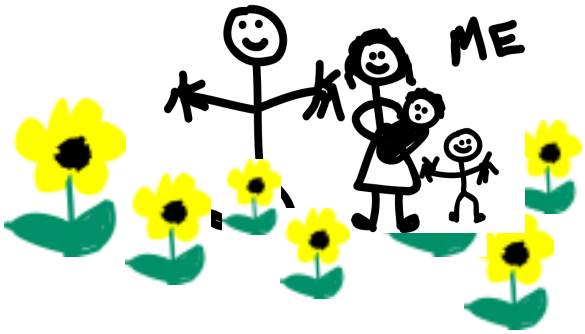
4-13-11 Revision

Alabama's Early Intervention System



SFY 2010
Part C Annual Performance Report

PREPARED FOR THE
UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION PROGRAMS

Submitted by
Alabama's Department of Rehabilitation Services
Alabama's Early Intervention System and the
Governor's Interagency Coordinating Council

Original Submission: February 1, 2011
Current Submission: April 13, 2011 Revision

January 27, 2011

U.S. Department of Education
Office of Special Education Programs
Potomac Center Plaza
Mail Stop 2600, Room 4129
550 12th St. S.W.
Washington, D.C. 20202

I am pleased to submit to you Alabama's State Part C Annual Performance Report and amended State Performance Plan as required by Part C of the Individuals with Disabilities Education Act. Many families and children have participated in the activities of the past year and there have been many successes in Alabama's Early Intervention System (www.rehab.state.al.us/ei). The Division of Early Intervention, under Alabama Department of Rehabilitation Services as lead agency, has grown to support EI programs and staff in all districts of our state. Partnerships with families and other community members through early identification and intervention continue to grow and strengthen. Family members, representatives from ICC member agencies, family support organization representatives and other stakeholders assisted the lead agency in developing this plan to assure that all early intervention components are in compliance and addressed through our statewide system. The agencies represented on the Governor's Interagency Coordinating Council and other stakeholders will continue to work to maximize all possible resources.

Alabama has a strong early intervention program and has the benefit of a strong lead agency and Interagency Coordinating Council, committed staff from ICC member agencies, and dedicated parents and community members who continue to work for a system of resource access, supports and services that are accessible to all eligible children and their families in local communities. The District Coordinating Councils have assisted in this process by serving as the focal point for the coordination of supports and services in natural environments at the local level and have built the foundation upon which to expand our system.

Please accept Alabama's State Part C Annual Performance Report and amended State Performance Plan on behalf of the state of Alabama and its families and children who are and will be the recipients of these important early intervention services.

Sincerely,

Terri Bolin

Terri Bolin
Chairperson, Governor's Interagency Coordinating Council
VP Mission Services Goodwill Easter Seals of the Gulf Coast

Enclosure

Pc: Governor's Interagency Coordinating Council
District Coordinating Councils

ANNUAL REPORT CERTIFICATION OF THE INTERAGENCY COORDINATING COUNCIL UNDER PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

Under IDEA Section 641(e)(1)(D) and 34 CFR §303.654, the Interagency Coordinating Council (ICC) of each jurisdiction that receives funds under Part C of the IDEA must prepare and submit to the Secretary of the U.S. Department of Education (Department) and to the Governor of its jurisdiction an annual report on the status of the early intervention programs for infants and toddlers with disabilities and their families operated within the State. The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) provide this certification with the State lead agency's Annual Performance Report (APR)[1] under Part C of the IDEA. This certification (including the annual report or APR) is due no later than February 1, 2011.

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

1. [ ] Submitting its own annual report (which is attached); or
2. [X] Using the State's Part C APR for FFY 2009 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C APR for accuracy and completeness.[2]

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

Signature of ICC Chairperson

1/27/2011
Date

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1 Under IDEA Sections 616(b)(2)(C)(ii)(II) and 642 and under 34 CFR §80.40, the lead agency's APR must report on the State's performance under its State performance plan and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

2 If the ICC is using the State's Part C APR and it disagrees with data or other information presented in the State's Part C APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 1, 2011.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:

Development of the APR: Alabama's Annual Performance Report was developed through a systematic process involving the AEIS Lead Agency, the ICC, and stakeholders representing service providers, families, and leaders throughout the state. A core group from the Lead Agency worked under the leadership of the ICC and ICC Subcommittees to develop the APR using the SPP as its foundation. This core group has attended OSEP sponsored conferences and conference calls as well as utilizing the OSEP project officer for guidance and direction. In particular, during SFY 2010, Alabama participated in a verification site visit by OSEP staff (Kate Moran, Rhonda Spence and Larry Ringer) that included a review of APR components and AEIS practices as per the CrEAG document. Alabama received the letter from the verification visit on January 24, 2011, and will respond according to the required timelines and will include information in SFY 2011 APR.

Starred text (★) under each Indicator below denotes responses to the OSEP SFY 2009 SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and the OSEP SPP/APR Response Table received on June 3, 2010.

Stakeholders: The ICC served as the stakeholder group providing ongoing guidance and input into the development of the APR. Information and updates were provided regularly at each ICC meeting regarding progress towards the achievement of targets, the child outcome data process, training initiatives, and public reporting of program status. Ongoing opportunities for input into improvement strategies are made available statewide. Activities denoted with an asterisk (*) indicate recommendations from stakeholders.

Public input was gathered during SFY 2010 as follows.

- ☑ The AEIS **SPP** was originally published on the AEIS website, http://www.rehab.state.al.us/ei, upon its completion in December 2005 and is updated annually as revisions are made with OSEP approval (specific data on the numbers accessing annual reports and applications for funding are available). This website continues to be available to the public and includes a mechanism for the provision of feedback and recommendations.
- ☑ The AEIS **APR** is published on the AEIS website annually upon completion and submission to OSEP. As for the SPP, the posted APR is available to the public through the website which includes a mechanism for the provision of feedback and recommendations (www.rehab.state.al.us/ei).
- ☑ The **ICC** reviews the final draft of the APR document each year and provides feedback, suggestions for improvement activities, and approval for submission to OSEP.
- ☑ An **AEIS Family Forum** is held annually at the statewide Early Intervention and Preschool Conferences where an overview of the APR components is presented to families and providers from across the state. Through this forum in November 2009, 42 families who were currently receiving services for children birth to 5 provided input regarding services, activities, timelines and resources.

Input from all parties listed has been used to develop the APR, and the work of these entities has determined the direction of AEIS.

Public Dissemination: A complete copy of the AEIS SPP can be found at www.rehab.state.al.us/ei. As was done for the SFY 09 APR, the completed APR for SFY 2010 will be posted on the AEIS website for final public dissemination in March 2011. In addition, data compiled for the APR has been and will continue to be routinely shared with the ICC, ICC subcommittees and state fiscal agents on a quarterly basis for ongoing public dissemination, stakeholder input, and assistance in the ongoing provision of technical assistance and monitoring of AEIS programs.

As per OSEP requirements, AEIS reported to the public on the performance of each EIS program in meeting the measurable and rigorous targets found in the Part C SPP. The SFY 09 Program Profiles were disseminated to state agency liaisons and program administrators and to the public via web posting (www.rehab.state.al.us/ei). AEIS will disseminate and post the SFY 2010 Program Profiles in the spring of 2011.

Program Determinations were made by AEIS for each EIS program utilizing a report card worksheet that included an assessment of their performance in the following areas as directed by OSEP memorandum:

A. Performance on the SPP indicators
B. Valid, reliable and timely data
C. Correction of noncompliance in other areas
D. Audit findings
E. Performance on performance indicators
F. PAR monitoring results

The status of their "determination" was based on criteria assigned to each of the four levels of determination, i.e., Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention. Notification of determinations was made to each EIS program with follow-up being provided as required.

Part C State Annual Performance Report (APR) for SFY 2010

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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.

SFY 2010	Measurable Rigorous Target	▶ Actual Data for SFY 2010:	
	100%	**Number:** From the 662 IFSPs reviewed during SFY 2010 monitoring: **965** initial and subsequent services were received in a timely manner (i.e., within 30 days of IFSP development) out of **991** total services received. **49** services had documented delays attributable to exceptional family circumstances and were included in the numerator and denominator above. **26** services were not delivered in a timely manner due to program issues and were subtracted from the numerator above. **Calculation:** *(965 ÷ 991 x 100 =97.4%)* **97.4%**	**Target:** Not Met

▶ DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:

- The AEIS PAR process ensures continued compliance by consistently monitoring whether eligible infants and toddlers and their families receive early intervention services that are linked to "identified concerns" in a timely manner. (See Indicator 9 for a full description of the monitoring system.) Alabama measures timeliness under this indicator by ensuring that any EI services identified on the initial IFSP and any additional EI services identified on subsequent IFSPs are initiated within the required time period.
- The standard of measurement is that services are delivered within **30 days of IFSP development**.
- Methods used to collect data: Technical Assistance and Provider Appraisal Review (PAR) **review teams**, consisting of AEIS staff and contracting agency personnel, perform on-site visits for all AEIS programs for the fiscal year. The emphasis is on accountability as per IDEA/OSEP requirements and quality of services/supports to families that help them achieve outcomes for families and their children.

  The entire PAR process includes such methodology as **program self assessment**, **review of personnel qualifications**, **on-site review of child records**, **data system reports**, **complaint reports**, **family surveys** and **staff interviews**. Action plans are developed as needed for indicators or components found to be in partial compliance or non-compliance status. (A complete description of the PAR process is provided in Alabama's **SPP**).
- Description of method used to select EIS programs for monitoring**:** AEIS utilizes a system of monitoring called Provider Appraisal Review or PAR. PAR visits are scheduled for Early Intervention Programs every one, two or three years depending on the results of their preceding PAR. A complete PAR cycle occurs every three years wherein all EIS programs are monitored. During SFY 2010, 24 programs were monitored as per the monitoring guidelines and technical assistance was provided to all early intervention programs.

▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

- Results for Indicator 1 during SFY 2010 indicated that 26 services within 9 programs were not delivered within the 30 day timeline due to program issues. These findings along with explanations are as follows:

  1. **AIDB Montgomery**
     3 findings: During the SFY 2010 PAR conducted on April 15, 2010, 3 findings were noted representing services that were delayed past the 30 day timeline, but were, thereafter, delivered according to the IFSP. The delays did not necessitate compensatory services. The Action Plan required a follow-up review on October 30, 2010 of service delivery dates on all IFSPs developed post-PAR. The review for program compliance was actually conducted on December 2, 2010 (delayed at monitor's request) and the program was determined to be in compliance based on a review of the 17 new plans.

  2. **Arc of Autauga**
     3 findings: During the SFY 2010 PAR conducted on October 28, 2010, 3 findings were noted representing services that were delayed past the 30 day timeline, but were delivered within one week of the target date. The delays did not necessitate compensatory services. The Action Plan required two follow-up reviews of all IFSPs developed post-PAR on November 23, 2010 and February 16, 2011. At this reporting time, the November 23, 2010 and January 6, 2011 reviews did not result in full compliance and the program continues to improve, but remains in non-compliance status based on a review of four new plans. The Action Plan continues to be enforced and monitored with ongoing technical assistance from EI staff. Compliance will be

determined during the next PAR which is scheduled for September 15, 2011. The program's status will be reported in the SFY 2011 APR.

3. **Arc of Shelby**
   1 finding: During the SFY 2010 PAR conducted on April 22, 2010, 1 finding was noted of a service not delivered within the 30 day timeline. Documentation was available, however, indicating that the family received the planned service within one week after the due date. The delay did not necessitate compensatory services. The Action Plan required no specific follow-up for this single service event except to insure that the family received services as soon as possible after 30 days (which did occur). No other plan of action was considered necessary. Compliance will be determined at the next TA scheduled for April 8, 2011 and status will be reported in the SFY 2011 APR.

4. **Cheaha EI**
   1 finding: During the SFY 2010 PAR conducted on August 4, 2010, 1 finding was noted of a service not delivered within the 30 day timeline. Documentation was available indicating that the family received the planned but delayed service within three days of the due date (service provider ill). The delay did not necessitate compensatory services. The Action Plan required no specific follow-up for this single event except to insure the family received services as soon as possible but within 30 days (which did occur). No other plan of action was considered necessary. Compliance will be determined at the next TA scheduled for April 20, 2011 and status will be reported in the SFY 2011 APR.

5. **RISE**
   2 findings: During the SFY 2010 PAR conducted on August 25, 2010, 2 findings were noted of services not delivered within the 30 day timeline. Documentation was available, however, indicating that families did receive the planned services within one week of the due dates. The delay did not necessitate compensatory services. The Action Plan required no specific follow-up except to insure that the family received services as soon as possible after 30 days (which did occur). No other plan of action was considered necessary. Compliance will be determined at the next TA scheduled for July 15, 2011 and status will be reported in the SFY 2011 APR.

6. **Southwest**
   7 findings: During the SFY 2010 PAR conducted on February 25, 2010, 7 findings of delays were noted due to the loss of qualified service providers specific to seven plans. The Action Plan required a follow-up review on May 31, 2010 of service delivery dates on all IFSPs developed post-PAR. The Action Plan also required the program to document within three months that staff had been replaced and to offer compensatory services for those lost during the affected time period. The review occurred on May 27, 2010 and substantiated that the program had replaced staff through new contracts and had offered and provided compensatory services. A second record review was conducted on site on December 2, 2010 and the program was determined to be in compliance with timely services for the four (4) new plans monitored. Close and continued communication and technical assistance has been maintained to assist this program. Compliance will be determined at the next PAR scheduled for February 10, 2011 and status will be reported in the SFY 2011 APR.

7. **UCP Huntsville**
   1 finding: During the SFY 2010 PAR conducted on August 17, 2010, 1 finding was noted of a service not delivered within the 30 day timeline. Documentation was available, however, indicating that the family received the planned service within one week of the due date. The delay did not necessitate compensatory services. The Action Plan required no specific follow-up for this single event except to insure the family received services as soon as possible but within 30 days (which did occur). No other plan of action was considered necessary and status will be reported in the SFY 2011 APR.

8. **UCP Mobile BB**

1 finding: During the SFY 2010 PAR conducted on September 16, 2010, 1 finding was noted of a service not delivered within the 30 day timeline. Documentation was available, however, indicating that the family received the planned service within one week of the due date. The delay did not necessitate compensatory services. The Action Plan required no specific follow-up for a single event except to insure the family received services as soon as possible but within 30 days (which did occur). No other plan of action was considered necessary but due to other compliance issues, a PAR will be scheduled for SFY 2011.

9. **Vivian B Adams**
7 findings: During the SFY 2010 PAR conducted on March 24, 2010, 7 delays were found due to the loss of qualified service providers specific to seven (7) plans. The Action Plan required a follow-up review on June 30, 2010 of service delivery dates on all IFSPs developed post-PAR. The program was given additional time to mentor a new service coordinator and progress was reviewed with the program on November 30, 2010. The Action Plan required the program to document compensatory services during the affected time period. The November 30, 2010 TA review substantiated the program was maintaining compliance for timely services for all existing families and eight (8) new plans monitored, therefore the program was found to be in 100% compliance. The next PAR review is scheduled for February 23, 2011.

▶ VERIFICATION OF CORRECTION OF SFY 2009 FINDINGS:

1. **AIDB Talladega**
8 findings: During SFY 09 PAR and TA monitoring (on 1/6/09), 8 of the records reviewed had issues with timely services. On May 22, 2009, a follow-up review was completed and it was determined that the 8 children had received their service as per their IFSPs. As per corrective action, poor chart organization was addressed over this same time period (with peer program assistance); subsequently, there was a significant increase in documentation. A follow-up PAR was completed on November 4, 2009 indicating sustained improvements and a finding of 100% compliance (i.e., the program is correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1).

▶ CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE (IF STATE REPORTED LESS THAN 100% COMPLIANCE):

Level of compliance (actual target data) State reported for SFY 2009 for this indicator: 97.4%

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2008, through September 30, 2009)	**8**
2. Number of SFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	**8**
3. Number of SFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

▶ CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	**0**
5. Number of SFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6. Number of SFY 2009 findings not verified as corrected [(4) minus (5)]	**0**

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, AEIS acknowledges slippage under Indicator 1 for SFY 2009 and has reported that the EIS program with noncompliance is now correctly implementing 34 CFR §§ 303.340(c), 303.342(e) and 303.344(f)(1) (i.e., has achieved 100% compliance) and has initiated services for the children whose services were not initiated in a timely manner. AEIS has described the actions that were taken to verify this correction.

▶ **IMPROVEMENT ACTIVITIES FOR SFY 2010:**

1. Establish a baseline based on GIFTS data verifying actual service delivery dates.

Service delivery dates are currently being captured in GIFTS. AEIS plans to develop a report and review preliminary data so as to be able to establish a baseline and enhance our current capacity to verify service delivery dates.

2. Increase the activities of the Personnel Subcommittee in the area of recruitment within rural counties to ensure timely delivery of all EI services.

During SFY 2010, the AEIS Personnel Subcommittee developed a series of steps to be taken in order to address recruitment issues in rural counties. These steps, which are currently being implemented, include the following:

Step 1. Locate data on shortages statewide utilizing survey conducted by University of South Alabama graduate students to include the following:

- Survey programs, vendors and state office staff
- Where and for what disciplines are there shortages?
- What are the barriers/reasons are for shortages (i.e., is salary a problem)?
- What mentoring support would be needed to ensure retention?
- What are the demographics of the persons completing the survey?

Step 2. Explore information on student loan forgiveness and make information available statewide which might impact ability to recruit personnel (especially Native Americans in rural areas)

3. Increase linkages with Institutes of Higher Education and Higher Education Consortium for awareness and understanding of AEIS and recruitment of potential providers.

During SFY 2010, the AEIS Personnel Subcommittee developed a series of steps to be taken in order to address higher education awareness and knowledge. These steps, which are currently being implemented, include the following:

Step 1. Participate in the Higher Education Consortium at the next state Mega Conference (July, 2011).

Step 2. Invite Higher Ed faculty (i.e., SDE special education consortium and disciplinary higher education faculty) to a meeting at the 2011 EI-Preschool Conference to network, explore grant opportunities, and discuss how EI can support Higher Ed (e.g., practicum experiences, discussion of using early intervention sites as internships for the birth-8 ECSE certification).

4. Review the NECTAC/RRC/DAC tool *"Local Contributing Factors Tool for Compliance Indicators"* for consideration in assessing systemic issues related to compliance (e.g., in APR data analysis, PAR revisions, program self-assessment, and/or training development).

The ICC is currently developing a plan of action for conducting a statewide assessment of the early intervention system regarding system efficiency and effectiveness. All appropriate resources and tools (i.e., NEC*TAC, RRC) will be utilized in the process (AEIS has

downloaded the NECTAC/RRC/DAC tool *"Local Contributing Factors Tool for Compliance Indicators"* to use as a resource).

▶ **REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011**

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Explore with State Dept of Education collaborative opportunities in recruitment and retention as defined in SIG (State Improvement Grant)	2011, 2012, 2013	• AEIS staff • SIG and SDE staff	New improvement activity added to ensure compliance with Indicator I.
2. Make individual linkages with higher education contacts for including AEIS instruction in pre-service training.	2011, 2012, 2013	• AEIS staff • IHE faculty • Personnel Subcommittee	New improvement activity added to ensure compliance with Indicator I.
3. Increase communication and host meeting with fiscal agents and local providers to determine barriers to timely service delivery in identified geographic areas of need and develop strategies for improvement.	2011	• AEIS staff • Fiscal agents • Local providers	New improvement activity added to ensure compliance with Indicator I.
4. Follow up, TA, and training will be delivered to Direct Service Providers to ensure that the Vital Message methodology is understood and consistently being implemented *(see Indicator 3 for explanation of the Vital Message Training).*	2011 - 2013	• AEIS staff • Training materials • Direct service providers • PAR	New improvement activity added to ensure compliance with Indicator I.
5. Provide training to Higher Education Consortium on early intervention practice through AEIS	2012-2013	• IHE Consortium • AEIS staff • Conference capabilities	New improvement activity added to ensure compliance with Indicator I.
6. Draft recommendations for developing a network of trainers/mentors available in local districts to help ensure consistency statewide in meeting service delivery requirements and best practice.	2011	• Personnel Subcommittee • District Councils	New improvement activity added to ensure compliance with OSEP indicators and best practice.
7. Developing and implement the network of trainers/ mentors available in local districts to help ensure consistency statewide in meeting service delivery requirements and best practice.	2012, 2013	• Personnel Subcommittee • District councils • AEIS staff • Higher education • ICC	New improvement activity added to ensure compliance with OSEP indicators and best practice.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Early Intervention Services in Natural Environments

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

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

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

SFY 2010	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010:	
	90.0%	**Number:** **3015** children out of **3098** received services in the home or community based settings (as per Section 618 report based on GIFTS database). **Calculation:** (3015 ÷ 3098 x 100 = 97.3%) **Explanation of numbers from Section 618 report:** 292 Number in community-based settings + 2723 Number in home 3015 Total in home & community-based settings 3098 Total served overall **97.3%**	**Target:** Met ☆

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

- During data verification in SFY 2009, AEIS discovered that settings data had erroneous entries entered into the GIFTS system (i.e., service coordination was being listed under "service provider location" and was therefore counted in the "other" category). Training with service coordinators and changes to the GIFTS data system effective January 31, 2009 were in operation during SFY 2010 and are reflected in the accurate data calculations above. Data for SFY 2010 reflect improvement from 88% in SFY 2009 to 97.3% in SFY 2010.

▶ **EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:**

No programs were found out of compliance for Indicator 2 during SFY 2010.

▶ **VERIFICATION OF CORRECTION OF SFY 2009 FINDINGS:**

No programs were out of compliance for Indicator 2 during SFY 2009.

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE (IF STATE REPORTED LESS THAN 100% COMPLIANCE):**

Level of compliance (actual target data) State reported for **SFY 2009** for this indicator: 88%

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2007, through September 30, 2008)	**0**
2. Number of SFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	**0**
3. Number of SFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):**

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	**0**
5. Number of SFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6. Number of SFY 2009 findings not verified as corrected [(4) minus (5)]	**0**

★ As per the OSEP SPP/APR Status Table and subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, the measurement language in the online SPP for Indicator 2 was changed to read "Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings". As per the OSEP SPP/APR Response Table received on June 3, 2010, AEIS has corrected data entry errors and correct calculations have been reported for SFY 2010.

▶ **IMPROVEMENT ACTIVITIES FOR SFY 2010:**

1. Examine methods for gathering data on community locations/placements to determine how to strengthen the correlation between what is identified on the Voluntary Family Assessment and on what is in the IFSP.*

Journey I training was revised to place special emphasis on the urgency for service coordinators to improve methods for completing Family Assessments, develop functional outcomes and explore/identify community resources that address functional outcomes without Part C funds. In addition, the principles and philosophy of the Vital Message training were embedded into Journey I and II, and were included as revisions in the 2011 PAR to further stress the need to identify and utilize community resources. These principles include discussion of identifying community locations and placement which will strengthen the correlation between what is identified on the Voluntary Family Assessment and the IFSP.

▶ **REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011**

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. **(Same as Indicator 1)** Follow up, TA, and training will be delivered to Direct Service Providers to ensure that the Vital Message methodology is understood and consistently being implemented.	2011, 2012, 2013	• AEIS staff • Training materials • Direct service providers	New improvement activity added to ensure compliance with Indicator 2.
2. Increase communication and host meeting with fiscal agents and local providers to determine barriers to service delivery in natural environments in identified geographic areas and develop strategies for improvement.	2011	• AEIS staff • Fiscal agents • Local providers	New improvement activity added to ensure compliance with Indicator 2.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Early Intervention Services in Natural Environments

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

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

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

Measurement:
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 2009-2010 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.

▶ **MEASURABLE AND RIGOROUS TARGETS FOR INFANTS AND TODDLERS EXITING IN SFY 2010 (2009-10) AND ACTUAL DATA REPORTED IN FEB 2011**

SFY 2010	Summary Statements	Targets for SFY 2010 (% of children)	Actual Data for SFY 2010	
	Outcome A: Positive social-emotional skills (including social relationships)			
	1. Of those children who entered 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 FORMULA: c + d/(a +b +c +d) **Calculation:** (c 253 + d 548) = 801 (a 40 + b 246 + c 253 + d 548) = 1087 801 ÷ 1087 = 73.7%	70.0	73.7%	**Target:** Met ☆
	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 FORMULA: d + e/(a +b +c +d + e) **Calculation:** (d 548 + e 1006) = 1554 (a 40 + b 246 + c 253 + d 548 + e 1006) = 2093 1554 ÷ 2093 = 74.2%	70.8	74.2%	**Target:** Met ☆
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
	1 Of those children who entered 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 FORMULA: c + d/(a +b +c +d) **Calculation:** (c 536 + d 896) = 1432 (a 53 + b 337 + c 536 + d 896) = 1822 1432 ÷ 1822 = 78.6%	78.0	78.6%	**Target:** Met ☆
	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 FORMULA: d + e/(a +b +c +d + e) **Calculation:** (d 896 + e 340) = 1236 (a 53 + b 337 + c 536 + d 896 + e 340) = 2162 1236 ÷ 2162 = 57.2%	55.8	57.2%	**Target:** Met ☆

SFY 2010	Summary Statements	Targets for SFY 2010 (% of children)	Actual Data for SFY 2010	
	Outcome C: Use of appropriate behaviors to meet their needs			
	1 Of those children who entered 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 FORMULA: c + d/(a +b +c +d) **Calculation:** (c 296 + d 732) = 1028 (a 33 + b 236 + c 296 + d 732) = 1297 1028 ÷ 1297 = 79.3%	78.8	79.3%	**Target:** Met ☆
	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 FORMULA: d + e/(a +b +c +d + e) **Calculation:** (d 732 + e 801) = 1533 (a 33 + b 236 + c 296 + d 732 + e 801) = 2098 1533 ÷ 2098 = 73.1%	73.6	73.1%	**Target:** Not Met

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

- AEIS exceeded all targets for Child Outcomes during SFY 2010 except for a slight slippage under Outcome C2 – children who were functioning within age expectations in the use of appropriate behaviors to meet their needs by the time they exited the program. The slippage represents only .5% of the total number of children.

- Extensive training was provided and required statewide that addressed methods and best practices for enhancing the outcomes of children and families. The Vital Message Document (inserted below) is to be used to help explain AEIS to families and providers. The outline and objectives for this training, entitled "**A Vital Message about Alabama's Early Intervention**", are as follows:

Vital Message Training Outline
Part 1 • Introduction • The law • Core values • Vital Message - 6 key points
Part 2 • Family/caregiver involvement • Steps in the process and roles of team members • Functional evaluation and functional outcomes • ECO maps and Routines-based assessment • Selection of team (who & when of home visits) • Delayed development vs. disorder • Generalist vs. specialist • Primary provider and coaching • Frequency and intensity • Clinic-based vs. EI model

Vital Message Training Outline
Part 3 • Parents made integral to the team • Paying for services & working with limited funding • Administrative support • Private insurance • Physician prescriptions • Transportation • Other resources and supports • Coordination/communication w/ other providers • Caregiver/childcare obstacles • "No shows" and family accountability • Routines and scheduling • Transition and supports after age 3 • Central Resource Directory
Part 4 • Part C policy • Funding summary • Legislative advocacy • Resources

Vital Message OBJECTIVES

a. Discuss IDEA-Part C
b. Review AEIS Core values
c. Describe steps in family/caregiver involvement
d. Discern the roles of team members and team selection
e. Discuss functional outcomes and functional evaluation
f. Review ECO maps and Routines-based assessment
g. Discern delayed development vs. disorder and generalist vs. specialist
h. Discuss the primary provider role and coaching
i. Review frequency and intensity
j. Discern clinic-based vs. EI model
k. Discuss issues related to paying for services
l. Discuss pertinent issues such as physician prescriptions and transportation, and coordination/communication with other providers
m. Describe caregiver/childcare obstacles in service delivery
n. Review transition practices and resources
o. Discuss legislative advocacy

Vital Message TRAINERS

- Terri Bolin, ICC Chair, Goodwill Easter Seals
- Betsy Prince, MA, Coordinator, Alabama's Early Intervention System
- Sheree Chapman-York, PT, MS, PCS, Director, PT/OT Dept and EI Program, Children's Health System
- Gary Edwards, Ph.D., CEO, United Cerebral Palsy of Greater Birmingham
- Chris Gaston, B.A. Communication, Director, Children's Center EI Program
- Glenn Harger, Executive Director, United Cerebral Palsy of Mobile
- Karen Hyche, OTR, Doctorate, ARC of Walker County EI Program
- Michelle Jones, M. Ed., Regional Director, Alabama Institute for Deaf/Blind
- Elisa Kennedy, Ph.D./PT, Professor University of South Alabama
- Teri Pinto, B. S. Sociology, DMH State Liaison to Alabama's Early Intervention System
- Karla Smith, M. Ed., Field Services Supervisor, Alabama Institute for Deaf/Blind
- Mary Beth Vick, M. A. Counseling, Director EI Program Community Services Programs of West Alabama
- Donna Wooster, ORT/L, University of South Alabama

Vital Message Document

A Vital Message about Alabama's Early Intervention System

Congress established the Early Intervention program in 1986, as part of The Individuals With Disabilities Education Act (IDEA), Part C, in recognition of "an urgent and substantial need" to: enhance the development of infants and toddlers with disabilities; reduce educational costs by minimizing the need for special education through early intervention; minimize the likelihood of institutionalization, and maximize independent living; and, enhance the capacity of families to meet their child's needs.

Alabama's Early Intervention System is committed to providing quality services for eligible children, birth to three, and their families. The focus of early intervention is to train, equip and support parents/caregivers in being the first and best teachers for their child so that when their child transitions from Early Intervention, they will be able to continue to help their child develop.

How will early intervention help my child and family?

Research indicates that a child's most effective teacher is the person with whom they have a nurturing relationship and with whom they spend the most time, such as his or her mother, father, grandmother, daycare provider or primary caregiver. How this person interacts with your child while feeding, diapering, playing, and cuddling will have the most impact on how your child develops.

The Early Intervention team of professionals will evaluate your child and help you, the parent or caregiver, decide what is most important for your child to accomplish. The early intervention service providers will teach you activities that you can fit into your family's daily routine or in settings with typical children. With the coaching and support of these professionals, you should be able to carry out these activities on a daily basis so that your child and family will meet your goals.

Who will work with my child and family?

Alabama's Early Intervention System will provide eligible families with a Service Coordinator. This person will work with you to develop a plan called the Individualized Family Service Plan or IFSP. The IFSP will include your goals, services to meet those goals, who will provide the services, and when/where the services will be provided. From this plan, you and the service coordinator will identify a team of professionals, other family members, caregivers, and/or friends to help in reaching the outcomes that you include in the IFSP. This team will include the qualified professionals who can best help your child and family meet the IFSP goals. Important decisions about your services are made by your IFSP team. As your child grows and changes, you as a parent may call together your team at any time to discuss your family's plan.

How does the early intervention team work with the medical community or other therapists in the community?

Early Intervention works closely with the medical community, including therapists from other agencies or programs, as well as your child's physician. If your physician recommends (or you prefer) a certain type or amount of therapy, your early intervention service coordinator will assist with identifying resources, including public and private insurance that might support that level of medical intervention. Early intervention is part of

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Vital Message Document continued

the answer in meeting your child's and family's needs. The other pieces necessary to assist you in promoting your child's development may come from other agencies. Your service coordinator will support your family as you explore all available resources to secure the services identified on your IFSP.

I work all day, how can I carry out the strategies suggested for me?

Children birth-to-three by nature require a caregiver each day. Your child's caregiver should be included on your child's Early Intervention team. Developing good systems for communication between you, your child's caregiver, and the EI team, is important to the success of your child. Therefore, services may be provided at a time and place that supports you the parent and your child's care givers in learning and carrying out strategies that help your child meet his/her developmental goals. Services may be provided at home, daycare, or other community locations (natural environment).

I stay at home, but I don't know if I will have time to do "therapy" each day.

Information regarding your family's routines, gathered by the Service Coordinator, will help the team make decisions about service delivery and how the goals on the IFSP can be achieved. Service Providers take into consideration your family's everyday activities in designing and demonstrating intervention strategies that will aid your child's development. Most families find that the best time to use these strategies is during your family's natural routines: those times in an infant or toddler's day when one-on-one time naturally occurs (feeding, dressing, diapering, play, bed time routines, etc.).

What happens if my child still needs services after three years of age?

Your service coordinator will give you information regarding services in your community available after age three. If eligible, your child may continue services through the local education agency (LEA = local school system) in which you reside. Your team will again help you in best matching your child's needs with available services (school system, Head Start, private preschool). Service Coordination is rarely available to families after a child's third birthday. If your child is Medicaid eligible you may qualify for Patient First Care Coordination through the Department of Public Health. Your Service Coordinator, however, will have helped you develop skills to advocate on your child's behalf. All eligible families are provided with access to a Central Resource Directory of services in our state. It is a goal of Early Intervention that families learn to be advocates for their children and become good seekers of available services and supports.

What do professional organizations say about Early Intervention Services?

Many professional groups and organizations support the delivery of early intervention services and include early intervention in their standards. The links below demonstrate each organization's support of early intervention.

www.aota.org – American Occupational Therapy Association
www.asha.org – American Speech, Language, Hearing Association
www.apta.org – American Physical Therapy Association
www.cec.sped.org – Council for Exceptional Children, particularly the Division of Early Childhood
http://pediatrics.aappublications.org/cgi/reprint/104/1/124 - Article on the role of the pediatrician in EI
http://www.medicalhomeinfo.org/health/EI.html - American Academy of Pediatrics web page on EI

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▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

No programs were found out of compliance under Indicator 3 for SFY 2010.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, it was determined that AEIS had already changed its measurement language for Indicator 3 on the online SPP. Therefore, no additional action was required.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Revise the PAR process to ensure that outcomes data is utilized routinely in program monitoring.

   Revisions to the PAR were initiated during SFY 2010 based on OSEP guidance, work of Program Planning and Evaluation Subcommittee, and additional program input.

2. Create a new link on the ADRS website that has information on Alabama's outcome measurement system to include policies and procedures around outcome measurement and data collection forms.

   The new ADRS website is under development and will include new information on early intervention and extended linkages for policies and procedures around outcome measurement and data collection forms.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue ongoing revision of PAR based on OSEP guidance and the report from the verification visit.	2011, 2012, 2013	• AEIS staff • OSEP report and guidance documents	New activity added to ensure compliance with Indicator 3.
2. Provide ongoing TA and training on making decisions related to determining child progress in order to ensure consistency statewide.	2011, 2012, 2013	• Personnel Subcommittee of ICC • AEIS monitoring staff • GIFTS	New activity added to ensure compliance with Indicator 3.
3. Analyze outcomes data on programs that are within a one year certificate cycle to target improvement strategies.	2011, 2012, 2013	• GIFTS data • AEIS monitoring staff	New activity added to ensure compliance with Indicator 3.
4. PP & E subcommittee will discuss and recommend effective strategies for conducting VFA and writing family-defined routines based functional outcomes.	2013	• AEIS staff and consultants • ECO Center resources • PP&E Subcommittee	New activity added to ensure compliance with Indicator 3.
5. Discuss and review IFSP format for revisions that will enhance family-centered practices and support improved outcomes.	2011, 2012, 2013	• PP&E Subcommittee • AEIS monitoring staff • ICC	New activity added to ensure compliance with Indicator 3.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Early Intervention Services in Natural Environments

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

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

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

Measurement:

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

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

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

SFY 2010	Percent of families participating in Part C who report that early intervention services have helped the family:	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010 (Data source = PAR Family Survey as described under discussion section below)	
	A. Know their rights	96.8%	**793** families out of **817** surveyed indicated knowing their rights. (Family Survey Table 3a) **Calculation:** *(793 ÷ 817 x 100 =97.1 %)* **97.1%**	**Target:** Met ☆
	B. Effectively communicate their child's needs	94.1%	From the 817 families surveyed on a series of questions pertaining to Indicator 4B, **4725** responses out of **4902** total responses indicated that EI helped them effectively communicate their child's needs. **Calculation:** *(4725 ÷ 4902 x 100=96.4%)* **96.4%**	**Target:** Met ☆
	C. Help their child develop and learn	98%	**784** families out of **798** families surveyed reported EIS helped their child develop and learn. **Calculation:** *(784 ÷ 798 x 100 =98.3%)* **98.3%** *See explanation of data below	**Target:** Met ☆

▶ DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:

- (*) Through input from ICC Stakeholders, it was noted that the Family Survey process includes families who are brand new to the system and for whom progress may not yet have been noted. Therefore, 19 families who responded as "not sure" were not included in the numerator or denominator for Indicator 4c.
- AEIS continues to coordinate the **Council Network**, a statewide forum for providers and families. During SFY 2010, the Council Network's focus was on training activities for local community councils. Topics included: autism training, legislative advocacy strategies, respite resources, Vital Message training follow-up, recruitment for family involvement, and disability specific information and training.
- During fiscal year 2010, eight hundred seventeen (817) families currently involved in AEIS completed the **Family Survey** to assess whether they are receiving the services and assistance they need and whether they know their rights, are able to effectively communicate their child's needs, and are able to help their child develop and learn. The surveys were completed either by telephone or written surveys via the mail by an independent third party. All contacts with families were made between October 2009 and September 2010.
- Alabama continues to adhere to the **approved sampling plan** submitted as per the March 2, 2006 OSEP response letter. AEIS has reviewed the response group for the SFY 2010 Family Survey, which was administered under the approved sampling methodology, and it is evident that the **response group reflects a valid and reliable representation** of the population served within AEIS.

  Approved Sampling Methodology: Through the PAR Family Survey process, families participate in a comprehensive survey if they have received services through programs monitored during the fiscal year. The AEIS monitoring process is on a three-year cycle. This process assures that all programs and eligible families in the system are surveyed at least once within a three-year timeframe.

  The Early Intervention Programs monitored and families surveyed each year represent the diversity of Alabama's state populations. It includes families and programs from all 7 AEIS districts, all state level fiscal agents, and rural and urban counties. These programs range from small to large in service capacity and serve children and families with diverse ethnic, cultural and socioeconomic backgrounds. AEIS is confident that this is a valid sampling based on the above explanation of monitoring.
- In order to maintain acceptable levels on target data, the AEIS PAR monitoring system provides for a review of IFSPs **to ensure that family concerns are carried over into outcome statements** to guide intervention. In addition, parent survey results are utilized to target areas for ongoing improvement. The utilization of these parent survey results are reflected in the action plans of programs scoring less than 90% on any survey question. AEIS also utilizes family survey results to develop DCC family support workshops statewide.

▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

No programs were found to be out of compliance under Indicator 4 during SFY 2010.

▶ VERIFICATION OF CORRECTION OF SFY 2009 FINDINGS:

No programs were out of compliance for Indicator 4 in SFY 09.

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE (IF STATE REPORTED LESS THAN 100% COMPLIANCE):**

Level of compliance (actual target data) State reported for SFY 2009 for this indicator: A. 98%, B. 94%, and C. 98%

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2007, through September 30, 2008)	**0**
2. Number of SFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	**0**
3. Number of SFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):**

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	**0**
5. Number of SFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6. Number of SFY 2009 findings not verified as corrected [(4) minus (5)]	**0**

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, AEIS acknowledges that, even though the Indicator 4 targets for SFY 2009 were met, trend data from SFY 2008 indicate a slight slippage under 4B (-0.90%) and 4C (-1.00%).

▶ **IMPROVEMENT ACTIVITIES FOR SFY 2010:**

1. Continue to annually modify PAR family and transition surveys in order to meet OSEP requirements and to address current issues or concerns raised by families/providers while assuring that data continues to be valid.*

   The PAR Family Survey was revised in SFY 2010. Several items were removed and/or re-worded, shortening the survey time for families. A third two-part question was revised to help families better understand the overall question (i.e, the order of the question was reversed). These revisions appear to have improved the validity of the data.

2. Provide training through CSPD (either through Journey II or a new training) for direct service providers and related services personnel (i.e., OT, PT) on creatively delivering services that enhance the capacity of families.*

   Journey 1 and Journey 2 trainings were revised to better meet the information needs of personnel. These revisions were based on identified needs, family input, state identified issues, provider recommendations, monitoring findings and recommended practice In addition, the Vital Message Training was required of all service coordinators and providers during SFY 2010 (see Indicator 3 for a description of this Vital Message training).

   During the SFY 2010 Early Intervention-Preschool Conference (held in November, 2009), the following sessions were provided for professionals and parents designed to enhance knowledge and skill for use in assisting families. These topics were selected based on input from service providers, families, PAR Family Survey results, and a broad based planning committee, including families:

2009 Interest Categories

A. General Interest – All Disciplines

A1. It's all about the little things
A2. Legislative advocacy (family lunch meeting)
A3. Transitioning Exceptional Learners Across the lifespan
A4. Mapping out priorities
A5. Transition from EI to preschool
A6. Managing when change occurs
A7. Understanding and Evaluating health Information

B. Disability Areas

B1. Fragile X Syndrome and associated disorders
B2. Feeding issues for children with autism
B3. Medically fragile children
B4. Working with children with autism in floor time play
B5. Red flags and screening for autism
B6. Genetic disorders
B7. Solution focused intervention for Children with autism

C. Birth-five (0-5) -- All Disciplines

C1. Inclusion in community settings
C2. Evaluation ~ birth to five
C3. Exploring technology and raising expectations
C4. Music therapy applications for early intervention & preschool settings
C5. Increasing positive behaviors

D. EI Specific (0-3) – All Disciplines

D1. Transdisciplinary Teaming
D2. Readers from Birth: Zero to Three
D3. Writing IFSPs, Voluntary Family Assessment, Outcomes

E. Preschool Specific (3-5) – All Disciplines

E1. Literacy
E2. Creating an Instructional Preschool Program

F. Families

F1. Life changing moments – families and providers working through the process of life changes
F2. Special Education: What do I need to know?
F3. Family perceptions: Parent panel
F4. Family Forum

G. Speech/Language Pathology

G1. Communication development in children with multiple disabilities (role of AUG/alternative communication)
G2. Encouraging early social communication skills across daily routines and activities
G3. Feeding and swallowing ~ birth to 5
G4. From picture symbols to AAC

H. Physical Therapy/Occupational Therapy

H1. Focus on fitness, wellness and function
H2. Great expectations for EI therapists
H3. Technology for therapeutic positioning
H4. Red Flags for developmental delay and tummy time
H5. (and G3) Feeding and swallowing ~ birth to 5

I. Sensory

I1. Cortical visual impairment
I2. Children with Cochlear Implants
I3. Social-emotional well-being of children who are deaf
I4. Red flags for hearing loss and best practice intervention
I5. Regulation of sensory states

Attendance statistics for the SFY 2010 conference (held in November 2009) were as follows:

Category	# Registered
Family Member	86
Administrator/Coordinator	33
Early Interventionist/ Developmental Specialist	35
Teacher/ECSE/Special Instructor	109
Service Coordinator/DEIC	54
Speech/Language Pathologist	65
Occupational Therapist	33
Paraprofessional/PTA/COTA	1
Student/Intern	31
Physical Therapist	21
Nurse	5
Social Worker	20
Higher Education	7
Nutritionist	0
Psychologist/Counselor/Psychometrist	7
Audiologist	1
Child Care/ECE	1
Physician/Medical	1
Not Designated or Registered on site	11
Exhibitors	25
TOTAL	**546**

Additional Analysis of Conference Attendance	
LEA or Preschool	104
Head Start	27
AEIS or EI Program	204

As per the CSPD plan, AEIS will develop and integrate into the Personnel Standards required continuing education surrounding the "Vital Message about AEIS" (to be required every 3 years for EI personnel, supervisors, contract staff and vendors). This ongoing continuing education training will be entitled “JOURNEY REVISITED”. The strategies being formulated by the Personnel Subcommittee for accomplishing this task include the following:

- Foundational concepts from the “Vital Message about AEIS” will be embedded into Journey I and Journey II by spring 2011. The “Vital Message about AEIS” PowerPoint will be required reading prior to these trainings.
- Journey I will continue to be required training for all new Service Coordinators.
- Journey II is required of all Service Coordinators, and all disciplines if they have not been working in EI for two years. Journey II will be offered District-wide through video conferencing.
- JOURNEY REVISITED will be created for 2013 and will be the updated version of the “Vital Message about AEIS”. The Personnel Subcommittee Task Group will begin planning this training in 2012. In the meantime, the Vital Message Training will be available quarterly at the district level for new employees.
- The PAR manual will be revised to include criteria consistent with “The Vital Message”.

3. Continue to utilize parent survey results in the PAR process to fine-tune technical assistance activities and to improve services.

   The PAR Family Survey results have continued to assist monitors in determining key strengths and weaknesses of program practices. Programs which have enjoyed outstanding survey results were asked to offer mentoring for other programs experiencing problems in certain compliance activities. Programs experiencing less than satisfactory results in key areas received additional technical assistance to ensure improved results in the future. In some cases, additional records were reviewed following the PAR to ensure ongoing improvement.

   As in previous years, PAR family survey results are used routinely in preparing for and conducting PAR reviews. If any programs have survey results less than 90%, then action plans are developed to address the concerns with follow up conducted by the PAR monitoring team.

4. Provide training at the district level related to the activities of the **Alabama Respite Coalition** that will heighten awareness and provide information on available resources.

   District Councils have offered trainings from the Alabama Respite Coalition, AEIS serves on the advisory board for this coalition that locates respites services, provides training and assists in the development of respite resources and programs.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue to solicit input from families at all levels in development and implementation of AEIS policy (i.e., ICC, council meetings, surveys, family forums, etc.)	2011, 2012, 2013	• ICC • District councils • EI-Preschool conference Family Forums	New indicator added to ensure continued active involvement by families in system and policy development.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(A) 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.

SFY 2010	Measurable Rigorous Target	▶ Actual Data for SFY 2010	
	Percent: .69% Alabama population of infants and toddlers aged birth to 1 = 62,128 *(OSEP Table C-13, Revised 12/20/2010, accessed August 2010 from www.census.gov)*	**Number:** **334** infants/toddlers birth-to-one with IFSPs (as per Section 618 report based on GIFTS database) **Calculation** *(334 ÷ 62,128 x 100 =.54%)* **.54%** Alabama population of infants and toddlers aged birth to 1 = 62,128 *(OSEP Table C-13, Revised 12/20/2010, accessed August 2010 from www.census.gov)*	**Target:** Not Met
		National data: 1.03%	

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

- Although AEIS did not meet the SFY 2010 target for numbers served birth-to-one, the number of birth-to-one referrals from the medical community, including NICU follow-up clinics, continues to increase. Statistics from the past 6 years are as follows:

Referral Chart	SFY 2004	SFY 2005	SFY 2006	SFY 2007	SFY 2008	SFY 2009	SFY 2010
• Number of referrals birth-to-1 from the medical community *(i.e., follow-up clinics, University of South Alabama, physicians/pediatricians, health care facilities, hospitals, Sparks Clinics)*	518 *41% of all birth-to-one referrals*	623 *43% of all birth-to-one referrals*	660 *45% of all birth-to-one referrals*	947 *54% of all birth-to-one referrals*	1036 *57% of all birth-to-one referrals*	1042 *61% of all birth-to-one referrals*	1179 *65% of all birth-to-one referrals*
• Overall number of referrals to AEIS of children birth to age one.	1280 *33% of all referrals*	1450 *33.8% of all referrals*	1440 *32.4% of all referrals*	1765 *35% of all referrals*	1830 *31% of all referrals*	1701 *29% of all referrals*	1819 *30% of all referrals*

Note: Some referrals precipitated by the medical community may have been submitted by the parent and would have therefore been counted in the parent referral category.

AEIS continues to build collaborative partnerships to access additional sources for potentially eligible infants and toddlers. During SFY 2010, AEIS continued to serve on various committees, such as:

- **The Alabama Perinatal Advisory Committee through the Alabama Department of Public Health**: There have been numerous opportunities to network with physicians and health care professionals in linking with the High Risk Clinics in Alabama to generate early referrals and assist delivering family centered services. Since Alabama has one of the highest infant mortality rates in the nation, this active group has helped in developing initiatives to address this tremendous challenge in our state. District and EI program staff serves on regional Perinatal Advisory Committee.
- **Alabama Interagency Autism Coordinating Council and subcommittees**: AEIS continues to be involved in the Autism Interagency Coordinating Council and subcommittees through membership representation. AEIS staff chairs the by-laws committee for the Autism ICC. There is additional participation on the Learn the Signs, Act Early Campaign and Birth to Five workgroup. AEIS continues collaboration with the Autism state director regarding early childhood issues.
- **The Head Injury Task Force, a statewide advisory board for Traumatic Brain Injury (TBI) in Alabama**: AEIS provides data related to infants and toddlers with a diagnosed TBI (Shaken Baby Syndrome, injury, etc).
- **The Head Start Disability Advisory Committee:** Head Start continues to be represented on the ICC and works closely with AEIS regarding child care and related issues.
- **The STAR Advisory Committee, a statewide Assistive Technology Advisory Committee**: AEIS provides valuable information regarding technology needs of infants and toddlers.
- **The DHR Quality Assurance Board**: AEIS serves on the board and on the **State Child Death Review Subcommittee**. The board meetings are held quarterly to better identify and coordinate services for children in the child welfare system. CAPTA assists AEIS in identifying children who may qualify for early intervention services.
- **Children's Policy Council:** AEIS continues to be involved in the local **Children's Policy Council's**. Several early intervention councils are involved in the "Stand for Children" annual events.
- **Alabama Partnership for Children (APC):** AEIS participates in the Alabama Partnership for Children (APC) as a member of the Board of Directors. AEIS has worked with APC on development of the Business Leader's Summits which brings together business leaders across Alabama and highlights the importance of investments in early childhood. AEIS continues to serve on the board of directors. AEIS continues to work with APC in distribution of resource packets to new mothers (Parenting Kits). AEIS is an active stakeholder in the Early Childhood Comprehensive Systems development with other public and private agencies addressing early childhood issues.
- **Alabama Department of Mental Health (DMH) State Advocacy Board:** AEIS participates on the Alabama Department of Mental Health (DMH) State Advocacy Board. DMH serves as one of the fiscal agents for AEIS and their local programs serve a large number of infants and toddlers. Family members and representatives from the Divisions of Mental Illness, Substance Abuse and Intellectual Disabilities participate on this board which allows AEIS opportunities to improve the referral process and reach babies earlier.
- **Gift of Life Foundation:** AEIS continues to collaborate with the Gift of Life Foundation as they are implementing the **Nurse Family Partnership**. This national model of home visiting has been an opportunity to highlight the effectiveness of the EI system and has developed another referral source. AEIS continues to participate in activities of this important and effective initiative.

▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

No programs were found to be out of compliance for Indicator 5 during SFY 2010.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, AEIS has ensured that the measurement language for Indicator 5 on the online SPP is consistent with the revisions to the Indicator Measurement Table.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Collect child find strategies and methodology from other states with similar eligibility definitions and utilize as appropriate.

   NEC*TAC has provided resources on a variety of state identified issues, and subcommittees have utilized this information in making recommendations and decisions regarding eligibility and effective, efficient service delivery.

2. Partner with the Alabama Academy of Pediatrics and other stakeholders to discuss the current child find referral form to determine whether revisions are needed to improve the referral process for the medical community.

   Ongoing work with the Alabama Academy of Pediatrics and other stakeholder groups continues in order to improve early identification, including the use of standardized developmental screening as the result of participation as one of the Assuring Better Child Health and Development (ABCD) Screening Academy states. AEIS staff continues to work with local pediatricians to streamline the referral process and get babies into service as quickly as possible. AAP continues to be involved in early childhood initiatives in Alabama (i.e., Early Childhood Comprehensive Systems or ECCS initiative, Autism Task Force, Business Leader's Summit on Early Childhood, and Legislative activities. Work is also being done on a physician's 1 page feedback to referral and IFSP summary.

3. Participate in the Lead Agency initiative to redesign the agency website to enable quicker and easier access by programs and families seeking information on AEIS and services.

   EI continues to participate in the Lead Agency initiative to redesign the agency website. Staff has reviewed various states' websites to gain knowledge of what others are doing to make Early Intervention information more available to families and the general public. Different formats such as, video, links to other sites, etc. are being considered for the new website. A general reorganization of how information is presented is planned.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

Based on trend data, birth-to-one, over the past 4 years, AEIS proposes a change in the target for Indicator 5 from .72% to .56%. Subsequent targets through 2013 in the SPP are based on this change.

BASELINE SFY 05	ACTUAL SFY 06	ACTUAL SFY 07	ACTUAL SFY 08	ACTUAL SFY 09
.49%	.50%	.46%	.58%	.54%

SFY	Proposed Revision
2011	**Current** target for SFY 2011 = .72% **Revised** target for SFY 2011 = .56% based on trend data

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Improve partnerships with physicians using the ASQ-3 as a screening tool for more appropriate referrals to child find and other resources.	2011, 2012	• ASQ-3 resources • AEIS staff • Pediatric community	New activity added to ensure compliance with Indicator 5.
2. Increase communication and collaboration with high risk clinics across the state through a dedicated staff position.	2011, 2012	• AEIS staff position • High risk clinic staff	New activity added to ensure compliance with Indicator 5.
3. Propose pediatrician appointment to the Governor's ICC for AEIS.	2011, 2012, 2013	• ICC	New activity added to ensure compliance with Indicator 5.
4. Develop practices/protocols with high risk clinics and pediatricians statewide to ensure consistent, appropriate and timely referrals.	2013	• AEIS staff • High risk clinic staff	New activity added to ensure compliance with Indicator 5.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to national data. (20 U.S.C. 1416(a)(3)(A) 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.

SFY 2010	Measurable Rigorous Target	▶ Actual Data for SFY 2010	
	Percent: 1.58% Alabama population of infants and toddlers aged birth to 3 = 190,642 *(OSEP Table C-13, Revised 12/20/2010, accessed August 2010 from www.census.gov)*	**Number:** **3098** infants/toddlers birth-to-three with IFSPs (as per Section 618 report based on GIFTS database) **Calculation** *(3098 ÷ 190,642 x 100 = 1.63%)* **1.63%** Alabama population of infants and toddlers aged birth to 3 = 190,642 *(OSEP Table C-13, Revised 12/20/2010, accessed August 2010 from www.census.gov)*	**Target:** Met ☆
		National data: 2.67%	

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

In order to maintain acceptable levels on target data, AEIS continues to build collaborative partnerships to access additional sources for potentially eligible infants and toddlers. During SFY 10, AEIS continued to serve on various committees, such as:

- AEIS continues to be involved in the **Alabama Perinatal Advisory Committee** through the Alabama Department of Public Health. There have been numerous opportunities to network with physicians and health care professionals in linking with the High Risk Clinics in Alabama to generate early referrals and assist delivering family centered services. Since Alabama has one of the highest infant mortality rates in the nation, this active group has helped in developing initiatives to address this tremendous challenge in our state. District and EI program staff serves on regional Perinatal Advisory Committee.
- AEIS continues to be involved in the **Alabama Interagency Autism Coordinating Council** and subcommittees through membership representation. AEIS staff chairs the by-laws committee for the Autism ICC. AEIS continues collaboration with the Autism state director regarding early childhood issues and Birth to Five Workgroup.
- AEIS continues to be involved in the **Head Injury Task Force**, a statewide advisory board for Traumatic Brain Injury (TBI) in Alabama. AEIS provides data related to infants and toddlers with a diagnosed TBI (Shaken Baby Syndrome, injury, etc).
- AEIS continues to be involved in the **Head Start Disability Advisory Committee.** Head Start continues to be represented on the ICC and works closely with AEIS regarding child care and related issues.

- AEIS continues to be involved in the **STAR Advisory Committee**, a statewide Assistive Technology Advisory Committee. AEIS provides valuable information regarding technology needs of infants and toddlers.
- AEIS continues to participate on the **DHR Quality Assurance Board**. AEIS serves on the board and on the **State Child Death Review Subcommittee**. The board meetings are held quarterly to better identify and coordinate services for children in the child welfare system. CAPTA assists AEIS in identifying children who may qualify for early intervention services.
- AEIS continues to be involved in the local **Children's Policy Council's**. Several early intervention councils are involved in the "Stand for Children" annual events.
- AEIS participates in the **Alabama Partnership for Children (APC)** as a member of the Board of Directors. AEIS has worked with APC on development of the Business Leader's Summits which brings together business leaders across Alabama and highlights the importance of investments in early childhood. AEIS continues to serve on the board of directors. AEIS continues to work with APC in distribution of resource packets to new mothers (Parenting Kits). AEIS is an active stakeholder in the Early Childhood Comprehensive Systems development with other public and private agencies addressing early childhood issues.
- AEIS participates on the **Alabama Department of Mental Health (DMH) State Advocacy Board**. DMH serves as one of the fiscal agents for AEIS and their local programs serve a large number of infants and toddlers. Family members and representatives from the Divisions of Mental Illness, Substance Abuse and Intellectual Disabilities participate on this board which allows AEIS opportunities to improve the referral process and reach babies earlier.
- AEIS continues to collaborate with the **Gift of Life Foundation** as they are implementing the **Nurse Family Partnership**. This national model of home visiting has been an opportunity to highlight the effectiveness of the EI system and has developed another referral source. AEIS continues to participate in activities of this important and effective initiative.
- AEIS continues to work with the **Alabama Department of Children's Affairs (DCA)** as they move forward promoting the importance of quality early childhood programs which are vital community-based resources for families. We are very proud that Alabama was recently recognized as having the Number 1 - Pre K Program in the nation. AEIS continues to partner with DCA in their many collaborative initiatives. **Head Start** is a part of this Department and we have a strong alliance with this network of providers and continue to work together to building local partnerships that serve all children.
- AEIS continues to examine data pertaining to the number of referrals for children birth-to-three. Trend data over the past 7 years is as follows:

Referral Chart	SFY 2004	SFY 2005	SFY 2006	SFY 2007	SFY 2008	SFY 2009	SFY 2010
• Number of referrals to AEIS of children birth to three.	3850	4286	4438	5100	5916	5864	6150
• Number of referrals birth-to-3 from the medical community *(i.e., follow-up clinics, University of South Alabama, physicians/ pediatricians, health care facilities, hospitals, Sparks Clinics)*	1294 *34% of all referrals*	1414 *33% of all referrals*	1699 *38% of all referrals*	2294 *45% of all referrals*	2688 *45% of all referrals*	2994 *51% of all referrals*	3380 *55% of all referrals*

Note: Some referrals precipitated by the medical community may have been submitted by the parent and would have therefore been counted in the parent referral category.

Trend Data for Total Number of Children Served (FY Comparison)

	Served FY02	Served FY03	Served FY04	Served FY05	Served FY06	Served FY07	Served FY08	Served FY09
TOTAL	4015	4162	4351	4640	4912	5103	5702	6045

▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

No programs were found to be out of compliance for Indicator 6 during SFY 2010.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, AEIS has ensured that the measurement language for Indicator 6 on the online SPP is consistent with the revisions to the Indicator Measurement Table.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Monitor the implementation of the ICC approved child find/public awareness outreach plan.

   AEIS Public Awareness information and Child Find data are collected as outlined in the Public Awareness Outreach Plan. During SFY 2010, there were 487 public awareness events reported statewide. AEIS state office staff use this data in monitoring effectiveness of activities and offering technical assistance for improvement. There were also 3671 website inquiries utilized by providers, family support organizations, families, students, other states and other professionals during SFY 2010.

2. Strengthen the partnership with Children's Hospital to increase early identification of potentially eligible children.*

   AEIS has developed a strong partnership with the Children's Health System of Alabama (TCHA). TCHA leaders are involved in development of the AEIS system, assume leadership responsibilities for AEIS Subcommittees and are active on the local district councils. CRS, the sister division of ADRS, maintains an office in Children's Hospital which increases collaboration, coordination of TCHA referrals.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. **(SAME AS INDICATOR 5)** Improve partnerships with physicians using the ASQ-3 as a screening tool for more appropriate referrals to child find and other resources.	2011, 2012	• ASQ-3 resources • AEIS staff • Pediatric community	New activity added to ensure compliance with Indicator 6.
2. **(SAME AS INDICATOR 5)** Increase communication and collaboration with high risk clinics across the state through a dedicated staff position.	2011, 2012	• AEIS staff position • High risk clinic staff	New activity added to ensure compliance with Indicator 6.
3. **(SAME AS INDICATOR 5)** Propose pediatrician appointment to the Governor's ICC for AEIS.	2011, 2012, 2013	• ICC	New activity added to ensure compliance with Indicator 6.

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
4. (SAME AS INDICATOR 5) Develop practices/protocols with high risk clinics and pediatricians statewide to ensure consistent, appropriate and timely referrals.	2013	• AEIS staff • High risk clinic staff	New activity added to ensure compliance with Indicator 6.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an **initial IFSP** meeting were conducted within Part C's 45-day timeline.
(20 U.S.C. 1416(a)(3)(B) and 1442)

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

SFY 2010	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010:	
	100%	**Number**: **592** eligible infants/toddlers had E/As & initial IFSPs initiated during SFY 10 that were within 45 days, out of **596** total eligible infants and toddlers for whom the initial IFSP meeting was required during SFY 10. **18** IFSPs had exceptional family circumstances and are included in the numerator and denominator above. **4** IFSPs were over 45 days due to a program delay. **Calculation:** *(592 ÷ 596 x 100 = 99.3%)* ***99.3%***	**Target:** Not Met

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

- Data for this indicator was derived from PAR monitoring that occurred during the SFY 2010 cycle (10/1/09 through 9/30/10). The PAR component was IV.1 which reads, "The program will document that for eligible children, an evaluation and assessment and subsequent IFSP are completed within the required 45-day timeline". During PAR monitoring, the AEIS monitoring team reviews individual child records to determine the appropriateness of **exceptional circumstances** on the part of the family. If appropriate exceptional circumstances exist, then the program is still considered in compliance. Programs are considered in compliance when E/As and IFSPs are conducted within the 45-day timeline or documented exceptional family circumstances prohibit meeting the 45-day timeline.
- Description of method used to select EIS programs for monitoring**:** AEIS utilizes a system of monitoring called Provider Appraisal Review or PAR. PAR visits are scheduled for Early Intervention Programs every one, two or three years depending on the results of their preceding PAR. A complete PAR cycle occurs every three years wherein all EIS programs are monitored. See Indicator 9 for a complete description of the selection of programs for monitoring. A description of procedures used to collect PAR data is provided in the discussion under Indicator 9.
- Methods used to collect data and data sources: Technical Assistance and Provider Appraisal Review (PAR) **review teams**, consisting of AEIS staff and contracting agency personnel, perform on-site visits for all programs falling within the scheduling cycle for the fiscal year. The emphasis is on accountability as per IDEA/OSEP requirements and quality of services/supports to families that help them achieve outcomes for families and their children.

The entire PAR process includes such methodology as **program self assessment**, **review of personnel qualifications**, **on-site review of child records**, **data system reports**, **review of family concerns**, **family surveys** and **staff interviews**. Action plans are developed as needed for indicators or components found to be in partial compliance or non-compliance status. (A complete description of the PAR process is provided in Alabama's **SPP**).

▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

- Results for Indicator 7 during SFY 2010 indicated that 4 initial IFSPs within 2 programs were not completed within the 45 day timeline due to program issues. These findings along with explanations are as follows:

1. **Arc of Autauga**
   3 findings: During the SFY 2010 PAR review on October 28, 2010, 3 findings were noted. Although the service coordinator for this program fulfilled initial training requirements, at PAR, it was determined that information about the 45-day timeline had been misunderstood. The Action Plan required the service coordinator to attend Journey 1 training again in SFY 2011 and required monitors to complete a record review for all new plans developed post-PAR. That review was completed on January 6, 2011. The administrator of the program also attended the review and timelines were reviewed again. Four (4) new plans were reviewed at that time and were found in compliance for meeting the 45-day timeline. The program was determined to be back in compliance at that time. The next scheduled activity for the program is a PAR in September 2011 at which time continued compliance will be evaluated.

2. **UCPGB Etowah/DeKalb**
   1 finding: During the SFY 2010 PAR review on October 11, 2010, one plan was found to be delayed due to an evaluator being unexpectedly unavailable for the second procedure for initial eligibility determination. The evaluation was subsequently completed, the plan was developed and services were delivered in accordance with the IFSP. It was determined by monitors that no further action was necessary due to the unusual circumstances of this delay. Continued compliance status will be determined at the next regularly scheduled record review on March 11, 2011.

▶ VERIFICATION OF CORRECTION OF SFY 2009 FINDINGS:

1. **Montgomery Arc HOPE Project**:
   1 finding: During SFY 2009, the Montgomery Arc HOPE Project had one (1) initial evaluation and IFSP that was late due to a program delay, not a family reason (the speech pathologist did not complete the second procedure for eligibility determination prior to 45 days). The SLP evaluation was completed on Day 46 and eligibility was established at that time. The IFSP was written within a week after eligibility determination.

   Based on a subsequent PAR review of 17 records within the Montgomery Arc HOPE Project, the program was found to be in 100% compliance. The AEIS PAR process ensures continued compliance by consistently monitoring whether an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45 day timeline.

2. **Arc of Jefferson County**:
   1 finding: During SFY 2009, the Arc of Jefferson County had one (1) initial IFSP that was late due to a program delay, not a family reason (the child had transferred to the Arc of Jefferson County and the records were delayed in the process). The IFSP was subsequently developed on day 59 (November 12, 2008). Based on a subsequent PAR review of 44 records within the Arc of Jefferson County, the program was found to be in 100% compliance. The AEIS PAR process ensures continued compliance by consistently monitoring whether an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45 day timeline.

▶ CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE (IF STATE REPORTED LESS THAN 100% COMPLIANCE):

Level of compliance (actual target data) State reported for SFY 2010 for this indicator: 99.4%

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2008, through September 30, 2009)	**2**
2. Number of SFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	**2**
3. Number of SFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

▶ CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	**0**
5. Number of SFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6. Number of SFY 2009 findings not verified as corrected [(4) minus (5)]	**0**

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and the OSEP SPP/APR Response Table received on June 3, 2010, AEIS has ensured that the measurement language for Indicator 7 on the online SPP is consistent with the revisions to the Indicator Measurement Table and has verified that the two programs out of compliance achieved 100% compliance (i.e., correctly implemented 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a)), conducted the initial evaluation, assessment, and IFSP meeting for the children for whom the 45-day timeline was not met, and described the specific actions that were taken to verify correction.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Offer free access to all CSPD training activities on recommended practice in evaluation/assessment, teaming and IFSP processes in an accessible manner for all providers statewide via web, free workshops/trainings, and hard copies of materials (Journey trainings, State Improvement Grant trainings, EI/Preschool Conference).*

The Journey 1 training continues to be provided for all personnel. In FY 2010, all vendors were required to register for Journey 2 in accordance with the personnel standards of 2009.

Monitors responded to requests for information by sending PowerPoint presentations pertaining to regulatory timelines and requirements. It is clear that information related to the 45-day timeline is well understood by program personnel and vendors alike. Vendors who are approved to provide services are required to participate in a District TA prior to providing a service (timelines is a core topic).

A statewide mandatory training on early intervention best practice, entitled "A VITAL MESSAGE ABOUT ALABAMA'S EARLY INTERVENTION SYSTEM" was provided in 5 regions throughout the state during the months of July and August 2010. In addition, the training was repeated during the 2010 Early Intervention and Preschool Conference for further access (see Indicator 3 for further details about the Vital Message training).

Copies of available handouts from all sessions offered at the Early Intervention-Preschool Conference have been posted on the conference website for free access by all professionals and families.

2. Develop a new method of sharing compliance and general EI information through a Q/A document entitled "EI Update".

The "EI Update" is a quality assurance document sent out via e-mail to every program involved in AEIS. Multiple staff members from programs are part of the e-mail distribution list. Every EI state office staff person has an opportunity to include information that needs to be shared across the state. EI state office staff read a draft to assure accuracy and consistency of information prior to sending it out. Items included in the document may include questions that arise during a TA, upcoming training, etc.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. (SAME AS INDICATOR 1) Follow up, TA, and training will be delivered to Direct Service Providers to ensure that the Vital Message methodology is understood and consistently being implemented.	2011 - 2013	• AEIS staff • Training materials • Direct service providers	New improvement activity added to ensure compliance with Indicator 7.
2. (SAME AS INDICATOR 1) Draft recommendations for developing a network of trainers/mentors available in local districts to help ensure consistency statewide in meeting service delivery requirements and best practice.	2011	• Personnel Subcommittee •	New improvement activity added to ensure compliance with OSEP indicators and best practice.
3. (SAME AS INDICATOR 1) Developing and implement the network of trainers/ mentors available in local districts to help ensure consistency statewide in meeting service delivery requirements and best practice.	2012, 2013	• Personnel Subcommittee • District councils • AEIS staff • Higher education • ICC	New improvement activity added to ensure compliance with OSEP indicators and best practice.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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.**

SFY 2010	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010:	
	A. 100%	**Number:** From the **298** records of children transitioning during the FY 2010 monitoring cycle: **292** had transition plans written on time. **Calculation** *(292 ÷298 x 100 = 98.0%)* **98%**	**Target:** Not Met
	B. 100%	**Number:** Of the **298** children potentially eligible for Part B monitored during SFY 2010, **20** families opted out from notification to the LEA (leaving **278** children for whom notification to the LEA should occur). Of the **278** children who should have had notification sent to the LEA, **264** notifications were made on time. (Alabama's **Opt-Out Policy** was submitted to OSEP with the Part C Application for Funding in May 2009 and was approved during the state's FY 09 which runs 10/1/08 – 9/30/09. Alabama's Opt-Out Policy is on file with the Department) **Calculation** *(264 ÷ 278 x 100 =95.0 %)* **95**%	**Target:** Not Met
	C. 100%	**Number:** Of the **278** meetings with LEAs that should have occurred, **265** meetings were convened. **Calculation** *(265 ÷ 278 x 100 = 95.3%)* **95.3%**	**Target:** Not Met

▶ DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:

The AEIS PAR process ensures continued compliance by consistently monitoring whether eligible children receive timely transition planning to support their transition to preschool and other appropriate community services by their third birthday.

Description of method used to select EIS programs for monitoring**:** AEIS utilizes a system of monitoring called Provider Appraisal Review or PAR. PAR visits are scheduled for Early Intervention Programs every one, two or three years depending on the results of their preceding PAR. A complete PAR cycle occurs every three years wherein all EIS programs are monitored. A description of procedures used to collect PAR data is provided in the discussion under Indicator 9.

▶ EXPLANATION OF SFY 2010 NONCOMPLIANCE AND CORRECTIVE ACTION:

Results for Indicator 8 during SFY 2010 indicated that 6 plans (out of 298) were not written on time, 14 notifications to the LEA (out of 278) did not occur on time, and 13 meetings (out of 278) did not occur on time due to program issues. Only two programs out of 24 were responsible for AEIS not meeting the 100% target for Indicator 8. Monitors are addressing all 100% targets with these two programs. These findings along with explanations are as follows:

1. **Arc of Autauga**
   6 findings of plan not written on time
   6 findings of notification not on time
   5 findings of meeting not convened on time
   (The same explanation applies to ALL of the above). During the PAR review conducted on October 28, 2010, findings were noted for Indicator 8. Although the service coordinator for this program fulfilled initial training requirements, at PAR it was determined that the change in the timeline requirement for notification to the LEA (from 30 months to 27 months) had been misunderstood by this service coordinator. Ultimately, all 6 meetings were held prior to age three and eligibility was determined by the appropriate LEAs. The Action Plan required the service coordinator to attend Journey 1 training again in FY 2011 and required monitors to complete a record review for all new plans developed post-PAR. The review was completed on January 6, 2011. The administrator of the program also attended the review and timelines were reviewed again. Four (4) new plans were reviewed but only one (1) for transition planning which was found to be out of compliance. State and district staff will continue to offer support and technical assistance. The next scheduled monitoring activity for the program is a PAR on September 15, 2011 at which time compliance status will be evaluated.

2. **Vivian B. Adams**
   8 findings of notification not on time
   8 findings of meetings not convened on time
   During the PAR review conducted on March 24, 2010, findings were noted for Indicator 8. Although the service coordinator for this program had fulfilled initial training requirements and had experience at a previous program, it had been determined during PAR that activities were not conducted appropriately nor based on timelines for eight children. The program administrator made contact with LEAs and arranged for meetings for the 8 children prior to age three. A new service coordinator was assigned. The Action Plan indicated that a record review for all new plans developed post-PAR would be conducted by November 30, 2010. There were two (2) new transition plans available to be reviewed at that time and the program was determined to be in 100% compliance. The next scheduled activity for this program is a PAR on February 23, 2011 at which time continued compliance status will be determined.

▶ VERIFICATION OF CORRECTION FROM SFY 2009 (EITHER TIMELY OR SUBSEQUENT):

The one program (AIDB Talladega) where one family "opted out" (i.e., would not give permission to notify the LEA) was in 100% compliance under Indicator 8 for all other records reviewed during SFY 2009. A follow-up review was conducted on November 4, 2009 and the program was determined to be in 100% compliance under Indicator 8a, 8b, and 8c for all 7 new transition records.

Alabama's **Opt-Out Policy** was submitted to OSEP with the Part C Application for Funding, as required, in May 2009 and was approved during the state's FY 09 which runs 10/1/08 – 9/30/09. Alabama's Opt-Out Policy is on file with the Department.

▶ CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE (IF STATE REPORTED LESS THAN 100% COMPLIANCE):

Level of compliance (actual target data) State reported for SFY 2010 for this indicator: A. 100%, B. 100%, and C. 100%

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2008, through September 30, 2009)	**0**
2. Number of SFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	**0**
3. Number of SFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

▶ CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	**0**
5. Number of SFY 2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6. Number of SFY 2009 findings not verified as corrected [(4) minus (5)]	**0**

★ As per the OSEP SPP/APR Status Table and subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, AEIS submitted a revised SFY 2009 APR on 4-5-10 with clarification regarding the approval date for Alabama's Opt Out policy and further explanation of timely corrections made for each child whose record showed noncompliance under Indicators 8A and 8B for SFY 2008. As per the OSEP SPP/APR Response Table received on June 3, 2010, AEIS has reported on the verification that the EI program (AIDB Talladega) is correctly implementing 34 CFR §§303.148(b)(1) (i.e., 100% compliance) and is correctly notifying the LEA for each child as appropriate.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Continue to provide transition training jointly to Part B and C providers and parents in response to their identified needs.

Part B and C agency representatives continue to offer Transition Training at the Annual EI-Preschool Conference in November. Transition is a routine topic covered at all Technical Assistance site visits. Individual Transition questions are fielded by state monitors on a daily basis. In addition, the Vital Message training conducted throughout the fiscal year included content related to transition requirements and methods.

2. Continue to actively involve parents in IFSP transition planning and appropriately inform them about Part B parental rights and responsibilities during transition planning.

A Family Forum was held at the annual Early Intervention-Preschool Conference providing an opportunity for open dialog with the 619 coordinator. Transition issues and potential solutions were discussed. During the SFY 2010 conference (held in November 2009), 41 family members were in attendance at the forum.

3. Identify staff person to monitor transition activities, especially all areas requiring 100% compliance.

A person on the monitoring team is specializing in transition issues and providing ongoing support and technical assistance to programs in meeting requirements.

4. Schedule meeting(s) with SDE data managers to ensure continued collaboration for smooth transition from Part C to Part B, including data compatibility.

Meetings have been held between AEIS and SDE data managers and leadership staff to ensure collaboration and smooth transition (April 19, 2010, May 21, 2010). AEIS staff continues to have membership on the Special Education Advisory Panel which also promotes greater collaboration.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. (SAME AS INDICATOR 1) Draft recommendations for developing a network of trainers/mentors available in local districts to help ensure consistency statewide in meeting service delivery requirements and best practice.	2011	• Personnel Subcommittee •	New improvement activity added to ensure compliance with OSEP indicators and best practice.
2. (SAME AS INDICATOR 1) Developing and implement the network of trainers/ mentors available in local districts to help ensure consistency statewide in meeting service delivery requirements and best practice.	2012, 2013	• Personnel Subcommittee • District councils • AEIS staff • Higher education • ICC	New improvement activity added to ensure compliance with OSEP indicators and best practice.
3. Continue collaboration and partnership with SDE to ensure understanding of updated policies from both B and C.	2011, 2012, 2013	• AEIS staff • SDE staff	New activity to ensure compliance with Indicator 8

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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).

SFY 2010	Measurable Rigorous Target	▶ Actual Data for SFY 2010		
	100%	**Numbers:**	**10** Findings of noncompliance identified in SFY 2009 (Column a on C-9 Worksheet). **10** Findings for which correction was verified no later than one year from identification (Column b on C-9 Worksheet).	**Target:** Met ☆
		Calculation	*(Column b) 10 ÷ (Column a) 10 x100 = 100 %)* **100%**	

▶ **VERIFICATION OF CORRECTION FROM SFY 2009 (EITHER TIMELY OR SUBSEQUENT):**

AEIS has reported and corrected all non-compliance from SFY 2009 as indicated above. See full explanation of correction under Indicators 1 and 7 of this document.

INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in SFY 2009 (10/1/08 to 9/30/09)	a. # Findings of non-compliance identified in SFY 2009 (10/1/08-9/30/09)	b. # Findings from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1 AIDB Talladega	8	8
	Dispute Resolution Complaints, Hearings	0	0	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in SFY 2009 (10/1/08 to 9/30/09)	a. # Findings of non-compliance identified in SFY 2009 (10/1/08-9/30/09)	b. # Findings from (a) for which correction was verified no later than one year from identification
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0
5. Percent of infants and toddlers birth to 1 with IFSPs 6. Percent of infants and toddlers birth to 3 with IFSPs	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2 Montgomery Arc HOPE Arc of Jefferson	2	2
	Dispute Resolution Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A. IFSPs with transition steps and services;	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in SFY 2009 (10/1/08 to 9/30/09)	a. # Findings of non-compliance identified in SFY 2009 (10/1/08-9/30/09)	b. # Findings from (a) for which correction was verified no later than one year from identification
services by their third birthday including: B. Notification to LEA, if child potentially eligible for Part B.	**Dispute Resolution** Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: C. Transition conference, if child potentially eligible for Part B.	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE:	**Monitoring:** Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution Complaints, Hearings	0	0	0
Sum the numbers down Column a and Column b			10	10

Percent of noncompliance corrected within one year of identification = (column b sum divided by column a sum) times 100

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE FOR OSEP PRIORITY AREAS TIMELY CORRECTED (CORRECTED WITHIN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):**

Level of compliance (actual target data) State reported for SFY 2009 for this indicator: 100%

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2008 through September 30, 2009) (Sum of Column a on the Indicator C 9 Worksheet)	10
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	10
3. Number of findings not verified as corrected within one year [(1) minus (2)]	0

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):**

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	0
5. Number of findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of findings not yet verified as corrected [(4) minus (5)]	0

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE FOR OTHER PAR AREAS (I.E., NON-OSEP PRIORITY AREAS) AND CORRECTIVE ACTION:**

1. Number of findings of noncompliance the State made during SFY 2009 (the period from October 1, 2008 through September 30, 2009)	0
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding)	0
3. Number of findings not verified as corrected within one year [(1) minus (2)]	0

▶ **CORRECTION OF SFY 2009 FINDINGS OF NONCOMPLIANCE FOR OTHER PAR AREAS NOT TIMELY CORRECTED (CORRECTED MORE THAN ONE YEAR FROM IDENTIFICATION OF THE NONCOMPLIANCE):**

4. Number of SFY 2009 findings not timely corrected (same as the number from (3) above)	0
5. Number of findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of findings not yet verified as corrected [(4) minus (5)]	0

As per the requirement under Indicator 9 of the OSEP Part C SFY 2010 SPP/APR Status Table, Alabama ensures that for each specific finding of non-compliance found during SFY 2009 (i.e., *AIDB Talladega's 8 findings under timely services and 1 finding under notification to the LEA; Montgomery HOPE Project's 1 finding under the 45 day timeline; and Arc of Jefferson County's 1 finding under the 45 day timeline*), each program is (1) correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data; and (2) has corrected each individual case of noncompliance.

In addition, as per the January 24, 2011 OSEP letter informing Alabama of the results of the verification visit during the week of September 20, 2010, Alabama submitted written assurance within 90 days that is has revised its practices so that it makes a finding of noncompliance when it finds any level of compliance below 100%.

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

During SFY 2010, programs were monitored as part of the three year monitoring cycle (Provider Appraisal Review or PAR as described below). Monitoring activities include program self-

assessments, data review via the GIFTS database, record review via on-site visits, technical assistance, staff interviews, and review of family survey data and timely action plans as appropriate. Other monitoring system components would include a review of complaints, due process, or dispute resolution sessions should they occur. For SFY 2010, there were no complaints, due process or dispute resolution sessions. PAR results for the programs monitored during **SFY 2010** were as follows:

	Programs Monitored During SFY 2010	▪ **Monitoring Date** ▪ **Level of Certificate (1, 2 or 3 year)**	**(A) OSEP PRIORITY AREAS** ▪ **Areas of non-compliance** ▪ **Date corrected (or to be corrected)**	**OTHER PAR AREAS** ▪ **Areas of non-compliance** ▪ **Date corrected (or to be corrected)**	**AREAS OF PARTIAL COMPLIANCE** ▪ **Areas of partial compliance** ▪ **Date corrected (or date to be corrected)**
1.	AIDB Auburn	2-17-10 3 year	NA	NA	NA
2.	AIDB Huntsville	7-8-10 3 year	NA	NA	NA
3.	AIDB Montgomery	4-15-10 1 year	▪ 3 findings under timely services (PAR Comp- IFSP) Correction Date: 12-2-10 (determined during TA)	NA	NA
4.	AIDB Shoals	4-6-10 2 year	NA	NA	NA
5.	AIDB Talladega	11-4-09 2 year	NA	NA	NA
6.	Arc of Autauga	10-28-10 1 year	▪ 3 findings under timely services (PAR Comp- IFSP) Correction Date: 1-6-11 (determined during TA) ▪ 3 findings under 45 day timeline (PAR Comp-Child Find) Correction Date: 1-6-11 (determined during TA) ▪ Findings under transition: 6 for 8A 6 for 8B 5 for 8C (PAR Comp-Transition) Correction to be determined at next review on: 9-15-11	▪ PAR Comp-E/A Correction Date: 11-23-10	NA
7.	Arc of Shelby	4-22-10 3 year	▪ 1 finding under timely services (PAR Comp- IFSP) Correction to be determined at next review on: 4-8-11	NA	NA
8.	Arc of Walker	6-15-10 3 year	NA	NA	NA
9.	Cahaba Center	3-9-10 3 year	NA	NA	NA
10.	CCCDD	9-1-10 1 year	NA	▪ PAR Comp-E/A Correction Date: 2-8-11	▪ PAR Comp-IFSP Correction Date: 2-8-11
11.	Cheaha El (Burton)	8-4-10 2 year	▪ 1 finding for timely services (PAR Comp- IFSP) Correction to be determined at	NA	NA

	Programs Monitored During SFY 2010	▪ Monitoring Date ▪ Level of Certificate (1, 2 or 3 year)	(A) OSEP PRIORITY AREAS ▪ Areas of non-compliance ▪ Date corrected (or to be corrected)	OTHER PAR AREAS ▪ Areas of non-compliance ▪ Date corrected (or to be corrected)	AREAS OF PARTIAL COMPLIANCE ▪ Areas of partial compliance ▪ Date corrected (or date to be corrected)
			next review on: 4-20-11		
12.	Children's Health System	1-12-10 3 year	NA	NA	NA
13.	E C AL UCP	6-30-10 2 year	NA	NA	NA
14.	NCAMRA	6-9-10 3 year	NA	NA	NA
15.	RISE	8-25-10 2 year	▪ 2 findings under timely services (PAR Comp- IFSP) Correction to be determined at next review on: 7-15-11	NA	NA
16.	SCOPE 310	1-27-10 2 year	NA	NA	NA
17.	Southwest	2-25-10 1 year	▪ 7 findings under timely services (PAR Comp- IFSP) Correction Determined on: 5-27-10	▪ PAR Comp-IFSP Correction Determined on: 5-27-10	NA
18.	Tri-County	10-14-10 3 year	NA	NA	NA
19.	UCP GB Blount/St. Clair	5-5-10 3 year	NA	NA	NA
20.	UCP GB Etowah/ DeKalb	8-11-10 3 year	▪ 1 finding under 45 days (PAR Comp-Child Find) Correction to be determined at next review on: 3-11-11	NA	NA
21.	UCP Huntsville	8-7-10 3 year	▪ 1 finding under timely services (PAR Comp- IFSP) Correction to be determined at next review on: 7-30-11	NA	NA
22.	UCP Mobile BB	9-16-10 3 year	▪ 1 finding under timely services (PAR Comp- IFSP) Correction to be determined at next review on: 3-31-11	NA	NA
23.	UCP Northwest	4-7-10 2 year	NA	NA	NA
24.	Vivian B Adams	3-24-10 1 year	▪ 7 findings under timely services (PAR Comp- IFSP) Correction Determined on: 11-30-10 ▪ Findings under transition: 8 for 8B 8 for 8C (PAR Comp-Transition) Correction Determined on:	NA	NA

	Programs Monitored During SFY 2010	▪ Monitoring Date ▪ Level of Certificate (1, 2 or 3 year)	(A) OSEP PRIORITY AREAS ▪ Areas of non-compliance ▪ Date corrected (or to be corrected)	OTHER PAR AREAS ▪ Areas of non-compliance ▪ Date corrected (or to be corrected)	AREAS OF PARTIAL COMPLIANCE ▪ Areas of partial compliance ▪ Date corrected (or date to be corrected)
			11-30-10		

***NOTE:** Areas of noncompliance in the above chart do not necessarily indicate overall noncompliance within a component found in the PAR. Noncompliance in Column A above is based on specific indicators, not entire PAR components. Levels of certificates awarded are based on overall component compliance rather than indicator compliance.

➢ Explanation of SFY 2010 non-compliance in OTHER areas:

1. **Arc of Autauga:**
   1 finding: During the SFY 2010 PAR review conducted on October 28, 2010, the Arc of Autauga was out of compliance under the Evaluation component due to incomplete information on two evaluation reports. The action plan requires further review of these issues at the next scheduled PAR on September 15, 2011.
2. **CCCDD:**
   2 findings: During the SFY 2010 PAR review conducted on September 1, 2010, CCCDD was out of compliance under the Evaluation component and in partial compliance under the IFSP component. For Evaluation, the program was out of compliance for eligibility reports not including all of the required information. For IFSP, the program was in partial compliance for poor quality of progress notes, no signature on annual plans, and no procedure for functional outcomes. The action plan requires further review of these issues at the scheduled record review on February 8, 2011.
3. **Southwest:**
   1 finding: During the SFY 2010 PAR review conducted on February 25, 2010, Southwest was out of compliance under the IFSP component for the IFSP not reflecting appropriate services, failure to document in a timely manner, and insufficient service coordinator notes. For all items on the 2010 action plan, the program was determined in compliance on May 27, 2010. A further review was conducted during the TA visit on December 12, 2010 where continued compliance was confirmed. A PAR is scheduled for February 10, 2011.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, AEIS submitted a revised SFY 2009 APR on 4-5-10 with further explanation of timely corrections made for each child whose record showed noncompliance under Indicator 9 for SFY 2008. AEIS has reported on the timely correction of all noncompliance issues identified during SFY 2009, has verified that each EI program is correctly implementing the specific regulatory requirements based on a review of updated data and has corrected each individual case of noncompliance. AEIS has used the Indicator 9 Worksheet.

- Description of the PAR monitoring process: The AEIS PAR process ensures continued compliance by consistently monitoring programs as per OSEP priority areas. Relative aspects of the process are as follows:

Description of method used to select EIS programs for monitoring**:** AEIS utilizes a system of monitoring called Provider Appraisal Review or PAR. PAR visits are scheduled for Early Intervention Programs every 1, 2, or 3 years depending on the results of their preceding PAR. A complete PAR cycle occurs every three years wherein all EIS programs are monitored.

New programs must be associated with AEIS for a minimum of five years before becoming eligible for a three-year certificate. First-year programs must participate in a PAR for two consecutive years. Following the second consecutive PAR, a program is eligible to receive a two-year certificate. It is therefore expected that a newly established program with AEIS will participate in three PARs over a five-year period of time.

Description of procedures used to collect data: Technical Assistance and Provider Appraisal Review teams consisting of AEIS staff and contracting agency personnel perform on-site visits for all programs falling within the scheduling cycle for the fiscal year. The emphasis is on accountability as per IDEA/OSEP requirements and quality of services/supports to families that help them achieve outcomes for families and their children. The PAR process includes record reviews and staff interviews. Action plans are developed as needed for indicators or components found to be in partial compliance or non-compliance status. (A complete description of the PAR process is provided in Alabama's **SPP**).

- ☑ A one-year certification implies that activities of the service coordination and program staff reflect partial compliance or non-compliance with the majority of the components. Non-compliance with an indicator(s) directly related to the legal implementation of IDEA may also be cause for finding a program in partial compliance or non-compliance. Significant efforts will be required to bring the program into full compliance. Certification will not be issued until the program has completed a plan of action for any component found to be in Non-compliance.
- ☑ A two-year certification implies that activities of the service coordination and program staff reflect full compliance with the majority of the components. No more than two components are found to be in partial compliance. No components are found to be in non-compliance. Minimal effort from staff is required to bring specific deficiencies into full compliance.
- ☑ A three-year certification implies that activities of the service coordination and program staff reflect full compliance with implementation of all components. In addition, the service coordination and program staff demonstrates exceptional efforts and best practices to enhance services to infants, toddlers and families with accompanying documentation.

AEIS reserves the option to conduct a PAR at *any time during a certificate cycle* based on a series of family concerns or service delivery issues, unresolved programmatic issues (including staffing concerns) or other issues which could impact services to families or affect procedural safeguards. If any component is found to be out of compliance during a subsequent review (TA visit, Record Review, etc), AEIS reserves the right to revoke an extended certification while a program Action Plan that addresses the deficit is in effect. The program does have an opportunity to resolve the issue within a specified timeframe set out in the Action Plan. For any program that is revoked for an extended certification (two- or three-year), the program will be expected to participate in a PAR the following year to insure compliance in all areas. A listing of PAR Indicators associated with OSEP priority areas is available upon request.

- AEIS works closely with the **Maternal and Child Health program** in Alabama by meeting quarterly with their staff and partner agencies. The MCH program is housed in the same agency as AEIS which strengthens this partnership. This last year AEIS providers and families participated in the development and implementation of the **MCH Needs Assessment**. This information will assist us in early intervention planning for personnel needs and further development of services to our consumers. We applaud their efforts and look forward to using the data and information generated from this alliance.
- As ADRS has been the lead agency for AEIS, it has afforded many opportunities for involvement in **statewide initiatives** addressing the broad issues related to disability throughout the life span. AEIS has been able to bring the needs of infants, toddlers and their families to the forefront in the following

activities – **Strategic planning** process, **Governor's Office on Disability Summit**, **Diversity Training**, **ADA Training** and others.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Ensure continued compliance by analyzing and sharing an overview of the FY PAR survey, the PAR monitoring results and a summary of concerns from the previous year's PAR with the ICC, fiscal agent liaisons, and the public to:

   (a) Target areas for emphasis in monitoring and technical assistance during the next fiscal year, including required personnel training activities.

   PAR results and areas of concern identified through TA visits are incorporated into CSPD training activities and include sessions developed specifically for the annual Early Intervention and Preschool Conference. For SFY 2010, training topics based on PAR findings included the following:

   - Timely Services
   - Adequate Personnel
   - Voluntary Family Assessments
   - Transition Training
   - Autism

   (b) Evaluate and enhance the PAR process.

   During SFY 2010, revisions to the PAR were suggested by an interagency panel, through the Program, Planning and Evaluation subcommittee of the ICC. The panel evaluated and offered significant suggestions which included: (1) eliminating the current rating process (weighted indicators) and (2) equating the indicators with OSEP Indicators.

   (c) Annually review and revise the AEIS Family Survey, as appropriate, to measure an understanding of various components of parental rights.

   The Family Survey was revised based on the need to clarify questions for families.

   (d) Evaluate and utilize in the PAR process those survey responses that were lower than 90% (or less than the previous year's results).*

   All programs receiving less than 90% satisfaction on PAR Family Survey items received an action plan from state monitoring staff and a follow-up review at their next scheduled TA.

   (e) Review program data, aggregate statewide data, and trend data as a checks and balances system to ensure accuracy of reported data.

   AEIS continues to work with ADRS Computer Services Division to further improve the safeguards for accuracy.

   (f) Report PAR results to the public on an annual basis.

   AEIS reports program PAR data annually via the updated program profiles found on the AEIS website. Program certificates are presented quarterly at ICC meetings. AEIS encourages public review of policies, procedures, data, and progress.

2. Ensure family input in order to monitor quality of AEIS components.

   AEIS continues to seek input and guidance from families and maintains strong partnerships with providers and family driven organizations. During SFY 2010, a partnership was continued with the Alabama Parent Education Center (Alabama PTI) to develop training materials and activities that would enhance understanding of services provided through Alabama's Early Intervention system. The training content and activities, entitled *A Vital Message About Alabama's Early Intervention System*, were guided by the Alabama ICC and were implemented during SFY 2010. In addition, the

APEC conducted a session at the 2009 Early Intervention and Preschool Conference and helped facilitate the Family Forum. We commend the work of APEC and opportunities to partner as we strive to improve.

Due to Alabama's funding crisis, a legislative initiative was developed by providers and families across the state. The initiative, entitled *Alabama's Babies are Pinning Their Future on You!*, was aimed at advocating for the budgetary needs of the system and was implemented during SFY 2010. It is anticipated that this initiative will continue to grow in response to needed additional state funding.

3. Assure that personnel in the following categories who are delivering services through AEIS are qualified to do so: Pre-service; In-service; Vendors: Contracted program staff

   Personnel qualifications are monitored through PAR reviews as per the Personnel Standards. AEIS ensures that personnel guidelines are current by maintaining and updating the Personnel Standards in collaboration with disciplinary licensing boards and the Personnel Subcommittee of the ICC. Training opportunities are made available through the CSPD plan and vendor training provided by district staff. The ICC personnel subcommittee meets at least quarterly to update pre-service and in-service trainings, review standards, and make recommendations to the ICC for action. During SFY 2010, revisions were made to the AEIS Personnel Standards to clarify degree requirements and strengthen continuing education requirements.

▶ **REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011**

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue utilizing program profiles in program monitoring	2011, 2012, 2013	• AEIS staff • APR • GIFTS data • Program profiles	New activity to ensure compliance with Indicator 9.
2. Ensure continued compliance by analyzing and sharing an overview of the FY PAR survey, the PAR monitoring results and a summary of concerns from the previous year's PAR with the ICC, fiscal agent liaisons, and the public to: (a) Target areas for emphasis in monitoring and technical assistance during the next fiscal year, including required personnel training activities. (b) Evaluate and enhance the PAR process. (c) Annually review and revise the AEIS Family Survey, as appropriate, to measure an understanding of various components of parental rights. (d) Evaluate and utilize in the PAR process those survey responses that were lower than 90% (or less than the previous year's results).*	2011, 2012, 2013	• ICC • PAR reports • Supervision/monitoring staff (including agency liaisons) • GIFTS data • Website • SER survey • Develop a post-PAR questionnaire for each program upon completion of their PAR monitoring to gather information on all components of AEIS and whether the program received the support they needed pertaining to each component. Share the results with the PP&E subcommittee of the ICC for development of an action plan. • TA to programs	Continuation of activity to ensure compliance with Indicator 9.

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
(e) Review program data, aggregate statewide data, and trend data as a checks and balances system to ensure accuracy of reported data. (f) Report PAR results to the public on an annual basis.			
3. Ensure family input in order to monitor quality of AEIS components.	2011, 2012, 2013	• Partnerships with organizations like APEC (PTI), ADAP (P & A), Annual EI/Preschool Conference Forum, MCH, Alabama Autism Society, United Cerebral Palsy, Arc.	Continuation of activity to ensure compliance with Indicator 9.
4. Assure that personnel in the following categories who are delivering services through AEIS are qualified to do so: Pre-service; In-service; Vendors: Contracted program staff	2011, 2012, 2013	• PAR • CSPD plan and training • Personnel Subcommittee of the ICC • Collaborative relationship with disciplinary licensing boards • Personnel standards • Vendor application packet	Continuation of activity to ensure compliance with Indicator 9.
5. **(Same as Indicator 1)** Increase communication and host meeting with fiscal agents and local providers to determine barriers to timely service delivery and services in natural environments in identified geographic areas and develop strategies for improvement.	2011, 2012, 2013	▪ AEIS staff ▪ Fiscal agents ▪ Local providers	New improvement activity added to ensure compliance with Indicator 9.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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.

SFY 2010	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010:		
	100%	**Number:**	0 complaints See Table 4 at the end of this document.	**Target:** Met
		Percentage:	100%	☆

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

There are procedures in the Alabama Administrative Code for any complaint investigations, mediations, and due process hearings to be investigated/conducted and corrective actions to be implemented in a timely manner. During this reporting period, no formal complaints were received as indicated on Table 4 attached at the end of this APR document.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, there were no issues needing to be addressed for this indicator.

▶ **IMPROVEMENT ACTIVITIES FOR SFY 2010:**

1. Continue the formal tracking system for issues and concerns, and disseminate patterns of issues and concerns for use in PAR monitoring/technical assistance and CSPD planning.

   AEIS continued to implement the formal tracking system to document and resolve issues and concerns; therefore, there were no formal complaints issued during this reporting period.

2. Continue the partnership with APEC - Alabama Parent Education Center (the Parent Training and Information Center) and ADAP (the Protection and Advocacy Agency) in order to further identify systemic issues needing to be addressed.

   APEC and ADAP continue to be partners with AEIS in identifying systemic issues, but at this point, none have been identified through these partners. Information about the state PTI and ADAP continues to be shared through the foundational training required for all services coordinators. AEIS continues to pursue collaborative training opportunities with the above partners.

3. Continue to maintain the current system of resolution of family concerns and questions to alleviate the need for a formal complaint to be rendered.

   AEIS continued to implement the formal tracking system to document and resolve issues and concerns; therefore, there were no formal complaints issued during this reporting period.

▶ **REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011**

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue the formal tracking system for issues and concerns, and disseminate patterns of issues and concerns for use in PAR monitoring/technical assistance and CSPD planning.	2011, 2012, 2013	• PA materials • Procedural Safeguards training • Dedicated staff for family concerns	Continue improvement activity to ensure compliance with Indicator 10.
2. Continue the partnership with APEC (the Parent Training and Information Center) and ADAP (the Protection and Advocacy Agency) in order to further identify systemic issues needing to be addressed.	2011, 2012, 2013	• APEC • ADAP • Families • Family Forum	Continue improvement activity to ensure compliance with Indicator 10.
3. Continue to maintain the current system of resolution of family concerns and questions to alleviate the need for a formal complaint to be rendered.	2011, 2012, 2013	• Designated state staff • ADRS legal council • Continued dissemination of information to families	Continue improvement activity to ensure compliance with Indicator 10.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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.

SFY 2010	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010:	
	100%	**Number:** 0 hearing requests See Table 4 at the end of this document. **Percentage:** 100%	**Target:** Met ☆

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

There are procedures in the Alabama Administrative Code for any due process hearings to be conducted and corrective actions to be implemented in a timely manner. During this reporting period, there were no hearing requests as indicated in Table 4 attached at the end of this APR document.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, there were no issues needing to be addressed for this indicator.

▶ **IMPROVEMENT ACTIVITIES FOR SFY 2010:**

1. Continue the multiple established mechanisms within Alabama's Early Intervention System for preventing and/or resolving issues and concerns as follows:

   a) Formal complaint resolution process established in the Alabama Administrative Code.
   b) Informal complaint resolution process (i.e., contact with the Assistant Part C Coordinator).
   c) Informational letter sent to all AEIS families outlining how and to whom issues and concerns can be expressed (i.e., AEIS Parent Concern Fact Sheet and AEIS Eligible Family Guide). This mechanism is monitored during the PAR process.
   d) Linkage on the AEIS website for registering concerns or complaints with the state office and access to EI specialists through the toll free number.
   e) Independent advocacy organization collaboration (The Alabama Parent Education Center and the Alabama Disabilities Advocacy Program provide workshops through the AEIS District Coordinating Councils and the ICC on a variety of advocacy topics including child/parent rights and transition.

f) Concerns identified from families during the PAR survey that are brought to the attention of the EI program administrator for resolution. All concerns have been resolved through PAR monitoring and technical assistance.
g) PAR monitoring reviews.
h) District Coordinating Council family involvement committees and training activities.
i) Revisions of training content to cover areas of concern.

All the above mechanisms remain in place and have resulted in no hearings being held during the fiscal year. AEIS continues to distribute information about procedural safeguards to primary referral sources, families and family support organizations. AEIS provides procedural safeguard training at all foundation training for EI personnel statewide and other individuals. AEIS also requires that service coordinators provide and explain parent's rights to families.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue the multiple established mechanisms within Alabama's Early Intervention System for preventing and/or resolving issues and concerns as follows: a. Formal complaint resolution process established in the Alabama Administrative Code. b. Informal complaint resolution process (i.e., contact with the Assistant Part C Coordinator). c. Informational letter sent to all AEIS families outlining how and to whom issues and concerns can be expressed (i.e., AEIS Parent Concern Fact Sheet and AEIS Eligible Family Guide). This mechanism is monitored during the PAR process. d. Linkage on the AEIS website for registering concerns or complaints with the state office and access to EI specialists through the toll free number. e. Independent advocacy organization collaboration The Alabama Parent Education Center and the Alabama Disabilities Advocacy Program provide workshops through the AEIS District Coordinating	2011, 2012, 2013	• Alabama Administrative Code • AEIS website • AEIS publications • District Coordinating Councils • CSPD plan • APEC • ADAP	Extend improvement activity to ensure continued compliance.

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
Councils and the ICC on a variety of advocacy topics including child/parent rights and transition. f. Concerns identified from families during the PAR survey that are brought to the attention of the EI program administrator for resolution. All concerns have been resolved through PAR monitoring and technical assistance. g. PAR monitoring reviews. h. District Coordinating Council family involvement committees and training activities. i. Revisions of training content to cover areas of concern.			

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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.

SFY 2010	▶ **Measurable and Rigorous Target/ Actual Target Data for SFY 2010:**
	Since there have been no resolution sessions, Alabama is not required to set targets at this time. If Alabama reaches a benchmark of 10 mediations within a year, then targets will be set as required See Table 4 at the end of this document..

▶ **DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:**

There are procedures in the Alabama Administrative Code for due process hearings to be conducted and corrective actions to be implemented in a timely manner. Alabama has not set targets due to having no resolution sessions within a year (see Table 4 below, Information Collection, 1820-0678, Report of

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, there were no issues needing to be addressed for this indicator.

As per the requirement under Indicator 12 of the OSEP Part C SFY 2010 SPP/APR Status Table, Alabama is in the process of revising its currently approved Administrative Code so that procedures and practices are consistent with the resolution process requirements in the regulations. A draft copy of the Administrative Code which includes the State's Early Intervention Child and Parent Rights has been submitted to our project officer for review. The Alabama Department of Rehabilitation Board is scheduled to meet on April 15 to approve the Code changes. This document will be officially submitted to OSEP along with its FFY 2011 application.

▶ **IMPROVEMENT ACTIVITIES FOR SFY 2010:**

1. Continue to maintain AEIS mechanisms for resolving concerns.

Alabama has continued to implement the AEIS multiple established mechanisms for preventing and/or resolving issues and concerns as follows:

a. Formal complaint resolution process established in the Alabama Administrative Code.
b. Informal complaint resolution process (i.e., contact with the Assistant Part C Coordinator).
c. Informational letter sent to all AEIS families outlining how and to whom issues and concerns can be expressed (i.e., AEIS Parent Concern Fact Sheet and AEIS Eligible Family Guide). This mechanism is monitored during the PAR process.
d. Linkage on the AEIS website for registering concerns or complaints with the state office and access to EI specialists through the toll free number.
e. Independent advocacy organization collaboration (The Alabama Parent Education Center and the Alabama Disabilities Advocacy Program provide workshops through the AEIS

District Coordinating Councils and the ICC on a variety of advocacy topics including child/parent rights and transition.

f. Concerns identified from families during the PAR survey that are brought to the attention of the EI program administrator for resolution. All concerns have been resolved through PAR monitoring and technical assistance.
g. PAR monitoring reviews.
h. District Coordinating Council family involvement committees and training activities.
i. Revisions of training content to cover areas of concern.

▶ **REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011**

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue to maintain AEIS mechanisms for resolving concerns.	2011, 2012, 2013	• AEIS staff	Continue improvement activity to ensure compliance.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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.

SFY 2010	▶ **Measurable and Rigorous Target/ Actual Target Data for SFY 2010:**
	Since there have been no mediations, Alabama is not required to set targets at this time. If Alabama reaches a benchmark of 10 mediations within a year, we will then set targets as required. See Table 4 at the end of this document.

▶ DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:

Alabama has not set targets due to having no mediations within a year as indicated on Table 4 attached at the end of this APR document.

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, there were no issues needing to be addressed for this indicator.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

No improvement activities were required for SFY 2010 for Indicator 13.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

There are no revisions planned for SFY 2011 under Indicator 13.

Part C State Annual Performance Report (APR) for SFY 2010 (10/1/09-9/30/10)

▶ **OVERVIEW OF THE ANNUAL PERFORMANCE REPORT DEVELOPMENT:** See page 1 above.

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).

SFY 2010	Measurable Rigorous Target	▶ Actual Target Data for SFY 2010:		
	100%	**Number:**	Percent of timely and accurate data = 70 divided by 70 times 100 (see Indicator 14 chart below))	**Target:** Met ☆
		Calculation	100%	

Part C Indicator 14 Data Rubric

Indicator 14 - SPP/APR Data			
APR Indicator	**Valid and reliable**	**Correct calculation**	**Total**
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8A	1	1	2
8B	1	1	2
8C	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	1	1	2
		Subtotal	30
APR Score Calculation	**Timely Submission Points** (5 pts for submission of APR/SPP by February 1, 2010)		5
	Grand Total		35

Indicator 14 - 618 Data					
Table	**Timely**	**Complete Data**	**Passed Edit Check**	**Responded to Data Note Requests**	**Total**
Table 1 – Child Count Due Date: 2/1/10	1	1	1	No requests 1	4
Table 2 – Settings Due Date: 2/1/10	1	1	1	1	4
Table 3 – Exiting Due Date: 11/1/10	1	1	1	NA	3
Table 4 – Dispute Resolution Due Date: 11/1/10	1	1	1	NA	3
				Subtotal	14
			Weighted Total (subtotal X 2.5; round ≤ .49 down and ≥ .50 up to whole number)		35
Indicator # 14 Calculation					
			A. APR Total		35
			B. 618 Total		35
			C. Grand Total		70
Percent of timely and accurate data = (C divided by 70 times 100)			(C) / (70) X 100 =		100%

▶ DISCUSSION OF IMPROVEMENT ACTIVITIES COMPLETED AND EXPLANATION OF PROGRESS OR SLIPPAGE THAT OCCURRED FOR SFY 2010:

During SFY 2009, data verification by EI state staff discovered that settings had erroneous data entries (service coordination was being listed under service provider location which was counted under the "other" category). Training with service coordinators and changes to the GIFTS data system, effective January 31, 2009, has since resulted in corrections to data entry. Data for all Indicators are now valid and reliable (i.e., 100% compliance).

AEIS continues adherence to the principles and critical elements found in the document "Data Accuracy: Critical Elements for Review of SPPs". In addition, routine practices that ensure data accuracy are employed as follows:

- The EI Medicaid Option training is provided statewide, focusing on appropriate documentation and accurate billing. Participants include administrators, billing staff, service coordinators, special instructors and therapists.
- The AEIS Data Manager/Child Find Coordinator continues to meet with Computer Services Division monthly for the ADRS.net meeting. During these meetings there are discussions about GIFTS updates/enhancements as well as data sharing and reporting timely and accurate data.
- The AEIS Data Manager/Child Find Coordinator continues to assist in training new Service Coordinators in using GIFTS and providing ongoing technical assistance to ensure data is accurate upon entry. Once data is entered, the Help Desk is available for users to access for necessary changes/errors that may have occurred.

- The Data Manager/Child Find Coordinator continues to send out messages via email to inform users of any updates/enhancements to the GIFTS system.
- An EI Financial training was conducted in August 2010 under the direction of Winona Nelson, ADRS Chief Financial Officer. Financial staff from both Alabama Institute for Deaf and Blind and Department of Mental Health also participated in the training. Ms. Nelson conducted an overview of financial requirements as outlined in federal regulations. She responded to questions posed by EI program staff and provided all participants with a notebook of her presentation as well as the federal regulations that applied to each type of EI program.
- At a Financial Planning Subcommittee meeting, ADRS/EI, ADRS/CRS, AIDB and DMH are to share a financial report of the funds used for Early Intervention. These reports show the use of funds and each agency is available to respond to questions posed regarding their fund use.

▶ VERIFICATION OF CORRECTION OF SFY 2009 FINDINGS:

As reported in the SFY 2009 APR, data verification by EI state staff discovered that settings had erroneous data entries (service coordination was being listed under service provider location which was counted under the "other" category). Training with service coordinators and changes to the GIFTS data system, effective January 31, 2009, has resulted in corrections to data entry thereby making data for Indicator 2 valid and reliable (i.e., 100% compliance).

★ As per the OSEP SPP/APR Status Table, subsequent conference call with Kate Moran and Rhonda Spence on April 5, 2010, and OSEP SPP/APR Response Table received June 3, 2010, AEIS submitted a revised SFY 2009 APR on 4-5-10 with revisions to Indicator 14 as recalculated by OSEP. AEIS has provided an update under Indicator 2 that data entry errors have been corrected and that AEIS is now in compliance with the timely and accurate data reporting requirements in IDEA sections 616, 618, 642, and 34 CFR §§76.720 and 303.540. Alabama has used the Indicator 14 Data Rubric and reports 100% compliance for SFY 2010.

▶ IMPROVEMENT ACTIVITIES FOR SFY 2010:

1. Send reminder letters to all EI programs regarding the federal child count and updates on any changes in 618 data reporting requirements.

   Reminders were distributed and this activity was completed for the December 2009 child count.

2. Continue gathering public input for SPP and APR reporting requirements.

   AEIS continues to gather and utilize public input for the SPP and APR as described in the Overview of the APR Development on page 1 of this report.

▶ REVISIONS, WITH JUSTIFICATION, TO PROPOSED TARGETS / IMPROVEMENT ACTIVITIES / TIMELINES / RESOURCES FOR SFY 2011

New Improvement Activities for SFY 2011-2013	Timelines	Resources	Justification
1. Continue to send reminder letters to all EI programs regarding the federal child count and updates on changes in 618 data reporting requirements.	2011, 2012, 2013	• AEIS staff	Extend improvement activity to ensure compliance.
2. Continue gathering public input for SPP and APR reporting requirements.	2011, 2012, 2013	• EI/Preschool Conf • Family Forum • AEIS website • ICC & stakeholders	Extend improvement activity to ensure compliance.

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

TABLE 4
REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT
2009-10

PAGE 1 OF 1
OMB NO.: 1820-0678
FORM
EXPIRES:1/31/2013
STATE:
AL -Alabama

SECTION A: WRITTEN, SIGNED COMPLAINTS	
(1) Total number of written, signed complaints filed	0
(1.1) Complaints with reports issued	0
(a) Reports with findings of noncompliance	0
(b) Reports within timeline	0
(c) Reports within extended timelines	0
(1.2) Complaints pending	0
(a) Complaints pending a due process hearing	0
(1.3) Complaints withdrawn or dismissed	0
SECTION B: MEDIATION REQUESTS	
(2) Total number of mediation requests received	0
(2.1) Mediations held	0
(a) Mediations held related to **due process complaints**	0
(i) Mediation agreements related to **due process complaints**	0
(b) Mediations held not related to **due process complaints**	0
(i) Mediation agreements **not related to due process complaints**	0
(2.2) **Mediations pending**	0
(2.3) Mediations not held	0
SECTION C: Due Process Complaints	
(3) Total number of **due process complaints** filed (for all States)	0
(3.1) Resolution meetings (applicable ONLY for states using Part B due process hearing procedures)	0
(a) Written settlement agreements reached through resolution meetings	0
(3.2) Hearings (fully adjudicated) (for all States) -	0
(a) Complete EITHER item (1) OR item(2), below as applicable.	-9
(1) Decisions within timeline - Part C Procedures	-9
(2) Decisions within timeline - Part B Procedures	0
(b) Decisions within extended timeline (applicable ONLY if using Part B due process hearing procedures)	0
(3.3) **Hearing pending (for all States)**	0
(3.4) **Due process complaint withdrawn or dismissed (including resolved without a hearing) (for all States)**	0