

The report addresses:

- The number, mean and distribution of families responding to the survey and reporting that early intervention services have helped their family know their rights;
- The number, mean and distribution of families responding to the survey and reporting that early intervention services have helped their family effectively communicate their children's needs;
- The number, mean and distribution of families responding to the survey and reporting that early intervention services have helped the family help their children develop and learn.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012.

On the following page, a copy of the family survey appears in "word" – the survey itself was more inviting and appealing than this one; however the content and most of the format is the same.

**The Family, Infant and Toddler Program wants to know. . .
How Are We Doing?**

How old is your child? _____yrs. _____mos.
(If you have more than one child in FITP, please answer about your oldest child)

Gender of your child: male female

How long has your child been in the FIT Program?

- less than 6 months 6 to 12 months 12 to 18 months
 18 months to 2 years 2 to 2-1/2 years 2-1/2 to 3 years

My child is now receiving services: yes no

My child is receiving services because of (check all that apply):

- Cognitive (to play, think and explore)
- Physical (to use hands and move body)
- Communication (to understand and use speech and language).
- Social and Emotional (to express feelings and relate to others).
- Adaptive (to develop eating, dressing and toileting skills)
- Medical/Health needs (including vision and hearing)

Please circle the number that best describes your family right now. For example, if the statement under 3 describes your family, circle 3. If the statement under 3 almost describes your family. But not quite, circle 2.

1. To what extent has early intervention helped your family know and understand your rights?

1	2	3	4	5	6	7
Early intervention has not helped me/us know about my/our family's rights		Early intervention has done a few things to help me/us know about my/our rights		Early intervention has done a good job of helping me/us know my/our family's rights		Early intervention has done an excellent job of helping me/us know about my/our family's rights

2. To what extent has early intervention helped your family effectively communicate your child's needs?

1	2	3	4	5	6	7
Early intervention has helped me/us effectively communicate my/our child's needs		Early intervention has done a few things to help me/us effectively communicate my/our child's needs		Early intervention has done a good job of helping me/us effectively communicate my/our child's needs		Early intervention has done an excellent job of helping me/us effectively communicate my/our child's needs

3. To what extent has early intervention helped your family be able to help your child develop and learn?

1	2	3	4	5	6	7
Early intervention has not helped me/us help my/our child develop and learn		Early intervention has done a few things so that I/we can help my/our child develop and learn		Early intervention has done a good job of helping me/us help my/our child develop and learn		Early intervention has done an excellent job of helping me/us help my/our child develop and learn

Comments: _____

Thank you for your time.
Please return in the self addressed envelope provided or mail to:

FITP
DCF-2 north;
103 South Main St
Waterbury, VT 05671

Due to the change in data collection approach (use of revised survey beginning in FFY 2010) and the increase in percentage of returned surveys (FFY 2011), Vermont believes there is a need to revise its baseline and state targets for Family Outcomes to help regions and the state address the broader conceptualization of each Family Outcome represented in the revised survey. With two years of data from the revised ECO Family Outcome survey, including one year (FFY 2011) with ample return rate, there is a clear differential between the results from the revised ECO Family survey and the original ECO Family survey. Changes to the Baseline and FFY 2012 state targets are as follows (and changes to FFY 2012 state targets also in the Measurable and Rigorous Target table for FFYs 2005-2012):

Baseline:

	Family Outcomes	% of Families
3A	Percent of families in Part C report that early intervention services have helped the family: <i>A. Know their rights</i>	78.1%
3B	Percent of families in Part C report that early intervention services have helped the family: <i>B. Effectively communicate their children's needs</i>	85.9%
3C	Percent of families in Part C report that early intervention services have helped the family: <i>C. Help their children develop and learn</i>	80.8%

Revised Target Data for FFY 2012:

	Family Outcomes	% of Families
3A	Percent of families in Part C report that early intervention services have helped the family: <i>A. Know their rights</i>	78.3%
3B	Percent of families in Part C report that early intervention services have helped the family: <i>B. Effectively communicate their children's needs</i>	86.1%
3C	Percent of families in Part C report that early intervention services have helped the family: <i>C. Help their children develop and learn</i>	81%

Baseline Data for FFY 2004 (2004-2005): New Baseline for FFY 2005

Family Outcomes Survey: Statewide Results On Each Of Three Family Outcomes: (Spring, 2006)

Outcomes	Total respondents/total distributed	Number of families in agreement	Percentage of families who report that early intervention services have helped their family:*
Outcome 1: Know their rights	201/663	160	80%
Outcome 2: Effectively communicate their children's needs	200/663	169	85%
Outcome 3: Help their children develop and learn	200/663	176	88%

***Criterion for defining “Families who report that early intervention services have helped their family”:** The rating scale for ECO’s Family Outcome Survey ranges from 1 to 7 with 1 to 3 representing a ‘poor’ to ‘fair’ job by the early intervention program and 5 to 7 representing a ‘good’ to ‘excellent’ job by the early intervention program. Responses of 5 or above were defined as ‘families who report that early intervention services helped their families’.

Family Outcomes Survey: Statewide Results By Region (Spring, 2006):

Region	Number respondents/ Percent returned	Percentage of families who report that early intervention services have helped their family:		
		Know their rights	Effectively communicate their children's needs	Help their children develop and learn
		Outcome 1:	Outcome 2:	Outcome 3:
Addison	9 (38% of 24)	60%	78%	78%
Bennington	9 (33% of 27)	90%	100%	100%
Caledonia	6 (22% of 27)	100%	100%	100%
Chittenden	49 (33% of 148)	75%	83%	89%
Franklyn/Grand Isle	13 (20% of 66)	77%	85%	77%
Lamoille	9 (32% of 28)	100%	100%	90%
Orange/Windsor	15 (29% of 52)	88%	81%	81%
Orleans	9 (30% of 30)	78%	67%	67%
Rutland	18 (30% of 60)	78%	83%	83%
Washington	34 (28% of 122)	76%	79%	91%
Windham	20 (43% of 46)	95%	95%	95%
Windsor South	10 (30 % of 33)	50%	88%	100%

Discussion of Baseline Data:

Out of the 663 surveys sent to families in FFY 2005 (2005-2006), 201 surveys were returned, for a return rate of 30%. The return rate for regions ranged from 20 % to 43%. The more rural regions of the state had lower return rates (below 30%).

Overall, statewide responses to the three outcome questions were quite positive, with positive ratings ranging from 80% for Outcome 1 to 88% for Outcome 3. Ratings in four of the twelve regions (33%) were very favorable with positive responses ranging from 90% to 100% in all outcomes. On the other hand, two of the regions (16%) had percentages lower than 80% across all three outcomes. There was a slight tendency for families to rate outcomes higher the longer families were in the program. Families who were in the program less than one year had slightly lower averages for each of the three outcomes (5.4, 5.6, and 5.7, respectively) than families who had been in the program more than 2 years (6.0, 6.0, and 6.3, respectively).

For Outcome 1, 80% of families in the state reported that early intervention services had helped their families know their rights. The average response for each region ranged from 4.3 to 6.3. For individual regions, the range was from 50% to 100%, with 7 of the 12 regions falling below the state average for this outcome (80%). In the regions with the lowest percentages (60% and 50%), 60% of families (5 out of 8) had been with the program less than 1 year and three of the eight families had children nearing transition. One family, who rated this outcome low (3), reported that they worked in special education and already knew their rights.

For Outcome 2, 85% of families across the state reported that early intervention services helped them to effectively communicate their children's needs. The average response for each region ranged from 4.9 to 6.5. The range for regions was from 67% to 100%, with three regions falling below 80%. In the regions with the lowest percentages (78%, 67%, 79%), 11 out of 52 respondents (21%) had scores lower than 5. One family reported they "learned early to communicate [their] child's needs - had to fight with pediatrician to get the referral to FITP".

For Outcome 3, 88% of families statewide reported that early intervention services helped them help their children develop and learn. The average response for each region ranged from 5.3 to 7.0. Similar to Outcome 2, the range in positive responses was from 67% to 100%, with three regions falling below 80%. In the regions with the lowest percentages (78%, 77%, 67%), 8 of the 33 responses fell below the cutoff point of 5.

FFY	Measurable and Rigorous Target ^{2 3}
2005	
2006 (2006-2007)	1. Rate of survey return at 30% or above for all regions. 2. Increase the favorable response to Outcome 1 (A) = 80%, 2(B) = 85% and 3 (C) = 85% or above for all regions.
2007 (2007-2008)	1. Rate of survey return at 30% or above for all regions. 2. Increase the favorable response to Outcome 1 (A) = 80%, 2(B) = 85% and 3 (C) = 85% or above for all regions.
2008 (2008-2009)	1. Rate of survey return at 30% or above for all regions. 2. Increase the favorable response to Outcome 1 (A) = 80%, 2(B) = 85% and 3 (C) = 85% or above for all regions.
2009 (2009-2010)	1. Rate of survey return at 30% or above for all regions. 2. Increase the favorable response to Outcome 1 (A) = 80%, 2(B) = 85% and 3 (C) = 85% or above for all regions.
FFY 2010 (2010-2011)	1. Rate of survey return at 31% or above for all regions. 2. Increase the favorable response to Outcome 4(A) = 81%, 4(B) = 86% and 4 (C) = 88.1% or above for all regions.
FFY 2011 (2011-2012)	1. Rate of survey return at 32% or above for all regions. 2. Increase the favorable response to Outcome 4 (A) = 81.5%, 4(B) = 86.5% and 4 (C) = 88.5% or above for all regions.
FFY 2012 (2012-2013)	1. Rate of survey return at 33% or above for all regions.

² Targets adjusted (more specific for each outcome) 4-2-07 per OSEP request

³ Targets revised 2-1-08 to be rigorous and reasonable per discussions with OSEP at conferences and on calls

FFY	Measurable and Rigorous Target^{2 3}
	2. Increase the favorable response to Outcome 4 (A) = 78.3%, 4(B) = 86.1% and 4 (C) = 81% or above for all regions.

Improvement Activities/Timelines/Resources:

Target	Improvement Activities	Timelines	Resources
1	Review protocols for distributing and gathering surveys to insure all families know about and have enough time and opportunity to return surveys	Spring 2007 and ongoing	Staff and VICC and Partners
2	Review policies and procedures pertaining to family rights and safeguards, with emphasis on initial stages of family involvement in FITP; provide technical assistance to regional early intervention programs; seek assistance through related agencies such as Vermont Parent Information Center.	Spring 2007 and ongoing	Staff and VICC and Partners, including VICC
3	Provide TA to regions identified with a less favorable response (under 80%)	Spring 2007 and ongoing	FITP, partners, regional staff
4	Require annual goals to address issues in surveys from regions that fall below 80% in any of the areas	Spring 2007 and ongoing	Staff, with consultation from regional early intervention programs, ICC and VPIC/PCC's.

In the spring of 2008, Vermont changed the survey instrument to use the full ECO Family Outcomes Survey. A copy of that survey and its related materials is in Appendix A of the FFY 2007 APR. The OSEP three questions have not changed.

Outlined below are the revised as of 2/2/09 Program Improvement Activities for Indicator 4 and revisions in bold as of 2-1-10 SPP.

Activities Indicator 4	Timelines	Resources	Notes
Provide procedural guidance/clarifications based on review of reliability checks of Family survey data	Ongoing through FFY 2010	Professional Development Director/Part C State and regional resources, including Part B and ICC	Removed notes
Removed activity			
Preparation for and delivery of meaningful technical assistance, training, professional development and other improvement and support strategies.	Ongoing through 2010	Professional Development Director, State Part C – B team along with regional EIP resources as needed in collaboration with ICC and VFN resources as needed	Make sessions available to CIS and interested partners as well as C-B providers.
Using multi-way communication	Spring 2009	State Part C/CIS staff,	Consider regular CIS

Activities Indicator 4	Timelines	Resources	Notes
system regarding continuous improvement activities/strategies with regional EIPs via C/CIS TA liaisons, regular conference calls, email, onsite TA visits, regional trainings, guidance materials, etc. (multiple partners including SEA, CIS, regional EIPs)	and ongoing through FFY 2010	NERRC and ICC	staff briefings to review regional issues regarding family outcome data system and identify regional TA needs
Infrastructure infusions and/or adjustments: Regional and State capacity - resource/personnel issues addressed through annual budgeting and planning process (caseloads, workloads, expertise needed).	Ongoing beginning January 2006 through FFY 2010	State staff	As more funds become available use to buy time for Professional Development and TA for Family Outcomes efforts
Data management system developed – web based, regionally driven, practice based, real time is used for child count, child and family outcomes data collection and analysis purposes. Further develop strategies to review data and use findings to inform regional professional development activities.	Ongoing through 2010	Part C/CIS staff/Child Development Division and Department IT staff & Part C – B	Develop data system to link demographic data to child and family data.
Continue to seek national and other technical assistance and professional development resources related to the meaningful use of this data in program evaluation and continuous improvement. Continue participation in ECO Communities of Practice Continue to embed child and family outcomes into Vermont Foundation for Early Learning framework and the evolving Infant and Toddler Early Learning Guidelines.	Ongoing through 2010	Professional Development Director/State Part C/CIS staff, Early Education Team, University of Vermont CDCI, other DOE; CSEFEL, CELL and Zero To Three, ECO State FEL Team Infant and Toddler Early Learning Guidelines Team	Consider linking related data, (demographic, etc.) to family outcomes

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revisions to improvement activities **as of February 1, 2012 submission are bolded and italicized** in table below.

Activities Indicator 4	Timelines	Resources
Provide procedural guidance/clarifications based on review of representativeness of Family survey data	Ongoing through FFY	Professional Development Director -

Activities Indicator 4	Timelines	Resources
	2012	Part C, State and regional resources, including Part B and VICC
Preparation for and delivery of meaningful technical assistance, training, professional development and other improvement and support strategies.	Ongoing through FFY 2012	Professional Development Director, State Part C – B team along with regional EIP resources as needed in collaboration with VICC and VFN as needed
Using multi-way communication system regarding continuous improvement activities/strategies with regional EIPs via CIS: EI TA liaisons, regular conference calls, email, onsite TA visits, regional trainings, guidance materials, etc. (multiple partners including SEA, CIS, regional EIPs)	Spring 2009 and ongoing through FFY 2012	State CIS: EI staff, NERRC and VICC
Infrastructure infusions and/or adjustments: Regional and State capacity - resource/personnel issues addressed through annual budgeting and planning process (caseloads, workloads, expertise needed).	Ongoing beginning January 2006 through FFY 2012	State CIS-EI staff
Further develop strategies to review data and use findings to inform regional professional development activities.	Ongoing through FFY 2012	CIS: EI and CIS /Child Development Division and Department IT staff & Part C – B
Continue to seek national and other technical assistance and professional development resources related to the meaningful use of Outcomes data in program evaluation and continuous improvement. Continue participation in ECO Communities of Practice Continue to embed child and family outcomes into Vermont Foundation for Early Learning (FEL) framework and the evolving Infant and Toddler Early Learning Guidelines.	Ongoing through FFY 2012	Professional Development Director, State CIS: EI staff, Early Education Team, University of Vermont CDCI, other DOE; CSEFEL, CELL and Zero To Three, ECO State FEL Team Infant and Toddler Early Learning Guidelines Team
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
Continue use of revised ECO Family Outcomes Survey	FFY 2011 through FFY 2012	State CIS-EI/CIS Staff, Vermont Interagency Coordinating Council, Vermont Family

Activities Indicator 4	Timelines	Resources
		<i>Network</i>
<i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i>	<i>By March 2012</i>	<i>AHS and DOE staff</i>
<i>Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i>	<i>June 30, 2013</i>	<i>AHS and DOE staff</i>
<i>Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013</i>	<i>June 30, 2014</i>	<i>AHS and AOE staff</i>

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

This indicator language as of 2-1-10 replaces indicator language in prior SPPs.

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

These revisions to Indicator and measurement language and to the measurement instructions

Overview of Issue/Description of System or Process:

Child Find efforts to locate and identify all eligible infants and toddlers include outreach by the regional CIS-EIPs and CIS regional Coordinators and Intake Teams, schools, and other partners. Contacts are made with primary referral sources such as hospitals, health care providers, child care and Head Start/Early Head Start programs, homeless shelters, child welfare organizations, disabilities advocacy and parent support services organizations, and maternal and child health services. Special attention is given to the promotion of the services offered through CIS-EI for children with diagnosed conditions at birth, children under three who have a substantiated case of child abuse and or neglect, children whose families are homeless and those who have been exposed during the pregnancy to illegal or toxic substances, and those born prematurely and/or with low birth weight – the target in these categories is infants under the age of one, as close to birth and the discovery of a condition or delay that may be helped through the provision of CIS-EI/CIS services.

Regional CIS-EIP staff and partners participate in child find by communicating with health care providers and presenting at Grand Rounds at hospitals about the eligibility, purpose, and services available through Part C CIS-EI in Vermont. There is special liaison work between the Vermont Family Network, which houses the regional CIS-EIP in the most populous area of Vermont (Chittenden County, where nearly one quarter of the children served in CIS-EI live), the State CIS-EI staff, and the Neonatal Intensive Care Staff at Fletcher Allen Health Care. Referrals are made directly to the regional CIS-EIPs and/or to the regional CIS Coordinator and Intake Team, where they are immediately forwarded to the CIS-EIP. Children with Special Health Needs and its clinical staff are critical partners and sources of referrals. CSHN Medical Social Workers often are part of a child's/family's team. The identification part of child find is carried out by qualified CIS-EIP staff, school personnel, CSHN social workers and other partners.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

Early Intervention Services Over a Six Year Period: 12/01/99 - 12/01/04

Child Count Year	IFSPs Active	% Change Year to Year	# Infants under 12 months	% infants under 12 months	Age at time of referral is under 12 months
12/1/99	409				
12/1/00	438	7%			
12/1/01	472	8%			
12/1/02	577	22%	72	12.5%	288 (50%)
12/1/03	625	8%	64	10.2%	297 (48%)
12/1/04	599	-4%	54	9.0%	276 (46%)

Baseline Data for FFY 2004 (2004-2005):

Compared to the “broad” eligibility states that do not serve children “at risk” Vermont ranks 17 of 24 states, using the child count data reported for 12/1/04 for infants under the age of 12 months. Vermont used Table 8-6 as the base and highlighted the broad eligibility states by hand in order to derive this ranking.

Comparing Vermont to all States/National Data:

In 2000 Vermont served 54 infants or .8% of 1% of the population, which was .03% above the national baseline data reported by OSEP for serving infants covered by the 12/1/2000 child count data.

In 2001 Vermont served 59 infants or .9% of 1% of the population, which was .06% above the national baseline data reported by OSEP.

In 2002 Vermont served 72 infants or 1.2% of the population, which was 1.21% above the national baseline data reported by OSEP.

In 2003 Vermont served 64 infants or 1.0% of the population, which was 1.3% above the national baseline data reported by OSEP.

In 2004 Vermont served 54 infants or .9% of 1% of the population, which was -.05% below the national baseline data reported by OSEP.

Regional Data on Serving Infants under 12 months of age at time of child count and at time of referral. Data reported to OSEP from the 12/1/04 Child Count for use in OSEP comparisons between states and against national data for infants served under 12 months of age. (Revised 618 data on 10/31/05):

Region SPP indicator 5	Total Actives 12/1/04	Total children < 12 months 12/1/04	Total number of births for region (2003)	Percent of children < 12 months with IFSPs 12/1/04	Age at time of referral < 12 months 12/1/04
Addison	26	0	316		10
Bennington	41	4	514	.00782%	26
Caledonia	24	4	245	.01633%	9
Chittenden	129	9	2,260	.00398%	50
Franklin/Gl	55	10	487	.02053%	21
Lamoille	29	4	260	.01538%	17
Orange-Windsor	63	4	328	.01222%	18
Orleans – Essex North	31	4	226	.01769%	19
Rutland	52	1	585	.00017%	24
Washington	58	4	450	.00889%	35
Windham	55	8	385	.02078%	34
Windsor-South	36	2	234	.00855%	13
Total	599	54	6,290	.00858%	276

Discussion of Baseline Data:

There was a large outreach effort made by the VICC (VICC) in 2002 and 2003 to reach children at the earliest possible times. In addition staff increased and the general visibility and credibility of the program has increased over time. In fact, there was a 32% increase in the total number of children served from 12/1/01 to 12/1/03 (472 to 625). However, there has been a slight decrease in the overall number of children active on 12/1/04 and also a parallel decrease in the number and percent of infants served.

Vermont currently ranks .05% below the national baseline reported by OSEP (.98 is the national baseline, Vermont is .90), there has been an overall positive trend of 4% for Vermont in the last five years. There has been a slight decrease in overall numbers served, as well as a slight decrease in the Vermont birth rate.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	.90%
2006 (2006-2007)	.91%
2007 (2007-2008)	.93%
2008 (2008-2009)	.94%
2009 (2009-2010)	.96%
2010 (2010-2011)	.98%
2011 (2011-2012)	.99%
2012 (2012-2013)	.99%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities Indicator 5	Timelines	Resources
Continue public awareness and child find activities,	Ongoing through	VICC, the VT

Activities Indicator 5	Timelines	Resources
<p>emphasizing the critical focus on child find birth to one. Ensure regional plans between CIS-EIPs and LEAs/SUs incorporate strategies/activities that fulfill the Part C-B Interagency Agreement in the area of child find, and clearly delineate the critical importance of child find birth to one.</p>	<p>FFY 2012</p>	<p>Agency of Human Services, Department for Children and Families, Child Development Division, and CIS/CIS-EI state and regional staff, including CIS Administrative and Referral/Intake Teams in collaboration with the Department of Education and LEAs/Supervisory Unions and all other relevant partners involved in providing early intervention services</p>
<p>Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify Regional CIS-EIPs below state target in analysis of data used for annual determinations. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans. Strategies must include plans to: 1) collaborate with local CIS Administrative and Intake/Referral Teams and other primary referral sources, and 2) receive targeted technical assistance.</p>	<p>Ongoing through FFY 2012</p>	<p>State and regional CIS-EI/CIS partners</p>
<p>Statewide, regional CIS Administrative and Intake/Referral Teams conduct ongoing and increased outreach to primary referral sources as CIS implementation moves forward statewide. Highlight CIS-EI priorities for child find birth to one in regional CIS outreach plans and supporting materials, and discuss with primary referral sources.</p>	<p>Ongoing through FFY 2012</p>	<p>State and regional CIS partners</p>
<p>Collect referral data on infants birth to one from regional CIS Intake and Referral Coordinators.</p>	<p>Beginning FFY 2009 and annually through FFY 2012</p>	<p>State CIS staff and regional CIS Intake and Referral Coordinators</p>
<p>Provide targeted training and technical assistance to support regional CIS-EIPs and CIS Intake and Referral Coordinators/Teams. TA and training includes on-site visits, conference calls, regional trainings, community of practice calls, etc.</p>	<p>Beginning FFY 2009 and ongoing through FFY 2012</p>	<p>State CIS-EI/CIS regional liaisons, state CIS team</p>
<p>Continue trainings, presentations to, and outreach in partnership with, CSHN, DOE and CIS the NICU, physicians/pediatricians, family practices, hospitals, VT</p>	<p>Ongoing through FFY 2012</p>	<p>Collaboration among CSHN, DOE, CIS-EI/CIS</p>

Activities Indicator 5	Timelines	Resources
Chapter of AAP, shelters, child welfare, drug treatment programs, and related organizations		regional and state staff and other partners, as appropriate
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
<i>Implement Action Plan developed during “Targeting Indicator Improvement (TII) Workshop” facilitated by Northeast Regional Resource (NERRC) staff/continue to collaborate with NERRC State TA liaison on TII implementation activities as necessary.</i>	<i>FFY 2011 and ongoing through FFY 2012</i>	<i>State CIS-EI/CIS staff, NERRC State TA liaison</i>
<i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i>	<i>By March 2012</i>	<i>AHS and DOE staff</i>
<i>Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i>	<i>June 30, 2013</i>	<i>AHS and DOE staff</i>
<i>Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013</i>	<i>June 30, 2014</i>	<i>AHS and AOE staff</i>

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

This indicator language as of 2-1-10 replaces indicator language in prior SPPs.

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

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.

Overview of Issue/Description of System or Process:

Child Find efforts to locate and identify all eligible infants and toddlers include outreach by the regional CIS-EIPs and CIS regional Coordinators and Intake Teams, schools, and other partners. Contacts are made with primary referral sources such as hospitals, health care providers, child care and Head Start/Early Head Start programs, homeless shelters, child welfare organizations, disabilities advocacy and parent support services organizations, and maternal and child health services. Special attention is given to the promotion of the services offered through CIS-EI for children with diagnosed conditions at birth, children under three who have a substantiated case of child abuse and or neglect, children whose families are homeless and those who have been exposed during the pregnancy to illegal or toxic substances, and those born prematurely and/or with low birth weight

Once referrals are received by the regional CIS-EIPs, they, along with qualified partners and the family, plan the evaluation process. This process includes the completion of a multidisciplinary evaluation(s) that encompasses initial comprehensive assessment of the current level of functioning in each of the five developmental areas and a voluntary, family-driven assessment of the family's concerns, resources and priorities. This information determines the child's eligibility and at this point families are offered early intervention services through the Individualized Family Service Plan (IFSP).

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual

Performance Reports (APRs). Children’s Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

Baseline Data for FFY 2004 (2004-2005):

According to the Vermont Child Count Data for 12/1/04 submitted via the 618 Data Report for OSEP’s use in reporting to Congress, Vermont is a **broad eligibility** state, and **is ranked number five out of the twenty-four broad eligibility states**. Five hundred and ninety nine (599 revised 10/31/05) children had active IFSP’s on 12/1/2004 and the population statistics for this age group in Vermont indicate a total of 18,602 resulting in Vermont’s **servicing of 3.2%** of the birth to three population which is .98% above the national baseline reported by OSEP. The national baseline was not calculated by eligibility category; however, for all states the baseline was reported as 2.24%.

Comparing Vermont to all States/National Data:

In 2000 Vermont CIS-EI served 438 children under age three and their families or 2.2% of the Vermont birth to three population, which was .40% above the national baseline data reported (1.8%) by OSEP in its 12/1/2000 child count data report.

In 2001 Vermont CIS-EI served 472 children under age three and their families or 2.5% of the Vermont birth to three population, which was .46% above the national baseline data reported by OSEP in its 12/1/2001 child count data report.

In 2002 Vermont CIS-EI served 577 children under the age of three and their families or 3.1% of the Vermont birth to three population, which was .91% above the national baseline data reported by OSEP in its 12/1/2002 child count data report.

In 2003 Vermont CIS-EI served 625 children under age three and their families or 3.3% of the Vermont birth to three population, which was 1.16% above the national baseline data reported by OSEP in its 12/1/2003 child count data report.

In 2004 Vermont CIS-EI served 599 (revised 10/31/05) children under the age of three and their families or 3.2% of the Vermont birth to three population, which was .98% above the national baseline data reported by OSEP in its 12/1/2004 child count data report.

The Program/Regional Breakdown for baseline data birth to three child find results is found in the table below and is based on 618 data and Vermont population data:

Region SPP indicator 6	Total Actives 12/1/04	Birth to Three population data	Percent of birth to three in region served by region
Addison	20	1,071	2.4%
Bennington	41	1,071	3.8%
Caledonia	24	931	2.6%
Chittenden	129	4,911	2.6%
Franklin/Gl	54	1,961	2.8%
Lamoille	29	981	2.9%
Orange-Windsor	63	1,421	4.4%
Orleans – Essex North	31	861	3.6%
Rutland	52	1,871	2.8%
Washington	58	2,111	2.7%
Windham	54	981	5.6%
Windsor-South	30	1,141	3.2%
Total	599	19,341	3.1%

Discussion of Baseline Data:

Vermont is doing well on child find, identification and provision of services and has done very well, even among the “broad” eligibility states.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	3.2%
2006 (2006-2007)	3.25%
2007 (2007-2008)	3.28%
2008 (2008-2009)	3.3%
2009 (2009-2010)	3.4%
2010 (2010-2011)	3.5%
2011 (2011-2012)	3.5%
2012 (2012-2013)	3.5%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities for Indicator 6	Timelines	Resources
Continue public awareness and child find activities for the birth to three population in Vermont by analyzing regional, statewide and national comparison data and reporting these data to stakeholders and regions, including the results of child find by region, age, etc. Ensure regional plans between CIS-EIPs and LEAs/SUs incorporate strategies/activities that fulfill the Part C-B Interagency Agreement in the area of child find.	Ongoing through FFY 2012	VICC, the VT Agency of Human Services, Department for Children and Families, Child Development Division, and CIS/CIS-EI state and regional staff, including CIS Administrative and Referral/Intake Teams in collaboration with the Department of

Activities for Indicator 6	Timelines	Resources
		Education and LEAs/Supervisory Unions and all other relevant partners involved in providing early intervention services
Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify Regional CIS-EIPs below state target in analysis of data used for annual determinations. CIS-EIPs address with specific strategies in annual Wellness/Program Improvement Plans. Strategies must include plans to: 1) collaborate with local CIS Administrative and Intake/Referral Teams and other primary referral sources, and 2) receive targeted technical assistance.	Ongoing through FFY 2012	State and regional CIS-EI/CIS partners
Statewide, regional CIS Administrative and Intake/Referral Teams conduct ongoing and increased outreach to primary referral sources as CIS implementation moves forward statewide. Highlight CIS EI priorities for child find birth to one in regional CIS outreach plans and supporting materials, and discuss with primary referral sources.	Ongoing through FFY 2012	State and regional CIS partners
Collect referral data on infants and toddlers birth to three from regional CIS Intake and Referral Coordinators.	Beginning FFY 2009 and annually through FFY 2012	State CIS staff and regional CIS Intake and Referral Coordinators
Provide targeted training and technical assistance to support regional CIS-EIPs and CIS Intake and Referral Coordinators/Teams. TA and training includes on-site visits, conference calls, regional trainings, community of practice calls, etc.	Beginning FFY 2009 and ongoing through FFY 2012	State CIS-EI/CIS regional liaisons, state CIS team
Continue trainings, presentations to, and outreach in partnership with, CSHN, DOE and CIS, the NICU, physicians/pediatricians, family practices, hospitals, VT Chapter of AAP, shelters, child welfare, drug treatment programs, and related organizations	Ongoing 12/6/05 through FFY 2012	Collaboration among CSHN, DOE, CIS/CIS-EI regional and state staff and other partners, as appropriate
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP	By March 2012	AHS and DOE staff
Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement	June 30, 2013	AHS and DOE staff
Revise VT Part C policies and procedures to ensure	June 30, 2014	AHS and AOE staff

Activities for Indicator 6	Timelines	Resources
<i>congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013</i>		

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

Overview of Issue/Description of System or Process

Vermont's policy related to initial evaluation and assessment and initial IFSP meeting requires completing a multidisciplinary evaluation and assessment of current level of functioning in the five areas of development and conducting the initial IFSP meeting within 45 days from referral.

During FFY 2008, VT CIS-EI initiated the transition from a cyclical monitoring process (i.e., monitoring a regional CIS-EIP once every three years) to a more focused, ongoing monitoring process. As part of this transition, VT CIS-EI required all regional EIPs to conduct annual self-assessments. The purposes of the self-assessment include: 1) verifying timely correction of findings of noncompliance, 2) verifying subsequent correction of remaining noncompliance from previous years, 3) reinforcing self-assessments as part of ongoing supervision to promote program improvement in the regional CIS-EIPs, and 4) providing a vehicle for on-site technical assistance, i.e., state CIS-EI staff schedule follow-up visits to regional EIPs to verify and discuss results and address specific needs identified by regional CIS-EIP staff. Vermont Part C staff continue to monitor regional EIPs through their monthly desk audit of the child count data and discuss the data during weekly staff meetings and with the regional CIS-EIPs. These data, along with other data and information, enable state CIS-EI staff to follow up on any data "anomalies," identify systemic noncompliance, and provide targeted and intense technical assistance.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

Baseline Data for FFY 2004 (2004-2005):

Vermont monitors early intervention programs (same as regions) every three years, and as part of the monitoring conducts file reviews for compliance. The baseline data for indicator 7 are found below and the source is the child count data base and regional monitoring file reviews.

During Regional Early Intervention Program on site monitoring, fifty one children’s IFSPs were reviewed for timely evaluations and initial IFSP meetings. Thirty nine children had evaluation and assessment and initial IFSP meetings within the 45 day time period for a rate of compliance of 76.5%.

Regions SPP Indicator 7	Total Actives from 618 Child Count data 12/1/04	Number and percent of evaluation and assessment and initial IFSPs meetings meeting 45 day timeline from file reviews conducted as part of regional monitoring
Bennington	41	13 reviewed/relevant 12 of 13 met timelines or 92%
Caledonia	24	9 reviewed/relevant 6 of 9 met timelines or 66%
Franklin/Gl	55	8 reviewed with 6 of 8 meeting timelines or 75%
Orleans – Essex North	31	15 total reviewed all reasons; 10 relevant; 5 of 10 met timelines or 50%
Windham	55	11 reviewed with 10 of 11 meeting 45 day timelines or 92%

Revised 2/1/07 Discussion of Baseline Data that includes the statewide measurement:

The revision reports a statewide figure as requested by OSEP: 51 children’s IFSPs were reviewed during the regional monitoring process during the FFY 2004 time period, 39 of which reflected that evaluation and assessment and the initial IFSP meeting were conducted within the 45 day time period. $39/51 = 76.5\%$ met timelines (inclusive of those who had family circumstances) and 11 of the 50 did not or 22%. The reasons reported for not completing evaluation, assessment and initial meeting were primarily because of a lack of speech and language pathologists and other specialized personnel needed to complete a multidisciplinary evaluation or the scheduling of meetings when specialized personnel could attend. At this time we did not collect data on child and family circumstances.

Orleans-Essex was the first program reviewed by a new Part C staff and had also experienced a high rate of staff turnover; Caledonia was the second program reviewed and had an even higher rate of staff turnover; the CIS-EIP for Caledonia changed to a new agency effective January 2006.

Revision 2/1/08 Vermont is using a statewide measure for reporting, which is inclusive of all children with initial IFSPs, rather than a set of regional data that solely comes from on-site file reviews.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%

FFY	Measurable and Rigorous Target
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities Indicator 7	Timelines	Resources
Revise forms annually to gather valid and reliable data, ensure accurate documentation by regional CIS/EIP staff and avoid collection of duplicate information. This includes revising monthly and annual child count instructions and forms, and requiring regional CIS-EI staff to self-report compliance/noncompliance prior to submitting data.	Annually through FFY 2011 (note: electronic data management system to be phased in FFY 2011)	State CIS-EI Staff
Conduct bi-monthly data checks and submit data grids to CIS-EIPs to gather complete and accurate data. Generate weekly “extract report” to flag incorrect social security numbers, spelling of names and/or dates of birth.	Ongoing through FFY 2012	State CIS-EI staff
Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify regional CIS-EIPs below 100% target in analysis of data. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans.	Annually through FFY 2012	State CIS-EI staff
Regional CIS-EIPs conduct annual self-assessment – to be analyzed by state CIS-EI staff and verified on-site, if necessary	Beginning FFY 2008 and annually through FFY 2012	Regional CIS-EIP Directors/Supervisors and state CIS-EI staff
Restructure funding system to better enable resources in the SLP-Communication, OT and PT fields to work with CIS-EI staff and families.	FFY 2009	State CIS-EI Coordinator, HPES Staff
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data	State of Vermont terminated contract with vendor January	State of Vermont and State of Vermont Information

Activities Indicator 7	Timelines	Resources
system.	2013 – timeline to be determined	Technology
Continue to disseminate information and rationale re 45-day timeline requirement/100% compliance target to CIS-EIP staff, ICC, partner schools and any partners doing service coordination via CIS blog, CIS listserv, annual CIS-EIP conference, monthly CIS-EIP Director conference calls, etc.	Ongoing through FFY 2012	State CIS-EI staff
Provide individualized technical assistance to CIS-EIPs when ongoing data analysis indicates need. These data may include targeted onsite file reviews, CIS-EIP self-assessments, and/or regular desk audits of monthly and annual data submissions.	Ongoing through FFY 2012	State CIS/CIS-EI staff
Collaborate with Vermont Association of Speech and Language Pathologists and Occupational and Physical Therapy Associations to address shortages	Ongoing through FFY 2012	State CIS-EI staff, community partners and SLP/OT/PT professional associations
Continue to collaborate with State Department of Education on State Improvement Grant and other personnel prep and development resources on recruiting, training and maintaining pediatric SLPs, PTs, OTs and other key personnel.	Ongoing through FFY 2012	Staff CIS-EI staff and DOE staff
Continue to disseminate Part C-B Interagency Agreement to regional CIS-EIPs to clarify regulations, policies and procedures, including Maintenance of Effort - consolidate information to more effectively convey expectations	Ongoing through FFY 2012	State CIS-EI Coordinator, other AHS staff, and DOE staff
CIS-EI/CIS/DOE monitoring and TA system: assess status of compliance, performance and support needed for regions, private providers and schools through ongoing and regular data review, analysis and feedback of CIS-EI child count/CIS data, file reviews, self assessments, complaints review, etc.	Ongoing through FFY 2012	State CIS-EI/CIS Team, DOE personnel and VICC Family Leadership and Support Comm.
Continue to prepare for and deliver meaningful technical assistance, training, professional development and other improvement and support strategies.	Ongoing through FFY 2012	State CIS-EI/Part B 619 team along with CIS partners and regional CIS-EIPs and SUs/EEE staff
Continue to ensure effective multi-way communication system regarding continuous improvement activities/strategies with regional CIS-EIPs via CIS-EI/CIS TA liaisons, regular conference calls, CIS blog & listserv, CIS Community of Practice calls and annual conferences , email, on-site TA visits, guidance materials, etc. (multiple partners including SEA, CIS, and regional CIS-EIPs).	Ongoing through FFY 2012	State CIS-EI/CIS staff
Continue to seek resources through the SIG grant and other grants in the SLP-Communication, ASD, OT, PT and advanced child development fields to work with CIS-EI/CIS staff and families.	Ongoing through FFY 2012	State CIS-EI/CIS staff, community partners, University of Vermont CDCI-UCEDD, DOE and SLP/OT/PT professional

Activities Indicator 7	Timelines	Resources
		associations
Complete and make available to CIS administrators and providers online technical assistance and training module clarifying Part C timeline requirements	Spring 2012	State CIS-EI/CIS staff
Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP	By March 2012	AHS and DOE staff
Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement	June 30, 2013	AHS and DOE staff
Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education Rules Adopted June 1, 2013	June 30, 2014	AHS and AOE staff
Require all CIS providers to complete, with 100% accuracy, the timeline module and submit documentation of completion to the state CIS office.	Beginning with SF 2014 contracts, July 1, 2013	State CIS Staff

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Measurement:

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

Account for untimely transition conferences, including reasons for delays.

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

Overview of Issue/Description of System or Process: The Vermont Part C transition planning process includes a written plan that has transition steps and services, notification to the LEA no later than 2.6 years prior to a child's third birthday, and a transition conference that occurs at least 90 days prior to the child's third birthday.

During FFY 2008, VT CIS-EI initiated the transition from a cyclical monitoring process (i.e., monitoring a regional CIS-EIP once every three years) to a more focused, ongoing monitoring process. As part of this transition, VT CIS-EI required all regional EIPs to conduct annual self-assessments. The purposes of the self-assessment include: 1) verifying timely correction of findings of noncompliance, 2) verifying subsequent correction of remaining noncompliance from previous years, 3) reinforcing self-assessments as part of ongoing supervision to promote program improvement in the regional CIS-EIPs, and 4) providing a vehicle for on-site technical assistance, i.e., state CIS-EI staff schedule follow-up visits to regional EIPs to verify and discuss results and address specific needs identified by regional CIS-EIP staff. Vermont Part C staff continue to monitor regional EIPs through their monthly desk audit of the child count data and discuss the data during weekly staff meetings and with the regional CIS-EIPs. These data, along with other data and information, enable state CIS-EI staff to follow up on any data "anomalies," identify systemic noncompliance, and provide targeted and intense technical assistance.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management

system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

Baseline data from regional monitoring during the period July of 2004 through June of 2005 is reported in the following table. These data were collected through the regional monitoring process via file reviews. Baseline data were collected during five initial and close-out regional monitorings completed between 7/04 and 6/05.

Regional Monitoring – file reviews SPP indicator 8	Total Files	Transition Plan in compliance	Notification to LEA at least 6 months prior to child’s 3rd B-day	Transition conference at least 90 days prior to child’s 3rd birthday
Bennington	13	2 of 2- 100%	4 of 4 – 100%	2 of 2 – 100%
Caledonia – Southern Essex	9	0 of 1- 0%	2 of 2 – 100%	0 of 1- 0%
Franklin – G.Isle	18	0 of 2- 0%	3 of 3 – 100%	1 of 2 – 50%
Orleans – Essex North	15	4 of 6 – 67%	9 of 9 – 100%	6 of 6 – 100%
Windham	11	3 of 4 – 75%	4 of 4 – 100%	2 of 4 – 50%

Revised Discussion of Baseline Data:

Revised to add statewide totals as requested by OSEP.

There were 9 IFSPs that had transition Plans in place of the 15 reviewed, or 9/15 = 60%.

There were 22 IFSPs that had documentation of LEA notification at least 6 months prior to the child's third birthday of the 22 reviewed, or 22/22 = 100%

There were 11 IFSPs that indicated a Transition Conference occurred for a child potentially eligible for Part B of the 15 reviewed. 11/15 = 73%.

Data from Orleans-Essex North, Caledonia Southern Essex, and Franklin/Grand Isle are from close-out file reviews conducted during the 7/04-6/05 time period to determine compliance one year from the determination of non-compliance. Data from the Windham and Bennington regions reflect data collected during file reviews conducted as part of the initial monitoring process during the 7/04-6/05 time period. The close-out and initial data from the regions reflect the files of children whose birthdates made them eligible for the six-month notification, transition plan, and 90-day conference; therefore, percentages are based on the number of files out of the total number reviewed that met this criteria at the time of the file review.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%

FFY	Measurable and Rigorous Target
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-20112)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources: Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities for Indicators 8A, 8B, 8C	Timelines	Resources
Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify regional CIS-EIPs below 100% target in analysis of data. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans.	Annually through FFY 2012	State CIS-EI staff
Regional CIS-EIPs conduct annual self-assessment – to be analyzed by state CIS-EI staff and verified on-site, if necessary	Beginning FFY 2008 and annually through FFY 2012	Regional CIS-EIP Directors/Supervisors and state CIS-EI staff
Develop, disseminate and maintain on-line transition modules for families and providers	FFY 2010 through FFY 2012	CIS-EI/Part B 619 state team
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
Continue to clarify and provide guidance on regulations, policy and procedures and development/revision of regional agreements between	Ongoing through FFY 2012	State CIS-EI/CIS and Part B 619 staff, NECTAC,

Activities for Indicators 8A, 8B, 8C	Timelines	Resources
regional CIS-EIPs and LEAs/SUs		NERRC/Larry Edelman, OSEP 12/09 guidance and other 619 and Part C discretionary resources
Provide individualized technical assistance to CIS-EIPs when ongoing data analysis indicates need. These data may include targeted onsite file reviews, CIS-EIP self-assessments, and/or regular desk audits of monthly and annual data submissions.	Ongoing through FFY 2012	State CIS/CIS-EI staff
Continue to provide technical assistance and training individually and jointly to CIS-EIPs and LEAs at both regional/local and statewide levels. This includes developing interactive, self-guided web-based resources addressing specific policies/procedures, guidance and incorporating “live” Q & A sessions	Ongoing through FFY 2012	CIS-EI/CIS and Part B 619 staff, regional CIS-EI staff and SU/EEE staff
CIS-EI/CIS/DOE monitoring and TA system: assess status of compliance, performance and support needed for regions, private providers and schools through ongoing and regular data review, analysis and feedback of CIS-EI child count/CIS data, file reviews, self assessments, complaints review, etc.	Ongoing through FFY 2012	State CIS-EI/CIS Team, DOE personnel, VICC Family Leadership Committee
Continue to ensure effective multi-way communication system regarding continuous improvement activities/strategies with regional CIS-EIPs via CIS-EI/CIS TA liaisons, regular conference calls, CIS blog & listserv, CIS Community of Practice calls and annual conferences , email, on-site TA visits, guidance materials, etc. (multiple partners including SEA, CIS, and regional CIS-EIPs).	Ongoing through FFY 2012	State CIS-EI/CIS and DOE staff
Continue to seek resources through the SIG grant and other grants in the SLP-Communication, ASD, OT, PT and advanced child development fields to work with CIS-EI/CIS staff and families.	Ongoing through 2012	State Part C/CIS staff, community partners, University of Vermont CDCI, DOE and SLP and other professional associations
Complete and make available to CIS administrators and providers online technical assistance and training module clarifying Part C timeline requirements	Spring 2012	State CIS-EI/CIS staff
Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP	By March 2012	AHS and DOE staff
Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement	June 30, 2013	AHS and DOE staff
Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special	June 30, 2014	AHS and AOE staff

Activities for Indicators 8A, 8B, 8C	Timelines	Resources
<i>Education Rules Adopted June 1, 2013</i>		
Require all CIS providers to complete, with 100% accuracy, the timeline module and CIS-EI providers the transition modules as well and submit documentation of completion to the state CIS office.	Beginning with SF 2014 contracts, July 1, 2013	State CIS Staff

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

Overview of Issue/Description of System or Process:

This State Performance Plan will be a primary mechanism of accountability for Vermont Part C and its local early intervention programs. Along with the monitoring priority areas and indicators, Vermont has included in its SPP four additional topical areas that it has been monitoring for compliance in file reviews during on-site monitoring visits and will continue to monitor **onsite and in annual self-assessments conducted by the regional CIS-EIPs**. Vermont’s prior and current definition of compliance is 100% for each monitoring priority area and indicator and for the four topical areas in each file reviewed. If one file is out of compliance for one indicator, then that program is considered out of compliance for that indicator.

Part C CIS-EIPs in Vermont are referred to as regions. These regions cover the same areas as the 12 Agency of Human Services regions in Vermont. Each region is a grant sub-recipient. The work specifications for each grantee contain expectations and requirements to ensure compliance with Part C of the Individuals with Disabilities Education Act (IDEA) and describe the process of general supervision and monitoring of programs. The grant work specifications for the 12 regional programs require the programs, on a monthly basis, to provide the Part C CIS-EI Director with monthly data used for reporting and monitoring purposes. The data collected are for children and families who are active, exited and referred. These data are used for the Annual Performance Report, the annual 618 data collections, and the December 1 child count. The data are reviewed and cleared by state CIS-EIP staff on a monthly basis and after the annual December 1 submission of child count. The data will be incorporated into reporting progress on the State Performance Plan in the Annual Performance Report submissions. Regions also are required to submit mid-year and annual reports documenting progress on annual goals, which include those to address identified non-compliance and performance issues. Other sources of data, such as information from focus groups and surveys, are not accurate enough to determine compliance, but do help to back up compliance data and/or indicate a need to look more deeply into an identified issue. All data collected are used for ongoing program improvement statewide as well as regionally. Regions also submit an annual financial report. Vermont Part C prepares an annual regional profile for each region that currently includes demographic data, child find data, and data on Transition, one of the monitoring priority areas. The regional profiles will be revised to meet the requirement to publicly report by region on all Indicators 1-8.

Prior to FFY 2008, Vermont Part C had a cyclical monitoring system, i.e., regions were monitored every three years, and data primarily were collected through on-site monitoring of regions, including file reviews, to most accurately and confidently determine compliance and noncompliance. Outside experts recommended that Vermont complete its cycle before implementing a focused monitoring system. The broad monitoring team (file reviews are done by state Part C staff) included at a minimum family members, other agency staff, and peer early intervention providers from other regions, ICC members, and state Part C staff. As soon as the on-site monitoring process identifies non-compliance in a region (program), staff send a report and cover letter to the region documenting the areas of non-compliance. The letter and report state that the region has one year from the date of the letter and report to correct all identified non-compliance.

The letter and report require that the region develops an action plan, in collaboration with its regional team (that includes family members), other critical stakeholders, and Vermont Part C staff, to ensure correction of non-compliance no later than one year from the date of the letter (the letter includes a template for the action plan). The action plan contains the identified areas of non-compliance, improvement strategies to address the identified findings, person(s) responsible for facilitating the implementation of the specified strategies, timelines for accomplishing the improvement strategies, and who on the regional level will verify progress (i.e., attaining full compliance or making substantial progress) in the identified area(s) of non-compliance and timelines for doing so. State Part C staff offer training and provide onsite technical assistance (including an “interim” file review conducted with the regional Part C staff) between the initial and verification visits. Part C staff conduct the verification visit about a month prior to the date required for full compliance to determine correction of non-compliance. If staff determine that a region is in full compliance at or prior to the one-year verification visit, staff will close out the region at that point and send a letter cover letter and report that recognizes and “celebrates” the region’s achievements and reinforces the requirement to maintain full compliance in all priority and other monitoring areas.

If Part C staff determine at the one-year verification visit that the region has not corrected all its findings of non-compliance, staff develop a technical assistance plan with the region based on the findings of non-compliance. The actions contained in the plan depend on the level of non-compliance that the region exhibits. Additionally, the annual budget process includes a review of non-compliance and performance issues in order to assist the region in fulfilling its responsibilities in carrying out services under Part C, IDE IA, e.g., the region may receive funds to hire additional staff. Other incentives to achieve compliance may include receiving mentoring by peers from regions in which practices promote meeting compliance and performance standards.

If there is continued non-compliance, Vermont Part C evaluates each region to determine its level of non-compliance and, based on this determination, incorporates additional requirements for the particular region, e.g., quarterly reports to the Part C state office in addition to the mid-year report and annual reports, additional on-site technical assistance visits, etc. Sanctions for ongoing and substantial non-compliance can include financial and/or programmatic sanctions, including the reduction of funds or the seeking of a new sub-recipient that will ensure compliance.

Along with technical assistance related to non-compliance identified through the cyclical monitoring process, grant work specifications for the 12 regions include expectations related to participating in internal and external professional development and technical assistance activities that will result in improving outcomes for infants, toddlers and their families. Part C staff hold regular conference calls with regional staff and at least two face-to-face meetings annually. Monthly professional development has been provided to regions through “Friday Conversations.” An annual conference with national consultants, planned and implemented collaboratively with other agencies, has occurred the past two years to provide professional development around ensuring positive outcomes for children and their families. Part C staff also have been working with staff from other child development and support programs to plan and implement integrated on-site monitoring activities.

Vermont completed the cyclical monitoring process in FFY 2007 and in FFY 2008 initiated the transition to a more focused, ongoing monitoring process. As part of this transition, VT CIS-EI required all regional EIPs to conduct annual self-assessments. The purposes of the self-assessment include: 1) verifying timely correction of findings of noncompliance, 2) verifying subsequent correction of remaining noncompliance from previous years, 3) reinforcing self-assessments as part of ongoing supervision to

promote program improvement in the regional CIS-EIPs, and 4) providing a vehicle for on-site technical assistance, i.e., state CIS-EI staff schedule follow-up visits to regional EIPs to verify and discuss results and address specific needs identified by regional CIS-EIP staff. Vermont Part C staff continue to monitor regional EIPs through their monthly desk audit of the child count data and discuss the data during weekly staff meetings and with the regional CIS-EIPs. These data, along with other data and information, enable state CIS-EI staff to follow up on any data “anomalies,” identify systemic noncompliance, and provide targeted and intense technical assistance. Beginning December 2011, Children’s Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children’s Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

Vermont Part C CIS-EI, in collaboration with Vermont Part B, continues to review its current rules, regulations, policies and procedures to ensure compliance with the anticipated reauthorization of Part C of the Individuals with Disabilities Education Act (IDEA) and effective implementation of the current Part B/Part C interagency agreement (IAA), submitted to OSEP June 2006, and its subsequent revision. Vermont Part C has an agreement with the SEA to use the special education complaint process and has identified and prioritized Parental Rights as a topic area for compliance monitoring and will continue to do so. A description of the complaint process is under Indicator 10.

Revised Baseline Data for FFY 2004 (2004-2005):

A. Priority Areas and Indicators (Initial Monitoring Visit FFY 2003: July 2003-June 2004; One-Year Verification FFY 2004: July 2004-June 2005)

Priority Areas/Indicators	#Programs Reviewed FFY 2003	#Programs with Findings	a. # of Findings	b. # Corrected w/in 1 year FFY 2004	% Corrected w/in 1 year
2. Natural Environments	5	2	3	3	100%
7. 45-Day Timeline	5	5	12	7	58%
8. Transition	5	3	7	6	86%
TOTAL			22	16	73%

B. Other Topical Areas (Initial Monitoring Visit FFY 2003: July 2003-June 2004; One-Year Verification FFY 2004: July 2004-June 2005)

Other Topical Areas	#Programs Reviewed FFY 2003	#Programs with Findings	a. # of Findings	b. # Corrected w/in 1 year FFY 2004	% Corrected w/in 1 year
Single Service Coordinator	5	3	9	9	100%
Present Levels Development	5	5	15	9	60%
Prior Notice Initial IFSP Meeting	5	4	18	12	67%
Parental Rights	5	3	5	3	60%

Other Topical Areas	#Programs Reviewed FFY 2003	#Programs with Findings	a. # of Findings	b. # Corrected w/in 1 year FFY 2004	% Corrected w/in 1 year
TOTAL			47	33	70%

C. There was **no** non-compliance identified through other mechanisms during FFY 2003.

a. Total Number Findings Priority, Topical Areas, and Other (FFY 2003):	69
b. Total Number Corrections (FFY 2004):	49
Total Corrected within 1 Year:	71%

Data were collected on Indicator 1 (timely initiation of services) for the 2004-2005 and 2005-2006 reporting periods through statewide (i.e., in all 12 regions) file reviews. The baseline data for 2004-2005 is reported in the table below. The corrections data will be reported in the February 2007 submission of the Annual Performance Report.

Priority Area/Indicator	#Programs Reviewed FFY 2004	#Programs with Findings	a. # of Findings	b. # Corrected w/in 1 year FFY 2005	% Corrected w/in 1 year
1. Timely Provision of EI Services	12	7	18	To be reported on in APR submitted 2/07	To be reported on in APR submitted 2/07

Revised Discussion of Baseline Data:

File reviews were conducted in five regions between July 2003 and June 2004 as part of the regional monitoring process and verification visits were conducted during the FFY 2004 reporting period. The correction data reported for Indicators 2, 7, 8 and four Topical Areas are based on corrections made between July 2004 and June 2005. Vermont's prior and current definition of compliance is 100% for each monitoring priority area and indicator and for the four topical areas in each file reviewed. If one file is out of compliance for one indicator, then that program is considered out of compliance for that indicator. This results in Vermont's monitoring data showing a low level of compliance and potentially little capacity to achieve full compliance within one year using the current definition/procedure. Additionally, although file reviewers noted when there was documentation of family circumstances having an impact on meeting the 45-day timeline, those files were considered non-compliant.

The three findings of non-compliance for natural environments reflected no written justification for why the children were not in a natural environment and reviewers were told the children were in other settings due to provider shortages – this is not acceptable under Vermont Part C's standards for natural environments.

The data reported for Indicator 1 (Timely Initiation of Services) represents data from the 2004-2005 reporting period that was collected from file reviews (125) conducted August-October 2006. Corrections will be reported in the Annual Performance Report submitted February 2007. Although there were findings, Vermont Part C is encouraged that there is a relatively high level of compliance statewide (see revised Indicator 1 – SPP).

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revisions to improvement activities **as of February 1, 2012 submission are bolded and italicized** in table below.

Activities Indicator 9	Timelines	Resources
Revise and submit C-B Interagency Agreement (IAA) submitted to OSEP 6/29/06	In process beginning FFY 2010 and by FFY 2012	AHS and DOE staff
<i>Revise forms annually to gather valid and reliable data, ensure accurate documentation by regional CIS/EIP staff and avoid collection of duplicate information. This includes revising monthly and annual child count instructions, forms, and service grids and requiring regional CIS-EI staff to self-report compliance/noncompliance prior to submitting data.</i>	<i>Annually through FFY 2011 (note: electronic data management system to be phased in FFY 2011)</i>	State CIS-EI Staff

Activities Indicator 9	Timelines	Resources
Conduct bi-monthly data checks and submit data grids to CIS-EIPs to gather complete and accurate data. Generate weekly “extract report” to flag incorrect social security numbers, spelling of names and/or dates of birth.	Ongoing through FFY 2012	State CIS-EI Staff
Revise and implement process for identifying and correcting findings	FFY 2009 through FFY 2012	State CIS-EI staff
Determination process: Continue to refine criteria and provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify regional CIS-EIPs below 100% target in analysis of data. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans.	Annually through FFY 2012	State CIS-EI staff
Restructure funding system to better enable resources in the SLP-Communication, OT and PT fields to work with CIS-EI staff and families.	FFY 2009	State CIS-EI Coordinator, HPES staff
Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.	State of Vermont terminated contract with vendor January 2013 – timeline to be determined	State of Vermont and State of Vermont Information Technology
Continue to provide ongoing guidance to reinforce the 100% compliance requirement for Indicators 1, 7, 8A, 8B, 8C with CIS-EIP staff, ICC, partner schools and any partners doing service coordination via CIS blog, CIS listserv, annual CIS-EIP conference, monthly CIS-EIP Director conference calls, annual determination process, etc.	Ongoing through FFY 2012	State CIS-EI staff
Regional CIS-EIPs conduct annual self-assessment – to be analyzed by state CIS-EI staff and verified on-site, if necessary	Beginning FFY 2008 and annually through FFY 2012	Regional CIS-EIP Directors/Supervisors and state CIS-EI staff
Develop General Supervision Manual (to include 100% compliance requirements)	June 30, 2014	State CIS-EI/CIS staff
Provide individualized technical assistance to CIS-EIPs when ongoing data analysis indicates need. These data may include targeted onsite file reviews, CIS-EIP self-assessments, and/or regular desk audits of monthly and annual data submissions.	Ongoing through FFY 2012	State CIS/CIS-EI staff
Collaborate with Vermont Association of Speech and Language Pathologists and Occupational and Physical Therapy Associations to address shortages	Ongoing through FFY 2012	State CIS-EI staff, community partners and SLP/OT/PT professional associations
Continue to collaborate with State Department of Education on State Improvement Grant and other personnel prep and development resources on recruiting, training and maintaining of pediatric SLPs, PTs, OTs and other key personnel.	Ongoing through FFY 2012	Staff CIS-EI staff and DOE staff
CIS-EI/CIS/DOE monitoring and TA system: assess status of compliance, performance and support needed for regions, private providers and schools through	Ongoing through FFY 2012	State CIS-EI/CIS Team, DOE personnel and VICC Family

Activities Indicator 9	Timelines	Resources
ongoing and regular data review, analysis and feedback of CIS-EI child count/CIS data, file reviews, self assessments, complaints review, etc.		Leadership and Support Committee
Continue to prepare for and deliver meaningful technical assistance, training, professional development and other improvement and support strategies.	Ongoing through FFY 2012	State CIS-EI/Part B 619 team, state CIS partners, CIS-EIP staff, SUs/EEE staff
Continue to ensure effective multi-way communication system regarding continuous improvement activities/strategies with regional CIS-EIPs via CIS-EI/CIS TA liaisons, regular conference calls, <i>CIS blog & listserv</i> , <i>CIS Community of Practice calls and annual conferences</i> , email, on-site TA visits, guidance materials, etc. (multiple partners including SEA, CIS, and regional CIS-EIPs).	Ongoing through FFY 2012	State CIS-EI/CIS staff
Continue to actively engage with federal and regional technical assistance resources, including OSEP state contact, the Infant Toddler Coordinators Association (ITCA), the National Early Childhood Technical Assistance Center (NECTAC), the Early Childhood Outcomes Center (ECO), the Center on the Social and Emotional Foundations for Early Learning (CSEFEL), the Center for Early Literacy Learning (CELL), Northeast Regional Resource Center (NERRC), and other Regional Resource Centers (RRCs).	Annually through FFY 2012	State CIS-EI/CIS staff
Continue to seek additional resources through grants and personnel to improve compliance and performance in: 1) providing timely and quality services, 2) seeking to “find” children at the earliest possible time, 3) providing services in natural environments, and 4) having successful transitions when children enter or leave CIS-EI.	Ongoing through FFY 2012	State CIS-EI/CIS staff, community partners, University of Vermont CDCI-UCEDD, DOE, statewide FEL grant (based on collaboration with federally-funded CSEFEL and CELL), two federally-funded autism grants , and SLP/OT/PT professional assns.
Complete and make available to CIS administrators and providers online technical assistance and training module clarifying Part C timeline requirements	Spring 2012	State CIS-EI/CIS staff
Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP	By March 2012	AHS and DOE staff
Conduct legislative rule-making to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement	June 30, 2013	AHS and DOE staff
Revise VT Part C policies and procedures to ensure congruence with September 2011 Part C Regulations, revised VT Part C-B Interagency Agreement and State of Vermont Special Education	June 30, 2014	AHS and AOE staff

Activities Indicator 9	Timelines	Resources
Rules Adopted June 1, 2013		
Require all CIS providers to complete, with 100% accuracy, the timeline module and CIS-EI providers the transition modules as well and submit documentation of completion to the state CIS office.	Beginning with SF 2014 contracts, July 1, 2013	State CIS Staff

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

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.

Overview of Issue/Description of System or Process:

Families are informed of their rights to file a formal complaint or request mediation or a due process hearing during the intake process, at least at the initial IFSP meeting, annual reviews and transition. Written materials are given to families at these times and additionally upon request. Service Coordinators also share this information with families verbally as situations arise.

The staff, in discussing informal complaints, discusses the formal complaint process and mail out copies of the written information on parental rights as follow to these informal discussions.

Vermont Part C has an agreement with the SEA to use the special education complaint process as that process has resources and skills in special education not available to the Part C program that administratively sits in the Agency of Human Services.

From the Department of Education Indicator 16 overview of issue/description of system or process:

Any person has the right to file an administrative complaint with the Vermont Commissioner of Education if they believe a child's early intervention or special education rights have been violated. An organization or a group of parents may also file a complaint if it believes that there are violations affecting a number of children. The Commissioner will appoint Department staff to investigate the complaint, and a decision must be issued within 60 days of receipt of the complaint, unless an extension is granted. A copy of the decision will be forwarded to the complainant, the local educational agency and/or the State Part C office.

To investigate the complaint, the Department of Education may, but is not required to, conduct an on-site review. The Department will also give the complainant an opportunity to present additional information, orally or in writing. The Department of Education staff will review all relevant information and make a decision about whether the school district and/or the Part C program has violated federal or state special education laws. If the administrative complaint is also the subject of a due process hearing, the Department will not investigate any part of the complaint that is being addressed as part of the due process hearing.

To file an administrative complaint, one should write to the Commissioner of Education, Vermont Department of Education, 120 State Street, Montpelier, VT 05620-2501.

A database managed by a representative of the Vermont Department of Education is used to track signed written complaints, including complaints with reports issued, complaints withdrawn or dismissed and complaints pending and the timelines within each action was completed. This database also includes tracking data for due process hearings and mediations.

Baseline Data for FFY 2004 (2004-2005):

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

Discussion of Baseline Data: there was one signed, written complaint filed during this time period. The complaint was received on 1/20/05. The report was due out on 3/21/05. The deadline was extended to 4/8/05 and the Report was issued on 4/6/05 w/ corrective actions. This was counted as report issued within the extended timeline in the Part B Attachment 1. The Part C Attachment 1 has a reference to Part B Attachment 1 in order to not double count this complaint.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

Activities Indicator 10	Timelines	Resources
Continue to ensure families understand their rights, including parental consent for services and procedural safeguards.	Ongoing through FFY 2012	State and regional CIS-EI/CIS staff and partners
Continue to utilize the expertise of the SEA in investigating and processing complaints, requests for mediation, and other due process options.	Ongoing through FFY 2012	State and regional CIS-EI staff
<i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i>	<i>By March 2012</i>	<i>AHS and DOE staff</i>
<i>Conduct legislative rule-making and revise VT Part C rules and regulations, policies and procedures to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i>	<i>June 30, 2013</i>	<i>AHS and DOE staff</i>

Please see Part B indicator 16 for additional improvement strategies submitted by Part B.

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

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.

Overview of Issue/Description of System or Process:

Please see indicator 10 for Part C description and indicator 17 under Part B since Vermont Part C uses the Part B dispute resolution process.

From Part B Indicator 17 overview of issue/description of system or process:

A due process hearing is a formal review conducted by a trained, impartial hearing officer appointed by the Vermont Department of Education. After reviewing the evidence provided by the parties, the hearing officer issues written decisions including findings of fact and conclusions of law. The hearing officer decision is a final agency decision.

Parties requesting a due process must file their request with the Commissioner, Vermont Department of Education within two years of the date the problem occurred or two years from the date the problem was discovered; a 90 day timeframe applies for reimbursement of unilateral placement cases. The Department has a due process complaint request form that is available through contacting the Department, the school district, or the Department's website.

With the addition of the resolution session requirements in the new IDEIA, the hearing officers are now contacting parties a few days after the receipt of the complaint for an early status conference. In the early status conference, the hearing officer explains the new resolution session requirement and ascertains whether the parties will meet. If they plan to meet, the hearing officer has the parties confirm the date of the resolution session. If not, the hearing officer either confirms intent to request mediation or waive the resolution session and proceed to hearing. If the parties waive, the hearing officer would confirm the dates for pre-hearing conferences, if any, distribution of 5-day rule materials, the hearing date, and the decision date.

A database managed by a representative of the Vermont Department of Education is used to track fully adjudicated hearing requests, fully adjudicated hearings and those fully adjudicated hearing requests that resolved without a hearing, and the timelines within each action was completed. This database also includes tracking data for administrative complaints and mediations. For FFY 2006, Vermont is in the process of modifying this database to accommodate tracking of resolution sessions and settlement agreements.

Baseline Data for FFY 2004 (2004-2005):

None to report for this time period

Discussion of Baseline Data:

See above.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2006 (2006-2007)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2007 (2007-2008)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2008 (2008-2009)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2009 (2009-2010)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2010 (2010-2011)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2011 (2011-2012)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.
2012 (2012-2013)	From Part B indicator 17: Within 45 days or with proper extensions, 100% of due process hearing requests will be fully adjudicated.

Improvement Activities/Timelines/Resources:

Activities for Indicator 11	Timelines	Resources
Continue to ensure families understand their rights, including parental consent for services and procedural safeguards.	Ongoing through FFY 2012	State and regional CIS-EI/CIS staff and partners
Continue to utilize the expertise of the SEA in investigating and processing complaints, requests for mediation and other due process options.	Ongoing through FFY 2012	State and regional CIS-EI staff
Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP	By March 2012	AHS and DOE staff
Conduct legislative rule-making and revise VT Part C rules and regulations, policies and procedures to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement	June 30, 2013	AHS and DOE staff

Please see Part B indicator 17 for additional improvement strategies submitted by Part B.

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

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.

Overview of Issue/Description of System or Process:

Please see description for indicator 10.

Baseline Data for FFY 2004 (2004-2005):

None requested during this time period.

Discussion of Baseline Data:

There have been no hearing requests during this time period.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Vermont Part C will coordinate with and support Part B targets.
2006 (2006-2007)	Vermont Part C will coordinate with and support Part B targets.
2007 (2007-2008)	Vermont Part C will coordinate with and support Part B targets.
2008 (2008-2009)	Vermont Part C will coordinate with and support Part B targets.
2009 (2009-2010)	Vermont Part C will coordinate with and support Part B targets.
2010 (2010-2011)	Vermont Part C will coordinate with and support Part B targets.
2011 (2011-2012)	Vermont Part C will coordinate with and support Part B targets.

FFY	Measurable and Rigorous Target
2012 (2012-2013)	Vermont Part C will coordinate with and support Part B targets.

Improvement Activities/Timelines/Resources:

Activities for Indicator 12	Timelines	Resources
Continue to ensure families understand their rights, including parental consent for services and procedural safeguards.	Ongoing through FFY 2012	State and regional CIS-EI/CIS staff and partners
Continue to utilize the expertise of the SEA in investigating and processing complaints, requests for mediation and other due process options.	Ongoing through FFY 2012	State and regional CIS-EI staff
<i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i>	<i>By March 2012</i>	<i>AHS and DOE staff</i>
<i>Conduct legislative rule-making and revise VT Part C rules and regulations, policies and procedures to ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i>	<i>June 30, 2013</i>	<i>AHS and DOE staff</i>

Please see Part B indicator 18 for additional improvement strategies submitted by Part B.

SPP Template – Part C (3)

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by (2.1) times 100.

Overview of Issue/Description of System or Process:

Please see description for Part C indicator 10 and Part B indicator 19.

Overview of issue/description of system or process taken from Part B indicator 19:

Mediation is a mechanism by which a State or local educational agency and a parent of a child with a disability may resolve a dispute, before or after the filing of a complaint or request for due process. Mediation is a voluntary process that will be used only if both parties to a dispute agree to take part. A mediator's job is to help the opposing parties come to an agreement, not to make decisions for the parties. The parties may end mediation at any time. Agreeing to mediate will not delay or deny access to a due process hearing or any other rights afforded under IDEA. The Department of Education will offer mediation when either the parent or school official asks for a due process hearing, but the parties are not required to accept it. Mediation will be scheduled at a time and place convenient to the parties.

Requests for mediation shall be submitted to the Vermont Department of Education, Special Education Mediation Service (VDE-SEMS), 120 State Street, Montpelier, Vermont 05620-2501. Upon receipt of such request, the Department shall send each parent who requests mediation the Parents' Rights in Special Education Notice and shall send its mediation procedures to the parties to the mediation. The agreement to mediate shall be in writing and signed by all parties.

A trained, impartial mediator who is not an employee of the school district and has no conflict of interest with the situation will conduct the mediation. Mediators shall be knowledgeable in law and regulations relating to the provision of special education and related services. The Vermont Department of Education maintains a list of qualified mediators who are assigned to a case by the Department on a random, rotational, basis from the list. A mediator will be assigned to a case by the Department within five days of receipt of a joint written request for mediation or upon receipt of one party's written request and confirmation by the other party or parties. One may bring an advocate, support person and/or family members to the mediation. Either party may bring an attorney to the mediation session. The information that the parties discuss during mediation is confidential. What the parties say during a mediation session cannot be repeated in a subsequent due process hearing or court proceeding. If the parties to a mediation reach an agreement, it will be put in writing and become part of a child's permanent education records.

A database managed by a representative of the Vermont Department of Education is used to track mediation requests, total mediations conducted (including those related and not related to due process), and mediations not held (including pending mediations) and the timelines within each action was completed. This database also includes tracking data for fully adjudicated due process hearings and administrative complaints.

Baseline Data for FFY 2004 (2004-2005):

There have been no mediations held during this time period.

SPP Template – Part C (3)

Discussion of Baseline Data:

See above.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2006 (2006-2007)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2007 (2007-2008)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2008 (2008-2009)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2009 (2009-2010)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2010 (2010-2011)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2011 (2011-2012)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.
2012 (2012-2013)	Assist education in promoting the use of mediation; please see part B indicator 19 targets.

Improvement Activities/Timelines/Resources:

Activities for Indicator 13	Timelines	Resources
Continue to ensure families understand their rights, including parental consent for services and procedural safeguards.	Ongoing through FFY 2012	State and regional CIS-EI/CIS staff and partners
Continue to utilize the expertise of the SEA in investigating and processing complaints, requests for mediation and other due process options.	Ongoing through FFY 2012	State and regional CIS-EI staff
<i>Revise Part C-B Interagency Agreement to ensure congruence with September 2011 Part C Regulations and submit for approval to OSEP</i>	<i>By March 2012</i>	<i>AHS and DOE staff</i>
<i>Conduct legislative rule-making and revise VT Part C rules and regulations, policies and procedures to</i>	<i>June 30, 2013</i>	<i>AHS and DOE staff</i>

SPP Template – Part C (3)

Activities for Indicator 13	Timelines	Resources
<i>ensure congruence with September 2011 Part C Regulations and revised VT Part C-B Interagency Agreement</i>		

Please see Part B indicator 19 for additional improvement strategies submitted by Part B.

SPP Template – Part C (3)

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development: Please refer to the description under Indicator 1 on page 5, which applies to all 14 indicators.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

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

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

These Measurement instructions as of 2-1-10 replace measurement instructions in prior SPPs.

Overview of Issue/Description of System or Process:

The child count data system produces the data for the OSEP 618 reporting and will for the Annual Performance Reports beginning FFY 2006. Service Coordinators in the regions prepare by hand the state prepared data input forms for every child referred. These data are submitted between December 15 and January 15, and is then cleared by state CIS-EI staff. Questions about the data are discussed with the service coordinators in the regions. The data are then entered into a state (MS Access) database for all actives. The 618 data for actives are then reviewed and upon approval submitted on line.

Training sessions are held with regional CIS-EIP staff on the data collection forms and instructions prior to the 12/1 child count activities each year. A power point presentation has been completed to assist this process.

The exit data are processed in the same manner and entered between February and October. State reports and profiles of regions are done following the November 1 submission.

Beginning December 2011, Children's Integrated Services, which includes VT Part C CIS-EI, will move from a manual to an integrated electronic data management system to gather, analyze and report data. This data management system will enable VT Part C CIS-EI to have a real-time, online system for ongoing monitoring of its regional CIS-EIPs and to collect all required data for the 618 reports and Annual Performance Reports (APRs). Children's Integrated Services staff anticipate this data management system will be fully implemented in FFY 2012. Since this system will be actively used by practitioners and eventually by families, the data entered into it will be much more functional and effective as an off-site tool/process for assessing compliance and/or performance on an ongoing basis.

Baseline Data for FFY 2004 (2004-2005):

Vermont has been timely and accurate in submission of 618 data, and State and annual performance plans.

Discussion of Baseline Data:

Vermont has been timely and accurate in submission of 618 data, and State and annual performance plans.

SPP Template – Part C (3)

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

Significant revisions to current improvement activities and additions of new activities **as of February 1, 2011 submission are bolded** in table below.

Significant revision to improvement activity **as of February 1, 2012 submission is *bolded and italicized*** in table below.

Activities Indicator 14	Timelines	Resources
Revise forms annually to gather valid and reliable data, ensure accurate documentation by regional CIS/EIP staff and avoid collection of duplicate information. This includes revising monthly and annual child count instructions and forms. Continue system of follow-up with regional EIP staff to ensure timely submission of data.	Annually through FFY 2011 (note: electronic data management system to be phased in FFY 2011)	State CIS-EI Staff
Conduct bi-monthly data checks and submit data grids to CIS-EIPs to gather complete and accurate data. Generate weekly “extract report” to flag incorrect social security numbers, spelling of names and/or dates of birth.	Ongoing through FFY 2012	State CIS-EI staff

SPP Template – Part C (3)

Activities Indicator 14	Timelines	Resources
<p>Continue to ensure adequate staff support for periods of intensive data entry, especially during the months of December and January, and continued implementation of system for regular data review and verification of accurate data for billing system</p>	<p>Ongoing through FFY 2011 and reviewed for FFY 2012 when electronic data management system in place</p>	<p>State CIS-EI Coordinator</p>
<p>Determination process: Provide longitudinal data to regions to demonstrate progress/slippage and highlight areas of improvement/concern. Identify regional CIS-EIPs below 100% target in analysis of data. CIS-EIPs address with specific strategies/activities in annual Wellness/Program Improvement Plans.</p>		
<p>Develop and phase in electronic data management system. Train and support regional CIS-EIPs in converting to an electronic, regionally entered data system.</p>	<p>State of Vermont terminated contract with vendor January 2013 – timeline to be determined</p>	<p>State of Vermont and State of Vermont Information Technology</p>
<p>State CIS-EI Coordinator continues to review and approve each “618” Table one week prior to submission dates to ensure completeness and accuracy, verifies arrangements for submission, including conveyance by letter or email, and ensures congruence with data reported in APRs for Indicators 2, 5, 6, 8, 10, 11 and 13.</p>	<p>Annually for 618 February 1 and November 1 and February 1 APR submission dates through FFY 2012</p>	<p>State CIS-EI Coordinator</p>

SPP Template – Part C (3)

Part C SPP/APR Attachment 1 (Form)

Report of Dispute Resolution Under Part C of the Individuals with Disabilities Education Act Complaints, Mediations, Resolutions Sessions, and Due Process Hearings

SECTION A: Signed, written complaints	
(1) Signed, written complaints total	1
(1.1) Complaints with reports issued	1
(a) Reports with findings	1
(b) Reports within timeline	DNA
© Reports within extended timelines	1
(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	
(i) Mediation agreements	
(b) Mediations not related to due process	
(i) Mediation agreements	
(2.2) Mediations not held (including pending)	

SECTION C: Hearing requests	
(3) Hearing requests total	0
(3.1) Resolution sessions	
(a) Settlement agreements	
(3.2) Hearings (fully adjudicated)	
(a) Decisions within timeline SELECT timeline used {30 day/Part C 45 day/Part B 45 day}	
(b) Decisions within extended timeline	
(3.3) Resolved without a hearing	

Since Vermont Part C uses the Part B dispute resolution process under IDE IA for complaints, mediations, resolution sessions and due process hearings, the data for Part C are reported in Part B's attachment 1 and included in the data reported in Part B indicators 16, 17, 18, and 19. Vermont Part C has had 1 formal complaint during this reporting period, no mediation requests and no requests for hearings.

For a full picture of Vermont on these indicators, please use the Part B indicators so as not to duplicate counts.