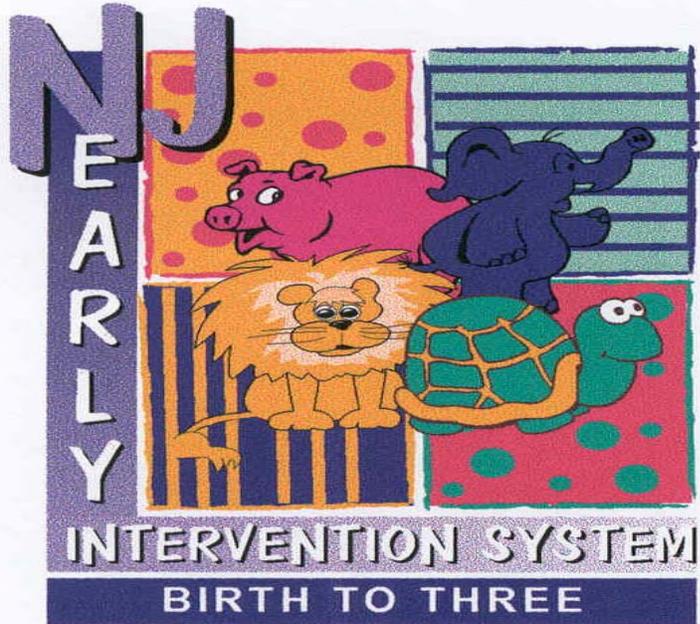


# NEW JERSEY EARLY INTERVENTION SYSTEM

## PART C ANNUAL PERFORMANCE REPORT



New Jersey Department of Health and Senior Services  
Division of Family Health Services



**Federal Fiscal Year  
2008-2009**

Submitted February 1, 2010

## Overview of Annual Performance Report Development

In accordance with the Individuals with Disabilities Education Act of 2004, the New Jersey Early Intervention System (NJEIS) submitted a Part C State Performance Plan (SPP) to the U.S. Department of Education Office of Special Education Programs (OSEP) on December 2, 2005. That plan was developed based upon guidance from OSEP and with broad stakeholder involvement and input. The NJEIS Part C State Performance Plan was disseminated to the public through posting to the website (<http://nj.gov/health/fhs/eis/index.shtml>) and the Regional Early Intervention Collaboratives (REICs) website (<http://www.njeis.org>). The SPP was also disseminated electronically to representatives of the Part C Steering Committee, State Interagency Coordinating Council (SICC), state agencies (Department of Education, Department of Human Services, Department of Children and Families), advocacy organizations, Service Coordination Units and Early Intervention Program provider agencies for distribution throughout the State.

Annual Performance Reports (APR) were prepared and submitted in February 2007, 2008 and 2009. These are posted at: <http://www.state.nj.us/health/fhs/eis/report.shtml>. The Part C Steering Committee met on January 6, 2010 to advise and assist in the development of this NJEIS Annual Performance Report (APR) for federal fiscal year 2008 reporting on performance for July 1, 2008 - June 30, 2009. Stakeholders reviewed available data and analyzed the status of the state Part C system, as well as local systems, related to measurable and rigorous targets established in the State Performance Plan. For each of the indicators in the State Performance Plan, the stakeholder group compared current data to target data and engaged in discussion about progress and slippage.

Stakeholder members reviewed improvement activities, timelines and resources for each indicator to determine which were completed, to examine the efficacy of each, and to make recommendations about any necessary revisions or additions to the activities, timelines and resources.

Based upon guidance from the Office of Special Education Programs (OSEP), baseline, targets and improvement activities for Indicator 3 were included as a revision to the State Performance Plan for the Part C system in New Jersey.

New Jersey's updated/revised Part C State Performance Plan (SPP) and this Annual Performance Report (APR) will be disseminated to the public through posting to the DHSS-NJEIS webpage (<http://www.state.nj.us/health/fhs/eis/report.shtml>) and the Regional Early Intervention Collaboratives website (<http://www.njeis.org>). The updated/revised Part C SPP and APR will also be disseminated to all of the above individuals electronically for distribution through their dissemination mechanisms (e.g. newsletters, websites, list serves. etc) throughout the State. These documents will also be disseminated to representatives of state agencies (Department of Education, Department of Children and Families, Department of Human Services) electronically for distribution throughout the State.

FFY 2007 County Performance Reports and Part C Determinations outlining the performance of each county in relation to state targets and Part C requirements were disseminated and posted at <http://www.state.nj.us/health/fhs/eis/report.shtml>. The FFY 2008 reports will be prepared and disseminated in 2010.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

### 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.

FFY	Measurable and Rigorous Target
<b>2008</b> (2008-2009)	<b>100%</b> percent of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.

#### Actual Target Data for FFY 2008:

For FFY 2008, 97.06% (297/306) of infants and toddlers with IFSPs received the early intervention services on their IFSPs in a timely manner. Family reasons are included in the numerator and denominator.

268 children received timely services and an additional 29 children had delays in services due to child illness/hospitalization, family cancellations and requests to reschedule (family reasons). Therefore 297 (268+29) of 306 children received timely provision of services as monitored by the lead agency through the procedures described below.

#### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

- The DHSS-NJEIS has made significant progress in ensuring services are provided to children in a timely manner. In FFY 2008, 97.06% of children received their services in a timely manner as compared to the FFY 2007 performance of 88.17%. This represents an increase of 8.89%.
- When the cohort of counties (11 counties) monitored in FFY 2008 are compared with their FFY 2006 APR data, these counties increased performance from 93.2% in FFY 2006 to 97.06% in FFY 2008. This represents an increase of 3.86%.
- Timely service data passes through a number of edit checks including that there is a valid IFSP date with a billing authorization within the IFSP period, a claim filed by the provider agency supported by a service encounter verification log signed by the parent and an explanation of benefits provided to the family as a secondary verification that the service type, date and intensity are accurate.
- As the NJEIS data system has evolved, so has the understanding that NJEIS can and should strengthen procedures to ensure statistically sound methodology in the selection of records used to measure county performance. Therefore, NJEIS moved from using census data to implementation of a more rigorous sampling methodology in conducting data desk audits as of FFY 2007 and have continued to implement this methodology for this APR.

- A sampling methodology is necessary for this indicator to ensure that the NJEIS population, which varies widely for each county, is appropriately represented based on the population size of the county. Therefore, a county stratified random sampling plan with a 95% confidence level and +/- 5 confidence interval ensures that child records from both small and densely populated counties are appropriately represented.
- The identification of the data needed to conduct a timely data desk audit, inquiry, and record review is driven by the following factors:
  1. Availability of actual service claims data to ensure that complete and accurate data is available for the data desk audit. Agencies have up to 90 days from the date of service to submit claims data for billing. Therefore, service claim data provided between September 1 and November 30 are not complete until March 1.
  2. The data desk audit, inquiry and record review has historically taken 4 to 6 months to confirm noncompliance and determine the responsible agency(s) and root causes for the noncompliance.
- The FFY 2008 timely services monitoring began with the data desk audit based on a stratified random sample of three months of FFY 2008 service claim data. As with the FFY 2007 monitoring, the data represented all active child records for the months of September, October and November for 11 (52.4%) of the 21 counties in New Jersey. The other ten counties were reviewed in FFY 2007 and reported in the APR submitted February 1, 2009.
- The desk audit included 306 active child records and 327 services obtained from the NJEIS data system.
- The data desk audit identified that 268 children (288 services) did receive timely services based on the IFSP. NJEIS provider agencies deliver and bill for IFSP services confirmed by the parent signature on a service encounter verification form at the time of the service. In addition, parents receive an explanation of benefits to verify that the services billed are accurate in accordance with the service encounter verification form signed by the family. Overall 97.25% (318/327) of the services were timely including 30 services which were delayed due to family reasons of which 3 were due to child illness and/or hospitalization.
- The NJEIS electronic database does not currently capture all variables needed to determine whether a service is timely including reasons for delay and the inability to identify whether a new service is timely under a periodic IFSP. Therefore an inquiry was conducted by the lead agency monitoring staff to obtain the necessary additional information on 38 of the 306 children and 39 of their 327 services.
- As part of the inquiry, the monitoring team conducted a drill down to obtain child specific information, reasons for delays and verification of initiation of services, although late. The service coordination units and early intervention provider agencies were asked to submit copies of child progress notes and tracking lists of service provider assignments (Broadcast). The monitoring team used all the information received to determine where in the process the delay occurred and who was responsible.
- The purpose of the inquiry was to: (1) identify reasons for delays, including documentation of family reasons; (2) determine if the service was added at a subsequent IFSP team meeting not captured in the database; (3) identify root cause and ensure correction of any systemic barriers; and (4) verify that the delayed service was implemented and therefore corrected.
- The results of the inquiry identified that for 29 of the 38 children (30 of the 39 services), the delays were child or family related (including child illness/hospitalization, family cancellations and requests to reschedule). The data for these children are included in both the numerator and denominator. Therefore 29 of the 38 children (30 of the 39 services) were determined to receive timely services and 9 children (9 services) were determined to have non-compliance in timely services.
- Additional inquiry was conducted to determine primary responsibility for the non-compliance related to the 9 children. Service coordination units and early intervention provider agencies were asked to submit copies of child progress notes, service encounter verification logs, agency notes, evaluation team notes and tracking lists of service provider assignments (Broadcast). The monitoring team used all the information received to determine where in the process the delay occurred and who was responsible. As a result of the additional inquiry, 5 findings of non-

compliance were issued in FFY 2009 with Corrective Action Plans to 2 Service Coordination Units and 3 Early Intervention Programs (EIP).

- The 9 delays were due to the following reasons:
  - Two were due to practitioner scheduling the first service late;
  - Six were due to no providers being available for the following services: (1) physical therapy; (3) speech therapy; (1) occupational therapy and; (1) special education; and
  - One was due to a practitioner resignation.
- According to the inquiry, system delays were primarily reported to be the result of practitioner availability. 5 services were delayed between 1 to 15 days and 4 services were greater than 15 days delayed.
- At least weekly the REICs review tracking documents that provide data on the timely provider & practitioner assignment of children with signed IFSPs and ensures notice is provided to the Procedural Safeguards Office when provider assignment is approaching the 30 day timeline with no assignment.
- The NJEIS has procedures to report when no provider is available to the Procedural Safeguards Office. The Procedural Safeguards Office sends letters to each family that includes an option to obtain and receive reimbursement for services out of the NJEIS network pending assignment of an NJEIS practitioner.
- Correction of findings on the FFY 2008 data will be reported in the February 2011 APR based on the FFY 2009 notification of findings of non-compliance and corrective action plans issued by the lead agency.

**Correction of Previous Noncompliance as Required in the OSEP Response Table**

- Based on monitoring data, findings and corrective action plans (CAPs) were issued to one county and 4 early intervention programs with identified non-compliance for this indicator and correction of non-compliance was verified within twelve months of the issuance of the findings.
- NJEIS has:
  1. Accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and in some instances onsite data verification. The DHSS confirmed that services were initiated for each child, although late as verified by the monitoring team through claims data, service encounter verification sign-off, and progress notes.
  2. Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
  3. Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the correction action plan required the agency to establish and/or revise appropriate policies, procedures and/or practices. In addition, the NJEIS-08, No Provider Available Policy (NPA) and Procedure was revised and distributed to provide additional clarification statewide.
  4. The DHSS ensures that each agency with identified non-compliance is correctly implementing the specific regulatory requirements as verified through monthly corrective action plan reports and updated 45 day timeline data.

Improvement Activities	Status
Enhance the SPOE database to record the date of the initial IFSP meetings and all IFSP reviews as a data element. This record would include the date of the meeting and the date of parental consent to any IFSP service.	<p style="text-align: center;"><b>Not Completed- FFY 2008 Update</b></p> State fiscal concerns, increased workload resulting from ARRA funds, limited resources and a change in administration have delayed issuing a new RFP for the CMO. An RFP has been drafted and is being finalized with Treasury with an anticipated

Improvement Activities	Status
<p>Enhance the SPOE database to enable NJEIS to link authorizations with a specific IFSP meeting or review. By linking authorizations with these dates, timely services can accurately be measured from the IFSP consent date.</p>	<p>early 2010 release. A third contract extension maintains the Central Management Office with Covansys through calendar year 2010 to allow for sufficient transition to an online web-based application under a new CMO contract. The RFP will enhance the CMO performance through an on-line web-based application that will include enhancements for data collection and reporting.</p>
<p>Enhance the SPOE database to allow the reassignment of an authorization to a different agency or practitioner, while keeping the authorization associated with the IFSP meeting/review that added the service to the child's IFSP.</p>	
<p>Enhance the SPOE database to allow an authorization to be created before an agency/practitioner has been assigned to provide a service. This allows NJEIS to track all authorizations for timely delivery of service. Once an agency/practitioner is assigned to the service, the authorization can be modified.</p>	
<p>At the completion of the enhancement to the SPOE database, monitoring activities on the provision of timely services will be conducted annually including a desk audit, inquiry to obtain additional information from counties, issuance of findings of noncompliance if necessary, implementation of corrective action plans, provision of technical assistance, and assurance of correction of noncompliance in accordance with federal requirements.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In the absence of the enhancements to the SPOE database, a desk audit was conducted using the current SPOE database and inquiry was performed on 11 counties for FFY 2008. As a result, the monitoring activities needed to rely on using inquiry to obtain information.</p> <p>The remaining 10 counties were monitored during FFY 2007.</p>
<p>Once the SPOE enhancement is complete, analyze data on "untimely" services to determine if patterns exist in type of service, type of discipline, variations in frequency and intensity of service need/provisions, county area, etc. to determine gaps in access and availability of necessary services. Plans to address any identified needs will be developed and implemented.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, pending the SPOE enhancement, the four REICs continued to review weekly each county's Provider Assignment Spreadsheet to ensure that families receive services in a timely &amp; equitable manner. In addition, the REIC Directors are working with NJEIS state staff to revise the EIP assignment broadcast procedure to create a statewide uniformed format.</p> <p>The REICs tracked, intervened &amp; provided technical assistance to resolve issues such as:</p> <ul style="list-style-type: none"> <li>• Ensuring that all children and their families are assigned to receive services within 30 days of the IFSP consent date.</li> <li>• Ensuring that the No Practitioner Available policy is enforced when a child is approaching 25 days after the IFSP is signed by the parent.</li> </ul>

Improvement Activities	Status
	<p>This policy includes notifying DHSS and contacting EIPs to secure services.</p> <p>In addition, REICs conducted the following recruitment and retention activities to ensure qualified staff are available to meet IFSP needs:</p> <ul style="list-style-type: none"> <li>• Updated the flyer on EI staffing needs that is used for recruitment and retention.</li> <li>• Participated in 5 Career Days – 2 at Rutgers University; and 1 each at Kean University, Monmouth University, &amp; Seton Hall University.</li> <li>• Posted a listing of early intervention NJEIS personnel standards on the Rutgers University website.</li> <li>• Provided a clearinghouse to gather and distribute resumes received through REIC websites and job recruitment activities to EIP's and SCU's. Resumes are forwarded to the provider agencies and service coordination units based upon the county in which the applicant indicates interest. This activity shares resources &amp; saves on advertising.</li> <li>• The REIC's and state office also fields telephone calls and emails from individuals and agencies looking to work in EI in NJ and forwards to the appropriate agency.</li> </ul>
<p>Continue to facilitate enrollment of new service vendor agencies to increase availability to access to services.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, new vendors remained on hold and interested agencies were advised to consider subcontracting through an approved EIP agency. NJEIS developed a new proposal to establish and assign a primary EIP Home for eligible children and their families. The proposal was issued to the NJEIS provider agencies for comments. Comments are under consideration before releasing revised policy and procedures.</p>
<p>Collaborate with the NJ Department of Education, Office of Special Education Programs (OSEP) Personnel Grant to address activities to enhance practitioner recruitment and retention.</p>	<p style="text-align: center;"><b>Completed FFY 2008</b></p> <p>In FFY 2007, NJEIS provided input on script development and filming for a personnel recruitment video with the Personnel Improvement Center. In FFY 2008 the project focused on a different state and a recruitment video for early intervention specialists is now available on the Personnel Improvement Center website.</p>
<p>Compensatory services are provided to families in instances in which services have not been provided in a timely manner. This is</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>During FFY 2008, one hundred and fifty-three (153) families received approximately 1,155.25 hours of compensatory services in accordance with</p>

Improvement Activities	Status
<p>identified through informal and formal family contacts to the Procedural Safeguards Office or the NJEIS Central Management Office.</p>	<p>NJEIS decisions through informal resolution by the Procedural Safeguards Office. This included 273.75 hours of developmental intervention; 567.75 hours of Speech &amp; Language Therapy; 86.25 hours of Physical Therapy; and 223.50 hours of Occupational Therapy. Three informal resolutions resulted in sanctions to three Early Intervention Program (EIP) provider agencies that were required to provide 31.5 hours of compensatory services at their expense.</p>
<p>When no practitioner is available within the state provider network, a family is authorized by NJEIS to utilize a practitioner outside the state network to provide the early intervention service to ensure that services are provided within the state policy for timely services.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>NJEIS-08, No Provider Available Policy (NPA) and Procedure was revised and distributed to provide additional clarification.</p> <p>When notified of an NPA, the Procedural Safeguards Office sends a letter to the family indicating that no practitioner has been located and offering the option to obtain and receive reimbursement for services out of the NJEIS network pending assignment of an NJEIS practitioner.</p> <p>In FFY 2008 (July 1, 2008 – June 30, 2009), in accordance with this procedure, five (5) families were approved and reimbursed for early intervention services delivered by practitioners outside the NJEIS.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

**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.

FFY	Measurable and Rigorous Target
<b>2008 (2008-2009)</b>	99.40 percent of infants and toddlers with IFSPs will primarily receive early intervention services in the home or community-based settings.

**Actual Target Data for FFY 2008:**

In FFY 2008, the 618 data reported (9,667/9,786) 98.78% of infants and toddlers with IFSPs primarily received early intervention services in the home or community-based settings.

NJEIS recognizes the requirement, which designates the primary setting as the location in which the child receives most of their services, under represents the number of services provided in community settings. A review of service data from FFY 2008 identified that 666 children that received services primarily in the home, also received at least one service in the community.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

- In FFY 2008, 98.78% of infants and toddlers with IFSPs primarily received early intervention services in the home or community-based settings compared to 97.8% in FFY 2007 which is an increase of 0.98%.
- The percentage of children receiving services community-based settings increased from 5.45% in FFY 2007 to 6.2% in FFY 2008.
- The 119 children counted in other (percentage of non-natural environment settings) included 67 families who received service coordination only and 52 children who received services in non-natural environments.
- The REICs review the IFSP justifications of any service that is not being provided in a natural environment to ensure compliance.

Improvement Activities	Status
<p>Using the SPOE database, run and disseminate an annual report ranking the twenty-one counties' performance on this indicator based on December 1 child count.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>These data are reported in the Annual County Performance Reports and posted on the NJEIS website.</p>
<p>Collaborate with the Council on Developmental Disabilities (CDD) on their Part C Planning and Implementation Grants to enhance inclusive community resources and supports for families.</p>	<p style="text-align: center;"><b>Completed FFY 2006</b></p>
<p>Review state and county data from the NCSEAM and NJEIS Regional Family Surveys to identify patterns in providing services in and/or linking families to community supports and services. Develop and implement activities based on survey results.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>NJEIS Regional Family Surveys were ended with the implementation of the NCSEAM Survey in FFY 06.</p> <p>In FFY 2008, the NCSEAM survey results were analyzed to identify areas in need of improvement. The NJEIS compared the results of FFY 2007 to FFY 2008 survey results regarding natural environments. The following are the results:  "Early Intervention has helped me and/or my family":</p> <ul style="list-style-type: none"> <li>▪ "Participate in typical activities for children and families in my community" increased from 74% to 75% (1% increase);</li> <li>▪ "Know about services in the community" increased from 77% to 80% (3% increase);</li> <li>▪ "Make changes in family' routines that will benefit my child with special needs" increased from 86% to 91% (5% increase);</li> <li>▪ "Feel that my family will be accepted and welcomed in the community" increased from 86% to 89% (3% increase); and</li> <li>▪ "Feel that my child will be accepted and welcomed in the community" increased 88% to 93% (5% increase).</li> </ul>

Improvement Activities	Status
<p>Continue to review settings data from the SPOE database to inform progress in provision of service in natural environments.</p>	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>The SPOE database documented that the percentage of children receiving services in community based inclusive settings increased from 5.45% to 6.2%. The Part C Steering Committee requested that NJEIS continue to explore possibilities for collection of data when families and children receive services in settings other than home on an intermittent basis remains under consideration.</p>
<p>Once the new web-based enhancement to the SPOE database is available, the following information will be reviewed to inform CSPD efforts: family information, child and family outcomes, services, supports and settings.</p>	<p align="center"><b>Not Completed</b></p> <p>This activity initially scheduled to occur Summer 2007 and annually thereafter is delayed pending the web-based enhancement to the SPOE database.</p>
<p>Review the family assessment page of the IFSP, IFSP Instructions and Orientation materials to ensure that they specifically reflect the child and family outcomes developed by the Early Childhood Outcome Center.</p>	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>A number of initiatives presented during FFY 2008 has altered the scope and direction for approaching product development and implementation of training and technical assistance that will result in a significant activity throughout FFY'09 and FFY'10 including:</p> <ul style="list-style-type: none"> <li>▪ The release of a competitive Request for Application for county service coordination units that motivated a review and enhancement of training for service coordination.</li> <li>▪ Development of a training and technical assistance program for all service coordinators to enhance understanding and application of Part C responsibilities has begun. Implementation is targeted for FFY 2010.</li> <li>▪ ARRA funding provided new opportunities to expand training &amp; technical assistance including the addition of a Service Coordination Training and Technical Assistance Coordinator position and the initial development of on-line training.</li> </ul>
<p>Enhance collaboration with community based partners to identify existing community supports, develop a plan to make connections and provide professional development. The purpose is to connect families with community supports and</p>	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, through presentations, planning and stakeholders committees, and EI material exchange, the REICs collaborated with community agencies to connect families to community supports. The community</p>

Improvement Activities	Status
services that are not specifically targeted to individuals with disabilities.	agencies included libraries, Head Start, Early Head Start, teen mom programs, transitional housing sites, YMCAs and culturally- based agencies.
Create links on NJEIS and advocacy organization websites to assist families in accessing services and supports identified on the “other non-required page” of the IFSP.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>During FFY 2008, The REIC Family Support Coordinators continued development of a “Family Matters” Webpage. The “Family Matters” web page was designed to offer a family friendly site that would assist them in connecting with the REIC family support team, other families, their communities, regional and national websites including advocacy agencies. The REIC Family Support Coordinators are currently finalizing the webpage content. The site (which is part of NJEIS.org) will be going live in 2010.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

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

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

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

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

#### Measurement:

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

Progress categories for A,B and C:

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

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

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

#### Measurement for Summary Statement 1:

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

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

**Measurement for Summary Statement 2:**

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

FFY	Measurable and Rigorous Target
2008 (2008-2009)	As required by OSEP, baseline and targets are reported in the SPP.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

As instructed by OSEP, newly established targets, progress data and improvement activities for this indicator were updated in the State Performance Plan (SPP).

The SPP is posted at <http://www.nj.gov/health/fhs/eis/index.shtml>.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

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

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

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

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

**Measurement:**

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

FFY	Measurable and Rigorous Target	
<b>2008</b> (2008-2009)	68.0%	Know their rights
	64.0%	Effectively communicate their children's needs
	74.5%	Help their children develop and learn.

**Actual Target Data for FFY 2008:**

- A. **71.6% (247/345)** reflects the percent of families who reported that early intervention helped them know their rights.
  - B. **68.4% (236/345)** reflects the percent of families who reported that early intervention helped them communicate their child's needs.
  - C. **83.8% (289/345)** reflects the percent of families who reported that early intervention helped them help their child develop and learn.
- The NJEIS, for the third year, implemented the 22 item Impact on Family Scale (IFS) family survey developed and validated by the National Center for Special Education Accountability Monitoring (NCSEAM) and the Rasch measurement framework for analysis. The FFY 2006 NCSEAM survey results were used to revise baseline data and targets for the FFY 2006 to FFY 2010 APR using the NCEAM target setting calculator found at [www.monitoringcenter.lsuhs.edu/CALCULATOR/Calculator.html](http://www.monitoringcenter.lsuhs.edu/CALCULATOR/Calculator.html).
  - The Impact on Family Scale (IFS) measures the extent to which early intervention helped families achieve positive outcomes specified in Indicator 4. The IFS was developed by NCSEAM to provide states with valid and reliable instruments to measure (a) positive outcomes that families

experience as a result of their participation in early intervention and (b) families' perceptions of the quality of early intervention services.

- In May 2009, 1,834 surveys were mailed to a sample of families served by NJEIS. Cover letters as well as postage paid business reply envelopes were included with the surveys. The final cutoff date for processing surveys was extended to October 20, 2009 to allow families additional time to respond.
- Of the 1,834 surveys distributed across twenty one counties, 346 were returned for a response rate of 18.9%. Three-hundred forty-five (345) of the 346 surveys provided responses to the IFS. One survey was incomplete was not included in the analysis. This number is high enough for the estimated statewide percents on the indicator to be within an adequate confidence interval (approximately +/- 4.8%, with a confidence level of 95%) based on established survey sample guidelines.
- The return sample distribution for the state was representative of the race and ethnicity for the population served by the NJEIS. The December 1, 2008 population by race matched the FFY 2008 survey race of respondents within +/- 1.9% which shows that the survey results represents the racial make-up of NJEIS's population. The county return sample distribution for the state also adequately represented the NJEIS population surveyed. To verify that the returned sample was representative of each county, a chi square test was performed. The chi square score was 3.45 which is less than the chi square value of 31.4 with a 20 degree of freedom ( $P < 0.05$ ). This indicates that there is no significant difference between the actual number of returned surveys compared to the expected number based on the NJEIS population.
- Data from each of the scales were analyzed through the Rasch measurement framework. For each scale, the analysis produced a measure for each survey respondent. Individual measures can range from 0 to 1,000. For the IFS, each family's measure reflects the extent to which the family perceives that early intervention has helped them achieve positive family outcomes. The IFS measures of all respondents were averaged to yield a mean measure reflecting overall performance of the NJEIS in regard to the impact of early intervention on family outcomes. The mean measure on the IFS was 652. The standard deviation was 160, and the standard error of the mean was 8.6. The 95% confidence interval for the mean was 635.2 – 669.1. This means that there is a 95% likelihood that the true value of the mean is between these two values. The FFY 2008 standard deviation of 160 was 12 less than FFY 2007 (172). This indicates that NJEIS results are even more closely similar to the average mean of 652 than last year. The standard error of the mean decreased by 1.2 compared to FFY 2007 (9.8) signifying that NJEIS responses are more closely analogous.
- While OSEP requires that the state's performance be reported as the "percent" of families who report that early intervention services helped them achieve specific outcomes deriving a percent from a continuous distribution requires application of a standard, or cut-score. The NJEIS elected to apply the Part C standards recommended by a nationally representative stakeholder group convened by NCSEAM. The recommended standards established based on item content expressed in the scale were as follows:
  - For Indicator 4A, know their rights, a measure of 539. The percent of families who reported that early intervention services helped them *know their rights* (Indicator 4A) was 71.6%. The 95% confidence interval for the true population percentage is 66.6% – 76.1%. This means that there is a 95% likelihood that the true value of the state percentage for Indicator 4A is between these two values.
  - For Indicator 4B, effectively communicate their children's needs, a measure of 556. The percent of families who reported that early intervention services helped them *help them effectively communicate their child's needs* (Indicator 4B) was 68.4%. The 95% confidence interval for the true population percentage is 63.3% - 73.1%.
  - For Indicator 4C, help their children develop and learn a measure of 516. The percent of families who reported that early intervention services helped them *help their child develop and learn* (Indicator 4c) was 83.8%. The 95% confidence interval for the true population percentage is 79.5% - 87.3%.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

- Responses were received from all twenty-one counties in New Jersey.
- Survey responses were received from 346 families, representing an 18.9% return rate (346/1834).
- The targets were achieved and exceeded for 4A, 4B and 4C.
- Survey results were shared with the SICC SPP/APR Committee on January 6, 2010 for their review and recommendations
- The following business rules were applied in the selection of families to receive the family survey.
  - Children must have been in the system for at least 9 months from referral; and
  - Children that had an active IFSP or exited early intervention 3 months or less from the population selection date.
- The analysis of NJEIS data using the above business rules identified a total population size of 3964 families as documented by the table below.

County Name	African American/ Not Hispanic	American Indian/ Alaskan Native	Asian/ Pacific Islander	Hispanic	White/ Not Hispanic	Grand Total
ATLANTIC	13		5	22	63	103
BERGEN	21	2	26	67	282	398
BURLINGTON	30		8	8	132	178
CAMDEN	54		5	41	145	245
CAPE MAY	4			5	22	31
CUMBERLAND	23			33	36	92
ESSEX	119	5	6	66	143	339
GLOUCESTER	15	2	3	4	138	162
HUDSON	20	1	15	91	45	172
HUNTERDON	1		2	4	36	43
MERCER	22		12	26	55	115
MIDDLESEX	16	2	45	85	141	289
MONMOUTH	23		4	34	209	270
MORRIS	7		15	33	136	191
OCEAN	13		3	51	473	540
PASSAIC	23		8	127	115	273
SALEM	4			3	22	29
SOMERSET	9	4	11	31	103	158
SUSSEX	3		1	3	52	59
UNION	29		2	65	136	232
WARREN	4		1	6	34	45
Grand Total	453	16	172	805	2518	3964

**Sampling Plan**

NJEIS conducted a two year analysis of historic NJEIS family survey data to identify a potential return rate in an effort to prevent a high margin of error. The NJEIS return rate in FFY 2006-2007 was 15%. Historically, Hispanic and African American (B/H) families have lower return rates than other race groups (W/A/AI). This difference was documented in the analysis of the 2005-2006 family survey return rates. Therefore, the NJEIS over sampled these two race groups. NJEIS population varies widely for each county. A minimum and maximum sample size was set to ensure that the sample size from small and densely populated counties was appropriately represented.

NJEIS not only wanted to examine the results from the overall population, but also wanted to understand the differences between key demographic subgroups within the population. In order to be certain to obtain a sample that is representative of the NJEIS population and based on analysis results from previous family surveys, NJEIS implemented the use of a county stratified random sampling without replacement, unequal allocation (Hispanic and African American (B/H) race group were pulled at higher percentages than other race groups (W/A/AI)). The detailed plan follows:

**Step 1: Target number of survey returns per county.**

- The sampling plan is a county stratified random sample without replacement, unequal allocation.
- The sampling rate is 10% with a minimal county stratum size of 20 and a maximum county stratum size of 75. This would be a sample size of 500.
- The margin of error (MOE) per county varied from 12% to 21%. The margin of error for 11 out the 21 counties is less than or equal to 18%.

**Step 2: Calculate outgoing sample.**

To compensate for a projected lower response rate from African American and Hispanic race groups, an additional sample was drawn in each of the county stratum. With a 30% expected return rate, the actual number of family surveys mailed was 1,834 for the NJEIS population of 3,964 as documented by the table below.

**Step 3: Analysis Weights**

Both stratification and differential response cause samples to deviate from representativeness and therefore weights were adjusted for both. As part of the analysis, a weight inverse was implemented to the:

- Sampling fraction (s.f.) (including all differentials in target n and field sampling rate (fsr)); and
- Response rate.

County Name	expected returns			sample out				total
	N	s.f.	MOE	W/A/AI	f.s.r.	B/H	f.s.r.	
ATLANTIC	20	19%	20%	44	65%	34	97%	78
BERGEN	40	10%	15%	104	34%	44	50%	148
BURLINGTON	20	11%	21%	52	37%	21	56%	74
CAMDEN	25	10%	19%	51	34%	48	51%	99
Cape May	20	65%	13%	22	100%	9	100%	31
CUMBERLAND	20	22%	19%	26	72%	56	100%	82
ESSEX	34	10%	16%	51	33%	93	50%	144
GLOUCESTER	20	12%	21%	59	41%	12	62%	71
HUDSON	20	12%	21%	24	39%	65	58%	88
HUNTERDON	20	47%	16%	38	100%	5	100%	43
MERCER	20	17%	20%	39	58%	42	87%	81
MIDDLESEX	29	10%	17%	63	33%	51	50%	114
MONMOUTH	27	10%	18%	71	33%	29	50%	100
MORRIS	20	10%	21%	53	35%	21	52%	74
OCEAN	54	10%	13%	159	33%	32	50%	191
PASSAIC	27	10%	18%	41	33%	74	49%	115
SALEM	20	69%	12%	22	100%	7	100%	29
SOMERSET	20	13%	20%	50	42%	25	63%	75
SUSSEX	20	34%	18%	53	100%	6	100%	59
UNION	23	10%	19%	46	33%	47	50%	92
WARREN	20	44%	16%	35	100%	10	100%	45
Grand Total	519	13%	4.0%	1101	41%	730	58%	1831

**Promotion of the Survey and Follow-Up**

Families mailed the completed survey directly to an outside agency to analyze the survey results. A unique child identification number was documented on each survey to allow for demographic analysis. The outside agency conducting the analysis only provided a listing of the child identification numbers of families responding to the survey back to the NJEIS. This enabled the NJEIS to conduct follow-up activities to obtain a representative sample. At no time did the outside agency share information with NJEIS on how any individual family responded.

To ensure NJEIS received the representative sample, the following was implemented:

1. In FFY 2007 the survey was redesigned to provide the impact questions on one form with English on one side and Spanish on the other side so that all families in the sample received the survey in both languages.
2. Families who had not identified English as their primary language were identified through the demographic data and the NJEIS would provide:
  - a. Families with a translated version of the survey (if available); or
  - b. Offer to conduct a phone survey with the family.
3. NJEIS over sampled two race groups (African American/Not Hispanic and Hispanic) who historically had been under-represented in previous survey results. Results are described in the table below.
4. In FFY 2008, NJEIS added an option for families to respond to the survey through the internet using a unique child identification number (PLINK number).
5. To improve response rates, the lead agency reviewed and verified family addresses with the Service Coordination Units prior to the initial mailing of the survey.
6. Returned mail and phone contacts with families resulted in a second survey mailed to a confirmed address.
7. The response rate was reviewed and it was determined that several counties were under represented based on the expected return rate.
8. Additional follow up surveys were conducted to the under-represented counties by having regional family support coordinators contact families and offer assistance to complete the survey by mail or through the internet.
9. Once there was sufficient response, the survey was closed.

Race/Ethnicity	Mailed	% Mailed	N Returned	% Returned	Difference Mailed - Returned	Dec 1 2008 Race	Dec 1 2008 Race %	Difference Return - Race
African American/ Not Hispanic	267	14.6%	41	11.8%	2.7%	1024	10.5%	1.4%
Am Indian/ Alaskan Native	3	0.2%	1	0.3%	-0.1%	26	0.3%	0.0%
Asian/Pacific Islander	67	3.7%	16	4.6%	-1.0%	459	4.7%	-0.1%
Hispanic	464	25.3%	65	18.8%	6.5%	2022	20.7%	-1.9%
White/Not Hispanic	1033	56.3%	221	63.9%	-7.5%	6255	63.9%	0.0%
Interracial	0	0.0%	1	0.3%	-0.3%	0	0.0%	0.3%
Missing	0	0.0%	1	0.3%	-0.3%	0	0.0%	0.3%
Total	1834	100%	346	100%		9786	100%	

Improvement Activities	Status
<p>Calculate the outgoing sample by county and race/ethnicity including as part of the analysis, apply a weight inverse to the sampling fraction (including all differentials in target number and field sampling rate); and response rate.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>For FFY 2008, 1,834 families were mailed surveys. The outgoing sample plan is described above.</p> <p>For FFY 2008, the characteristics of the respondents matched the race/ethnicity and population of NJEIS. The December 1, 2008 population by race matched the FFY 2008 survey race of respondents within +/- 1.9% which shows that the survey results represents the racial make-up of NJEIS's population.</p>
<p>Develop a letter to accompany the Family Survey co-signed by the Part C Coordinator and SPAN Co-Director.</p>	<p><b>Completed in 2006</b></p>
<p>Contract with a vendor to (1) print and distribute the NCSEAM Survey; (2) For completed surveys conduct scanning and data analysis.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>For FFY 2008, the NJEIS contracted with Piedra Data services to coordinate the preparation, mailing, return and analysis of the survey.</p>
<p>Contracted Vendor prints and mails to families the surveys including a unique child identification number that can be used to aggregate demographic data on responders and enable the NJEIS to ensure that a representative sample was achieved.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, 1,834 families were mailed surveys. The survey was coded with a unique identifier that allowed the NJEIS to aggregate demographic data on responders and conduct follow-up with non-responders.</p> <p>In FFY 2008, NJEIS conducted follow-up to obtain 27 additional survey responses from the following counties which were under represented based on the expected return rate: Essex (9), Hudson (3), Passaic (4), Camden (6) and Cumberland (5).</p>
<p>Families mail the completed survey directly to the Contracted Vendor for survey processing (opening, scanning, data verification). Families who have not identified English as their primary language can be identified through the demographic data and the NJEIS will provide the family with a translated version of the survey (if available), or phone survey the family utilizing SPAN (PTI) families to assist with the</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2007, the one page survey with the impact questions in English on one side and Spanish on the other side was utilized so that all families in the sample received the survey in both languages.</p> <p>In FFY 2008, NJEIS reviewed language information on all families in the sample and determined that only English and</p>

Improvement Activities	Status
completion of the survey.	<p>Spanish were necessary.</p> <p>In FFY 2008, approximately 15 families contacted SPAN with questions about the family survey and/or to get assistance in completing the survey. All families who contacted SPAN indicated that they intended to complete the survey.</p>
<p>Follow-up efforts: Contracted Vendor provides a listing of the child identification numbers of families responding to the survey back to the NJEIS for follow-up as needed to ensure a good return. At no time will the Contracted Vendor share information with NJEIS on how any individual family responded.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, fifty six (56) surveys were returned to DHSS-NJEIS as undeliverable. Staff followed up on all returned mail and were able to resend Twenty-nine (29) surveys to a corrected address.</p>
<p>Determine which families did not respond within a set time period and follow-up by mailing a reminder post-card and/or phone call.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, the lead agency conferred with the contracted vendor and NJEIS determined that there was not a sufficient return rate and therefore additional follow-up was performed prior to closing the survey.</p> <p>The higher response rate in FFY 2008 was likely due to: adding the internet survey option; the additional follow-up and; the pre-verification of the family addresses with the Service Coordination Units prior to mass mailing.</p>
<p>Database creation, data definition file, Rasch analysis and State-level report containing figures reportable for February 2008 APR.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, Piedra Data Services created the database, data definition file and Rasch analysis. Piedra contracted with Batya Elbaum, Ph.D. and Randall D. Penfield, Ph.D. to prepare the state report.</p>
<p>Provide targeted technical assistance as needed in counties with low response rates or disproportionate responses from subgroups of the total population served in NJEIS.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, survey results were representative of the population and once additional follow-up was completed, adequate responses were received from each county.</p> <p>In addition, the DHSS distributed the results of a county analysis for the three year period (SFY 07-09) to the service coordination units and early intervention providers and technical assistance continues to be provided as needed to</p>

Improvement Activities	Status
	continue to increase response rates.
<p>Review family outcome survey results and revise procedural safeguards training as needed to address concerns identified.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>The NJEIS compared the results of FFY 2007 to FFY 2008 survey results regarding Procedural Safeguards issues. The following are the results to the question of “Early Intervention has helped me and/or my family”:</p> <ul style="list-style-type: none"> <li>▪ “Know about my child’s and family’s rights concerning EI services” increased from 89% to 95% (6% increase);</li> <li>▪ “Feel that I can get the services and supports that my child and family need” increased from 87% to 93% (6% increase) and;</li> <li>▪ “Understand how the EIS works” increased from 92% to 95% (3% increase).</li> </ul> <p>The DHSS shared the above results and a county by county analysis for the three year period (SFY 07-09) to the Procedural Safeguards and CSPD coordinators to inform the need for training and technical assistance.</p>
<p>Provide information and guidance to Service Coordination Units and EIP agencies on identifying strategies that are supportive of families participating in early intervention services and designed to build upon family strengths and capacity to exercise their rights, effectively communicate their children’s needs and help their child learn and develop.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, survey results were discussed with the Part C Steering Committee on January 6, 2010 and reviewed with the SICC on January 22, 2010.</p> <p>In addition, the DHSS distributed the results of a county analysis for the three year period (SFY 07-09) to the service coordination units and early intervention providers to assist in the development of local improvement activities related to performance in family outcomes.</p> <p>Regional staff are expected to meet with administrators and service coordinators in county and regional groups to review the data and determine strategies for improvement in performance for this indicator. For example, in some counties the focus will be on effectively explaining family rights in addition to distributing those rights to families.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

Overview of the Annual Performance Report Development: See overview description on page one

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

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

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

#### Measurement:

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

FFY	Measurable and Rigorous Target
<b>2008</b> (2008-2009)	0.72 percent of infants and toddlers birth to 1 will have IFSPs

#### Actual Target Data for FFY 2008:

- A. For FFY 2008 (2008-2009), New Jersey served 0.57% (653/114,597) of infants, birth to one, with IFSPs, compared to the national average of 1.04% (45,166/4,359,268).

#### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

- Data used for comparison to the national average is from 2008 posted by OSEP at <http://spp-apr-calendar.rfcnetwork.org/explorer/view/id/793> as of December 2009.
- FFY 2008 status of 0.57% is 0.15% below the target of 0.72% as set by stakeholders for this reporting period.
- When compared with FFY 2007, the New Jersey state percentage of children birth to one year decreased by 0.08% (0.65% - 0.57%) while the national percentage decreased by 0.01% (1.05% - 1.04%).
- As of December 1, 2008, 0.57% of all infants less than 12 months of age were enrolled in NJEIS. 19.05% (4/21) of the twenty-one NJEIS counties met or exceeded the target of 0.72%.
- The total number of referrals of children, birth to age one year, received from July 1, 2008 through June 30, 2009 decreased by 9.25% (3,601 to 3,268) than the number received from July 1, 2007 through June 30, 2008.
- The number of referrals from July 1, 2008 through June 30, 2009 examined by age and outcome identified that 2.82% (3268/115,908) of live births (preliminary resident births as of January 2010) were referred to NJEIS. This is a 0.32% decrease compared to FFY 2007 (3.14%=3601/114,522)
- The ineligibility rate for children referred birth to age one decreased from 26% in FFY 2007 to 24% in FFY 2008.
- The number of initial IFSPs increased 2.9% from 9,106 in FFY 2007 to 9,374 in FFY 2008.
- One may theorize that although there was a 9.25% decrease in referrals, the referrals that were received were more appropriate as the ineligibility rate decreased 2% compared to FFY 2007. Also, as children were referred to DHSS in FFY 2008, more of the referrals received evaluation to determine eligibility; and of these, more referrals were found eligible and had a signed IFSP

implemented as documented by the December 1 2008 child count and increase in the numbers of Initial IFSPs in FFY 2008.

- The correction for prematurity in determining eligibility may be contributing to the ineligibility and lower birth to one rates. The Department received comment during the public comment period for NJ Rules that recommended eliminating the correction for prematurity a substantive change in rules. This change was viewed as a substantive change requiring additional public comment and will be issued as a proposed amendment to the rules. Any change could not be effective until next year.
- Effective July 1, 2008, the Department of Health and Senior Services (DHSS), New Jersey Early Intervention System (NJEIS) transitioned the System Point of Entry for the NJEIS from twenty-one county Service Coordination Units (SCUs) to four Regional Early Intervention Collaboratives (REICs). A statewide toll free number for referral replaced twenty-one local numbers. The toll free number is expected to improve child find since it will eliminate the need to constantly update and redistribute public awareness materials that were necessary in the past as telephone numbers changed. The Regional System Point of Entry (SPOEs) is responsible for the referral through eligibility determination.
- A statewide process to improve communication and awareness with primary health care providers was established with the change the regional SPOE service coordinator. The process includes requesting family consent to inform the primary health care provider of the child's developmental evaluation results. This is intended to improve appropriate referral of children to NJEIS.
- Eligible children are transitioned to an on-going service coordinator at a county SCU for a Family Information Meeting, Initial IFSP meeting, service(s) assignment, ongoing periodic/annual IFSP and transition. The transition of referral calls from the twenty-one counties to the Regional SPOEs occurred throughout FFY 2008 as the new toll free number was distributed and used by referral sources.

Age	FFY 2007 Referral	FFY 2008 Referrals	FFY 2008 % Growth	FFY 2007 Ineligible	FFY 2008 Ineligible
0 – 1	3,601	3,268	-9.25%	32%	30%
1 – 2	6,137	6,009	-2.09%	23%	20%
2 – 3	4,886	4,860	-0.53	25%	24%
<b>Total</b>	14,624	14,137	-3.33%	26%	24.0%

Improvement Activities	Status
Run and rank county performance on percentage of children birth to one served based on the December 1 count compared to county census data.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, county data ranged from a low of 0.32% to 1.10%. Twelve of twenty-one counties met or exceeded the 0.57% statewide average. The data are included in the Annual County Performance Reports.</p>
Select counties with low performance and prepare available data on these counties including referral sources, birth registry data, and diagnosed conditions.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>County data are prepared and shared with the REICs and SICC committees assigned to assist with this indicator.</p>

Improvement Activities	Status
<p>REICs work with identified counties to analyze data, locate community resources and develop targeted child find and public awareness plans to increase the percentage of children birth to one in the identified county.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, targeted child find plans were developed and implemented in selected counties by the four REICs. Outreach and child find events included: mailings, telephone communication, face-to-face meetings, and presentations to Division of Youth &amp; Family Services (DYFS), NICU, transitional housing facilities, federally funded qualified health clinics and libraries.</p>
<p>Continue ongoing meetings between NJEIS and the Division of Youth and Family Services (DYFS) to develop policy and procedures to ensure appropriate referral of children under Child Abuse Prevention and Treatment Act (CAPTA) and/or potentially eligible children.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008 the Department of Health and Senior Services and Department of Children and Families (DCF) continued to work through the DCF Training Academy to complete training protocols and implement training on CAPTA.</p>
<p>NJEIS and DYFS facilitation of regional and local collaboration with Child Welfare Planning Councils.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>REICs conducted outreach to eight (8) DYFS district offices through presentations and discussion meetings with 580 attendees.</p>
<p>Collaborate with SPANs NICU Project to provide information to families about early intervention.</p>	<p style="text-align: center;"><b>Completed FFY 2006</b></p>
<p>Collaborate with the Family Support Committee of the SICC on activities to increase early identification and referral to NJEIS.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, the Lead agency and REIC staff continued to work with the SICC Family Support Committee on child find awareness including an EI week held in May to increase public awareness.</p> <p>Family Support Coordinators completed the annual review and updated a community and statewide resources listing for families posted on the NJEIS.org website.</p> <p>The REIC Family Support Coordinators continued to work with the Family Support Committee of the SICC to:</p> <ul style="list-style-type: none"> <li>• To discuss regional strategies used to reach out to child care providers and NICUs.</li> <li>• Set up business meetings with the Departments of Pediatrics in the major hospitals.</li> </ul> <p>In addition, the DHSS provided the REICs a comprehensive listing of NJ physicians used to conduct a mailing to advise physicians on the</p>

Improvement Activities	Status
	change in system point of entry and increase referral of children that may be eligible for early intervention.
Complete two Physician Trainings through the State Improvement Grant to encourage early identification and referral of children to NJEIS.	<b>Completed FFY 2005</b>
Explore opportunities to collaborate with a NJ Immigration Project (NJIPN) that is reaching out to, collecting information on, and conducting outreach to immigrant families and health services.	<p style="text-align: center;"><b>Ongoing Activity</b></p> <p>The application that SPAN and the NJ Immigration Policy Network submitted in FFY 2007 was not selected for funding by the Robert Wood Johnson NJ Health Initiatives program. However in FFY 2008, SPAN submitted an application with the NJ Hospital Association for funding from the US Department of Health and Human Services to do outreach to immigrant families in 9 counties in NJ around access to health care and other needed services. This project was funded in FFY 2009 and commenced in October 2009.</p>
Plan presentations at grand rounds and business meetings of hospitals statewide.	<b>Completed FFY 2006</b>
Conduct a session at St. Joseph's Hospital in Paterson, an inner city community with typically underserved populations. Links are being forged with the Pediatric Council on Research and Education (PCORE), the charitable foundation of the American Academy of Pediatrics/NJ Chapter (AAP/NJ).	<b>Completed FFY 2006</b>
Develop training that will be implemented at physician's offices for office staff that meet the needs of patients and families. This will include the exploration of a link with the ongoing EPIC Children's Futures project, in which PCORE participates, addressing the developmental and psychosocial needs of children 0-3 years of age in the city of Trenton.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008 NJEIS began participating with the American Academy of Physicians NJ Chapter Committee on Youth in Foster Care and Out of Home Placements through PCORE. The committee is developing a statewide plan that focuses on increasing primary care physicians awareness and communication with Child Health Programs. This includes planning to help educate physicians, residents, DYFS workers, etc. through grand rounds in hospitals and access to information through websites and newsletters.</p> <p>In addition, the NJEIS Autism Project Specialist is serving on the advisory council to the PCORE EPIC Autism project. This project is working directly with 28 pediatric practices in Monmouth and Ocean counties to focus on the early</p>

Improvement Activities	Status
	identification and referral of children with autism and to help these primary care practices connect families with resources and supports.
Explore collaboration with ongoing home visiting training projects through Prevent Child Abuse and NJ Academy for Home Visitation Training regarding screening and potential referrals to NJEIS.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> NJEIS continues to work with PCORE and Department of Children and Families to develop and implement statewide agreed upon training curriculum and technical assistance for DYFS and NJEIS practitioners.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

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

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

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

**Measurement:**

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

FFY	Measurable and Rigorous Target
<b>2008</b> (2008-2009)	2.55 percent of infants and toddlers birth to 3 will have IFSPs

**Actual Target Data for FFY 2008:**

For FFY 2008 (2008-2009), New Jersey served 2.93% (9,786/334,284) of infants and toddlers, birth to three, with IFSPs, compared to the national average of 2.66% (342,544/12,901,038).

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

- Data used for comparison to the states with similar eligibility and the national average is from 2008 as posted by OSEP at <http://spp-apr-calendar.rrfcnetwork.org/explorer/view/id/793> as of December 2009.
- New Jersey exceeded the target of 2.55% by 0.38% for this indicator as set by stakeholders for this reporting period.
- When compared to FFY 2007, the percentage of infants, birth to three, with IFSPs in New Jersey increased by 0.09% (2.84% - 2.93%).
- The total number of children enrolled in NJEIS on December 1, 2008 (9,786) increased by 397, 4.2% from December 1, 2007 (9,389).
- The total number of referrals birth to three years received July 1, 2008 through June 30, 2009 decreased by 487, 3.33% (14,624 to 14,137).
- 71.43% (15/21) of NJEIS counties met or exceeded the target of 2.55%
- Effective July 1, 2008, the Department of Health and Senior Services (DHSS), New Jersey Early Intervention System (NJEIS) transitioned the System Point of Entry for the NJEIS from twenty-one county Service Coordination Units (SCUs) to four Regional Early Intervention Collaboratives (REICs). A statewide toll free number for referral replaced twenty-one local numbers. The toll free number is expected to improve child find since it will eliminate the need to constantly update and redistribute public awareness materials that was necessary in the past as telephone numbers changed. The Regional System Point of Entry (SPOEs) are responsible for the referral through eligibility determination. Eligible children are transitioned to an on-going service coordinator at a county SCU for a Family Information Meeting, Initial IFSP meeting, service(s) assignment, ongoing periodic/annual IFSP and transition. The transition of referral calls from the twenty-one

counties to the Regional SPOEs occurred throughout FFY 2008 as the new toll free number was distributed and used by referral sources.

Improvement Activities	Status
Run and rank county performance on percentage of children birth to three served based on the December one count compared to county census data.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008, a ranking of the December 2008 child count compared to 2008 census data was completed.
Select counties with low performance and prepare available data on these counties, including referral sources, birth registry data, and diagnosed conditions.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008, County data were prepared and shared with the REICs and SICC committees assigned to assist with this indicator.
REICs work with identified counties to analyze data, locate community resources and develop targeted child find and public awareness plans to increase the percentage of children birth to three in the identified county.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> Targeted child find plans were developed and implemented by the four REICs. Outreach and child find events included: mailings, telephone communication, face-to-face meetings, and presentations to DYFS, NICUs, federally funded health clinics, child care staff, head start/early head start and libraries. Public awareness included participation in numerous health fairs and events for pregnant teens/moms.
Continue ongoing meetings between NJEIS and the Division of Youth and Family Services (DYFS) to develop policy and procedures to ensure appropriate referral of children under Child Abuse Prevention and Treatment Act (CAPTA) and/or potentially eligible children.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> REICs conducted outreach to eight (8) DYFS district offices through presentations and discussion meetings with 580 attendees.
NJEIS and DYFS facilitation of regional and local collaboration with Child Welfare Planning Councils.	<p align="center"><b>Completed FFY 2006</b></p>
Collaborate with the Family Support Committee of the SICC on activities to increase referral to NJEIS.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008, the Lead agency and REIC staff continued to work with the SICC Family Support Committee on child find awareness including an EI week held in May to increase public awareness.  Family Support Coordinators completed the annual review and updated a community and statewide resources listing for families posted on the NJEIS.org website.

Improvement Activities	Status
	<p>The REIC Family Support Coordinators continued to work with the Family Support Committee of the SICC to:</p> <ul style="list-style-type: none"> <li>• To discuss regional strategies used to reach out to child care providers and NICUs.</li> <li>• Set up business meetings with the Departments of Pediatrics in the major hospitals.</li> </ul> <p>In addition, the DHSS provided the REICs, a comprehensive listing NJ physicians used to conduct a mailing to advise physicians on the change in system point of entry and increase referral of children that may be eligible for early intervention.</p>
<p>Complete two physician trainings through the State Improvement Grant to encourage referral of children to NJEIS.</p>	<p style="text-align: center;"><b>Completed FFY 2006</b></p>
<p>Expand use of bilingual service coordinator associates (SCAs-paraprofessionals) to facilitate communication with families who are non-English-speaking.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>During FFY 2008 regional System Point of Entry included hiring of bi-lingual SPOE service coordinators, provided additional bi-lingual staff already located at REIC offices and contracting with "language line" services for more immediate access to an interpreter while a family is on the telephone.</p>
<p>NJEIS Autism Project Specialist follows national research and incorporates the information into NJEIS recommended practice for the early identification of children on the autism spectrum.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, the DHSS-NJEIS continued to employ a full time Autism Project Specialist that advises and serves as a resource to the NJEIS, Department of Health and Senior Services and Governor's Office.</p> <p>The Autism Project Specialist is appointed by the Commissioner of DHSS to serve a three year term on the Governor's Council for Medical Research and Treatment of Autism. In addition the Autism Project Specialist was selected as the Commissioner's designee to the NJ Adults with Autism Task Force.</p> <p>The Service Guidelines for Children with Autism in the NJEIS are under revision to reflect systemic and best practice changes since the initial publication in 2003.</p> <p>NJ legislation in 2007 required the DHSS-NJEIS to create guidelines for use by healthcare professionals in NJ to improve the early identification and referral of children with or suspected of having autism. This included</p>

Improvement Activities	Status
	<p>a revision to the DHSS Special Child Health Needs Registry, which now includes mandatory autism reporting.</p> <p>The Autism Project Specialist continued to provide technical assistance, as needed, to practitioners and families to assist with the development of appropriate IFSPs.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

Overview of the Annual Performance Report Development: See overview description on page one

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

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

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

#### Measurement:

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

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

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100% of eligible infants and toddlers with IFSPs will have an evaluation and assessment and an initial IFSP meeting conducted within Part C's 45-day timeline.

#### Actual Target Data for FFY 2008:

For FFY 2008, 91.59% (305/333) (of eligible infants and toddlers with IFSPs received an evaluation and assessment and had an initial IFSP meeting conducted within Part C's 45-day timeline. Family reasons were included in both the numerator and denominator.

274 children received an evaluation and assessment and had an initial IFSP meeting conducted within the Part C 45 day timeline. An additional 31 children had delays in their initial IFSP meeting due to family reasons. Therefore, 305 (274+31) of 333 children had a timely initial IFSP meeting as monitored by the lead agency through the procedures described below.

#### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

- NJEIS performance for this indicator decreased 1.18% from 92.77% in FFY 2007 to 91.59% in FFY 2008.
- The NJEIS database includes the referral, evaluation and IFSP dates for each child. Edit checks for missing data that prohibits data entry to proceed if missing critical data (i.e. Initial IFSP Meeting date cannot be entered if missing eligibility determination). If the period between the referral and IFSP is greater than 45 days the database requires a delay reason. This data is then used to conduct the monitoring desk audit.

- Sampling methodology for the twenty-one counties was implemented to ensure that the NJEIS population which varies widely for each county, is appropriately represented based on the population size of the county. Therefore, a county stratified random sampling plan with a 95% confidence level and +/- 5 confidence interval ensures that child records from both small and densely populated counties are appropriately represented.
- Monitoring begins with a data desk audit based on a stratified random sample of three months of FFY 2008 data. This included inquiry where the monitoring team conducted a drill down to obtain child specific information, reasons for delays and verification of an initial IFSP meeting, although late. The service coordination units and EIP Targeted Evaluation Teams (TETs) were asked to submit copies of child progress notes, and service encounter verification logs. The monitoring team used all the information received and reviewed service claim data to determine where in the process the delay occurred and who was responsible.
- Data reported for this indicator are taken from the NJEIS data system and reflect actual days from the date of referral to the date of the initial IFSP meeting for every eligible child for whom an initial IFSP meeting was required to be conducted.
- Of the 2,481 children for whom an initial IFSP meeting was required to be conducted during the months of August, September and October of 2008, data from a random selection of 333 children were monitored. Of the 333, 305 of the IFSPs were in compliance with the 45 calendar day requirement, including the 31 initial IFSP meetings that were delayed because of family reasons.
- The 31 family-initiated reasons were included in the calculations and documented in service coordinator notes and NJEIS data system. Family reasons include family moving, child illness or hospitalization, family response time, failure to attend scheduled appointments, and family requested delays related to the parent's work schedule.
- 28 IFSP meetings were delayed for systems reasons. Ten (3.0%) delays resulted from untimely evaluation, fifteen (4.5%) were due to service coordination delay and three (0.9%) were due to a Regional Early Intervention Collaborative (REIC) delay.
- All 28 children who were delayed for system reasons received their initial IFSP meeting although late. The range of days delay included: eight (8) children received their IFSP meeting 1-5 days late; ten (10) children received their IFSP meeting 6-15 days late and: ten (10) children received their IFSP meeting greater than 16 days.
- It is important to note that six (6) agencies performed at less than 80% compliance for this indicator, significantly impacting statewide performance. Three (3) of these six agencies were still under a CAP from previous years when the monitoring for FFY 2008 was completed. Therefore, the data from these three agencies reflected previously identified noncompliance that was currently under correction.
- Based on FFY 2008 APR monitoring data, four agencies were issued findings and corrective action plans in FFY 2009. All four CAPs were successfully completed, correction verified and the CAPs were closed by November 2009.
- In July 2008, the Single Point of Entry (SPOE) was moved out of the SCU and placed at the four REICs so that the referral to eligibility steps occurs through the REIC. At that point, children who are found eligible are identified to the SCU to initiate the IFSP meeting.
- The four REICs gradually assumed responsibility for system point of entry (SPOE) of each county over a 9 month period except for the Northeast REIC which took on all three counties within their region immediately.
- The immediate change of SPOE to the Northeast REIC resulted in some temporary delay in fully implementing procedures to conduct timely initial IFSPs. As a result the REIC was issued a finding and received a CAP. Once the necessary procedures were developed and implemented, correction was verified and the CAP was closed within three (3) months.
- An additional finding on this indicator was identified through a focused monitoring that included a review of informal contacts to the Procedural Safeguards Office for this agency. As a result, data for this indicator was reviewed and a finding and CAP was issued on 2/17/09. The agency remains under a corrective action plan and reports monthly to the DHSS-NJEIS.

**Correction of Previous Noncompliance as Required in the OSEP Response Table**

- NJEIS is reporting on six findings issued in FFY 2007. Three were related to APR FFY 2007 submitted on February 1, 2009 and three findings were related to APR FFY 2006 submitted on February 1, 2008.
- Based on FFY 2007-2008 monitoring data, findings and corrective action plans (CAPs) were issued to three counties.
- One of the three CAPs was successfully completed, correction verified and the CAP closed within twelve months of the identification of the finding.
- Of the two remaining CAPs that did not correct timely, one was corrected within 13 months (7/9/09) and one was corrected in 14 months (8/5/09).
- NJEIS closed within twelve months, three findings and CAPs for FFY 2006-2007 data year issued on 9/18/07.
- NJEIS has:
  1. Accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and in some instances onsite data verification. The DHSS confirmed that services were initiated for each child, although late as verified by the monitoring team through claims data, service encounter verification sign-off, and progress notes.
  2. Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
  3. Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the correction action plan required the agency to establish and/or revise appropriate policies, procedures and/or practices.
  4. The DHSS ensures that each agency with identified non-compliance is correctly implementing the specific regulatory requirements as verified through monthly corrective action plan reports and updated 45 day timeline data.

Improvement Activities	Status
Track progress of individual referrals through SPOE data and as necessary address potential delays.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>The REIC's used internal procedures including a spreadsheet to track all data points from referral to IFSP.</p> <p>In FFY 2008, the NJEIS lead agency and REICs continued to review referral data through the state database and, as needed, addressed potential delays. As a part of this activity, the REICs review referral data which tracks all children referred, including: demographic information; timelines for referral, evaluation, eligibility and documentation of special circumstances to ensure compliance with the 45 day timeline.</p>
Complete a competitive Request for Proposal to increase the number of Targeted Evaluation Teams (TETs) and ensure back-up TETs in each county.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>A competitive Targeted evaluation team (TET) request for proposal (RFP) was finalized in FFY 2006. In FFY 2008, no RFP release was deemed necessary.</p>

Improvement Activities	Status
<p>Conduct monitoring activities on the 45 day requirement annually including a desk audit, conduct inquiry to obtain additional information from counties, issue findings of noncompliance if necessary, implement corrective action plans, provide technical assistance, and assure correction of noncompliance in accordance with federal requirements.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>The desk audit on the 45 day requirement was conducted based on August, September and October 2008 data. Corrective Action Plans were issued and correction was verified.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

<p><b>Monitoring Priority: Effective General Supervision Part C / Effective Transition</b></p>
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**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)

<p><b>Measurement:</b></p>
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- |   |
|---|
| <p>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.</p> <p>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.</p> <p>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.</p> |
|---|

Account for untimely transition conferences, including reasons for delays.

FFY	Measurable and Rigorous Target
<b>2008</b> (2008-2009)	A. 100% of all children exiting Part C will receive timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including IFSPs with transition steps and services.
	B. 100% of all children exiting Part C will receive timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including notification to LEA, if child is potentially eligible for Part B.
	C. 100% of all children exiting Part C will receive timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including a transition conference, if the child is potentially eligible for Part B.

**Actual Target Data for FFY 2008:**

Indicator 8A

For FFY 2008, 99.7% (366/367) of all children exiting Part C received timely transition planning to support their transition to preschool and other appropriate community services by their third birthday including IFSPs with transition steps and services.

- 366 children of 367 children's IFSPs contained transition steps and services as monitored by the lead agency through the procedures described below.

#### Indicator 8B

For FFY 2008, 99.7% (281/282) of all children exiting Part C and potentially eligible for Part B received timely transition planning to support their transition to preschool and other appropriate community services by their third birthday including notification to the local education agency (LEA).

- 281 children of 282 children exiting Part C had notification to the LEA as monitored by the lead agency through the procedures described below.

#### Indicator 8C

For FFY 2008, 92.7% (217/234), of all children exiting Part C received timely transition planning to support their transition to preschool and other appropriate community services by their third birthday including a transition conference, if child potentially eligible for Part B. Family reasons were included in both the numerator and denominator.

- 217 children of 234 children had a timely Transition Planning Conference as monitored by the lead agency through the procedures described below. This includes 41 conferences which were delayed due to family reasons.
- 52 families did not provide approval to conduct the transition conference and were not included in the numerator or denominator.

#### **Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

- Data were reported for all twenty-one counties.
- Data reported for 8A and 8B were collected through the annual self-assessment record review process. The DHSS-NJEIS requires that local agencies institute self-improvement plans based on self-identified findings for these indicators and ensures that the local agencies demonstrate 100% compliance by January through the improvement plan. Agencies that do not self correct and demonstrate 100% compliance by January are issued corrective action plans by DHSS-NJEIS for correction within twelve months of the initial self-identified findings submitted for September 1, 2009.
- 8C was obtained through a desk audit and inquiry using the NJEIS data system and record reviews.

#### **Indicator 8A**

- NJEIS made progress on this indicator moving from 99.2% reported for FFY 2007 to 99.7% for FFY 2008.
- Self-assessment data were reported for twenty-one counties during the FFY 2008.
- The 99.7% calculation is based on 366/367 records in compliance.
- By September 2009 one county self-identified non-compliance and implemented improvement plans. The county was required to report monthly to the REICs and correct non-compliance by January 1, 2010. As of January 2010, the county did document 100% compliance. The county was not issued a finding or corrective action plan by DHSS-NJEIS.

#### **Correction of Previous Noncompliance as Required in the OSEP Response Table**

- NJEIS verified through monthly reports provided by the local county to the REIC that two (2) counties with less than 100% compliance were successful in achieving 100% compliance. The REICs reported to the DHSS-NJES verification of correction by January 2009, therefore no finding was issued by the lead agency.
- The DHSS ensures that both agencies with the self-identified non-compliance are correctly implementing the specific regulatory requirements as verified through monthly improvement reports and record reviews.

#### **Indicator 8B:**

- Self-assessment data were reported for twenty-one counties during FFY 2007.
- The 99.7% calculation is based on 281/282 records in compliance.
- NJEIS made progress on this indicator moving from 98.7% reported for FFY 2007 to 99.7% for FFY 2008.
- By September 2009 one county self-identified non-compliance and implemented improvement plans. The county was required to report monthly to the REICs and correct non-compliance by January 1, 2010. As of January 2010, the county did document 100% compliance. The county was not issued a finding or corrective action plan by DHSS-NJEIS.

**Correction of Previous Noncompliance as Required in the OSEP Response Table**

- NJEIS verified through monthly reports provided by the local county to the REIC that two (2) counties out of three with less than 100% were successful in achieving 100% compliance. The REICs reported to the DHSS-NJES verification of correction by January 2009, therefore no finding was issued by the lead agency.
- The remaining county was issued a finding and CAP by the DHSS-NJEIS when correction was not verified by January 2009. The county was successful in achieving 100% correction of the non-compliance within 6 months (July 2009) as verified by the DHSS-NJEIS through monthly reports and current data.

**Indicator 8C:**

- NJEIS performance for this indicator slipped from 95.0% in FFY 2007 to 92.7% in FFY 2008.
- The NJEIS uses two sources of data from the database 1) the authorization date of the TPC obtained from the team page signed by the parent and 2) the date of the TPC recorded from the service coordinator verification log. The monitoring team confirms this data through desk audit analysis. Based on these dates, and the child's date of birth, an inquiry is prepared for the county to identify possible non-compliance.
- Sampling methodology was implemented to ensure that the NJEIS population, which varies widely for each county, is appropriately represented based on the population size of the county. Therefore, a county stratified random sampling plan with a 95% confidence level and +/- 5 confidence interval ensures that child records from both small and densely populated counties are appropriately represented.
- Monitoring begins with a data desk audit based on a stratified random sample of three months (March, April and May 2009) of FFY 2008 data. This included inquiry where the monitoring team conducted a drill down to obtain child specific information, reasons for delays and verification of a transition planning conference, although late. The service coordination units were asked to submit copies of child progress notes; IFSP and service encounter verification logs. The monitoring team used all the information received and reviewed service claim data to determine where in the process the delay occurred and who was responsible.
- For FFY 2008, 92.7% (217/234) of all children exiting Part C received timely transition planning to support their transition to preschool and other appropriate community services by their third birthday including a transition conference, if the child was potentially eligible for Part B. The numerator and denominator do not include the 52 families who did not provide approval to conduct a transition planning conference. The 217 timely transition planning conferences include 41 TPCs which were delayed for family reasons.
- Data were reported for all twenty-one counties.
- A data desk audit was conducted on 286 children that turned 3 during March, April and May of FFY 2008.
- Out of the 286 children, 52 families declined the TPC, reducing the total number of records monitored to 234 children.
- Of the 234 children, 176 were timely, 41 were delayed due to family reasons and 17 untimely due to NJEIS. Family reasons were included in both the numerator and denominator.
- Ten of the 17 children who were delayed for system reasons received their TPC although late. The range of delay was: 2 children 1-5 days late; 3 children 6-20 days late; 3 children 21-45 days

late and; 2 children more than 45 days late. The remaining seven (7) children exited the system prior to receiving a TPC.

- The 41 family-initiated reasons were included in the calculations and documented in service coordinator notes. Family reasons include family vacations, family out of the country, child illness or hospitalization, family response time, family failure to attend scheduled appointments, and family requested delays.
- Based on FFY 2008 monitoring data, six counties were issued corrective action plans.
- The CAPs for two counties were successfully completed, correction verified and the CAPs were closed by December 2009. The remaining counties are making progress as of January 2010 and are scheduled to achieve 100% compliance within twelve months of the identified finding.
- An additional finding on this indicator was identified through a focused monitoring visit that included a review of informal contacts to the Procedural Safeguards Office for this agency. As a result, data for this indicator was reviewed and a finding and CAP was issued on 11/14/08. The agency was successful in achieving 100% correction of the noncompliance within six months under a corrective action plan with DHSS-NJEIS on 5/20/09.

**Correction of Previous Noncompliance as Required in the OSEP Response Table**

- NJEIS is reporting on seven findings issued in FFY 2007. Four were related to APR FFY 2007 submitted on February 1, 2009 and three findings were related to APR FFY 2006 submitted on February 1, 2008.
- NJEIS ensures that the seven counties with identified non-compliance for this indicator, were successful in achieving 100% correction of the non-compliance within twelve months under a corrective action plan with DHSS-NJEIS.
- NJEIS has:
  1. Accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and in some instances onsite data verification. The DHSS confirmed that services were initiated for each child, although late as verified by the monitoring team through claims data, service encounter verification sign-off, and progress notes.
  2. Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
  3. Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the correction action plan required the agency to establish and/or revise appropriate policies, procedures and/or practices.
  4. The DHSS ensures that that each agency with identified non-compliance is correctly implementing the specific regulatory requirements as verified through monthly corrective action plan reports and updated TPC data.

Improvement Activities	Status
Conduct monitoring activities on the transition planning conference requirements and exiting data annually including a desk audit, conduct inquiry to obtain additional information from counties, issue findings of noncompliance if necessary, implement corrective action plans, provide technical assistance and assure correction of noncompliance in accordance with federal requirements.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008, the desk audit on the TPC requirement was conducted based on March, April and May children exiting the NJEIS at age three. Corrective Action Plans were issued requiring 100% compliance as soon as possible but no later than one year.
Revise the self assessment tool to collect LEA notification information.	<p style="text-align: center;"><b>Completed FFY 2006</b></p>

Improvement Activities	Status
Track transition activities through monthly self-assessment record reviews and as necessary address issues for improvement.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, contracted agencies conducted monthly self-assessment record reviews and, as necessary, initiated improvement plans. The annual self-assessment results were reported to the REICs in September 2009.</p>
Conduct review of self-assessment data and any county developed improvement plans annually, conduct inquiry to obtain additional information from counties, issue findings of noncompliance if necessary, implement corrective action plans, provide technical assistance, and assure correction of noncompliance in accordance with federal requirements.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>Agencies requiring correction from FFY 2008 self-assessment related to transition activities were required to submit monthly self-assessment findings to REICs for up to the first six months (due January 2010) as a sanction. REICs tracked improvement and advised the lead agency that no additional sanctions were needed.</p>
Enhance SPOE to allow REICs and Service Coordination Units to run reports to track status of transition planning conferences.	<p align="center"><b>Completed In FFY 2008</b></p> <p>The NJEIS completed work with Covansys to improve the current SPOE Software to collect additional information related to the LEA notification and family "opt-out" option and Transition Planning Conference (TPC). This additional information will assist the NJEIS in ensuring appropriate notice is provided and assists the NJEIS monitoring staff to drill down on data during data desk audits, inquiries and verification of correction.</p>
When the enhancement to SPOE is completed, track transition planning conference data through SPOE data report and as necessary address potential issues in meeting the requirements.	
Create and implement a Transition Planning Page for the IFSP form and process.	<p align="center"><b>Completed FFY 2006</b></p>
Continue availability of workshops for families at the regional collaborative offices and transition trainings conducted in collaboration between Parts B & C.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, Part B/C collaborative workshops, "Turning Three-Transition from Early Intervention Services", were conducted:</p> <ul style="list-style-type: none"> <li>▪ 51 transition to preschool presentations were provided to families – 444 attendees including one training in Spanish with 18 participants.</li> <li>▪ 9 presentations were provided to school personnel &amp; EI personnel – 388 attendees</li> <li>▪ Development of an on-line webinar on transition for families was initiated and scheduled for implementation in FFY 2009.</li> </ul>

Improvement Activities	Status
<p>Plan for and conduct a statewide training on Transition requirements.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>This activity has been delayed awaiting final Part B and C regulations, and due to clarifications on transition responsibilities released by OSEP in December 2009. The revised timeline for this activity is FFY 2010.</p> <p>In FFY 2008 the NJEIS convened a Transition Training Workgroup to develop a full day interactive training focused on all transitions that may occur while a family is involved with the NJEIS. The Workgroup included CSPD, REIC Training &amp; Technical Assistance Coordinators, Family Support Coordinators, and Monitoring staff.</p> <p>The transition training was reviewed with Part B and C staff to obtain feedback prior to statewide implementation. Regional trainings are pending completion of clarifications on the OSEP Transition FAQ issued in December 2009.</p>
<p>Revise and disseminate the Transition Handbook for families.</p>	<p style="text-align: center;"><b>In progress</b></p> <p>This activity has been delayed awaiting final Part B and C regulations, and due to clarifications on transition responsibilities released by OSEP in December 2009.</p>
<p>Discuss with NJDOE-OSEP the opportunity for collaboration between the Part C and Part B stakeholders regarding transition activities and issues.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>NJEIS and NJDOE-OSEP continued a longstanding collaboration regarding transition activities and issues. A workgroup comprised of regional Parts B and C trainers is led by the NJEIS CSPD and 619 Coordinators. Relationships and plans are solidified so that state meetings are only necessary annually. Regional representatives handle issues as they arise, plan trainings, and conduct county meetings. Ongoing local meetings and networking between EI and special education staff have decreased the number of issues and especially those that needed to rise to the state monitoring or procedural safeguards complaint level.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

### Part C State Annual Performance Report (APR) for FFY 2008

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

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

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

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

#### Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

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

FFY	Measurable and Rigorous Target
FFY 2008	100%

#### Actual Target Data for FFY 2008:

(93.1% =  $[27/29 * 100]$ )

#### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2008:

Annually, NJEIS monitors all agencies (service coordination units, early intervention program providers and targeted evaluation teams) through a variety of monitoring activities. These activities include: focused on-site monitoring, data desk audits, self assessments, dispute resolutions and fiscal monitoring. Selection of agencies for specific monitoring activities is based on performance and is described in the state performance plan.

For FFY 2008:

- Verification of correction was completed for 27 out of 29 findings within the one year requirement.
- For the remaining two findings verification of correction was completed:
  - One county corrected in 13 months as of 7/9/09.
  - One county corrected in 14 months as of 8/5/09.

**Correction of FFY 2007 Findings of Noncompliance Timely Corrected (corrected within one year from identification of the noncompliance):**

1. Number of findings of noncompliance the State made during FFY 2007 (the period from July 1, 2007 through June 30, 2008) (Sum of Column a on the Indicator C 9 Worksheet)	<b>29</b>
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C 9 Worksheet)	<b>27</b>
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>2</b>

**Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):**

4. Number of FFY 2007 findings not timely corrected (same as the number from (3) above)	<b>2</b>
5. Number of findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	<b>2</b>
6. Number of findings <u>not</u> yet verified as corrected [(4) minus (5)]	<b>0</b>

**Actions Taken if Noncompliance Not Corrected**

*For FFY 2007 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance*

NJEIS has verified correction for all findings made in FFY 2007.

**Verification of Correction (either timely or subsequent)**

The process NJEIS uses to verify correction is comprehensive with data drill down to the child specific level, monthly updated data is used to track and verify correction of all noncompliance. Activities for documentation and verification of the correction include updated data from database; faxed copies of progress notes and IFSPs from child records; verification of claims and service authorization data; and in some cases on-site visits to verify child records. Specific verification activities for each indicator are provided in the narrative under each indicator in this APR.

NJEIS has:

1. Accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and in some instances onsite data verification. The DHSS confirmed that services were initiated for each child, although late as verified by the monitoring team through claims data, service encounter verification sign-off, and progress notes.
2. Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
3. Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the correction action plan required the agency to establish and/or revise appropriate policies, procedures and/or practices.
4. The DHSS ensures that that each agency with identified non-compliance is correctly implementing the specific regulatory requirements as verified through monthly corrective action plan reports and updated 45 day timeline data.

**Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable)**

*For FFY 2006 findings for which the State has not yet verified correction, explain what the State has done to identify the root cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance, including, as appropriate, enforcement actions taken against an EIS program that continues to show noncompliance.*

NJEIS had no remaining unverified findings of noncompliance from FFY 2006.

If the State reported <100% for this indicator in its FFY 2006 APR and did not report that the remaining FFY 2006 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2006 findings noted in OSEP's June 1, 2009 FFY 2007 APR response table for this indicator	0
2. Number of remaining FFY 2006 findings the State has verified as corrected	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	<b>0</b>

**INDICATOR C-9 WORKSHEET**

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	9	9	9
	Dispute Resolution: Complaints, Hearings	0	0	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
5. Percent of infants and toddlers birth to 1 with IFSPs  6. Percent of infants and toddlers birth to 3 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	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 Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	6	6	4 1 corrected 8/5/09 (14 mos.) 1 corrected 7/9/09 (13 mos.)
	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 Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	5	5	5
	Dispute Resolution: Complaints, Hearings	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:  B. Notification to LEA, of child potentially eligible for Part B; and	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	2	2
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:  C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	7	7	7
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 through 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 through 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings			
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
<b>Sum the numbers down Column a and Column b</b>			29	27

Percent of noncompliance corrected within one year of identification =  $27/29 \times 100 = 93.1\%$   
(column (b) sum divided by column (a) sum) times 100

**Improvement Activities/Timelines/Resources:**

Improvement Activities	Status
Conduct Annual Desk Audits with SPOE data to identify potential non-compliance, conduct inquiry to obtain additional information as needed, issue findings of noncompliance if necessary, implementation of corrective action plans, provide technical assistance, and assure correction of noncompliance in accordance with federal requirements.	<b>Ongoing Activity 2006-2011</b> Desk audits and inquiries were conducted in FFY 2008 that identified non-compliance and initiation of corrective action plans. In addition, corrective action plans issued during FFY 2007 were tracked to ensure completion.
Conduct Incident Report inquiry with provider agencies to determine if individual child/family issues raised with the Procedural Safeguards Office are indicative of a systemic problem and, if yes, cite a finding of noncompliance, implement a corrective action plan, provide technical assistance, and assure correction of noncompliance in accordance with federal requirements.	<b>Ongoing Activity 2006-2011</b> During FFY 2008, one hundred and fifty-three (153) families received approximately 1,155.25 hours of compensatory services in accordance with NJEIS decisions through informal resolution by the Procedural Safeguards Office. This included 273.75 hours of developmental intervention; 567.75 hours of Speech & Language Therapy; 86.25 hours of Physical Therapy; and 223.50 hours of Occupational Therapy. Three informal resolutions resulted in sanctions to three Early Intervention Program (EIP) provider agencies that were

Improvement Activities	Status
	required to provide 31.5 hours of compensatory services at their expense.
Identify potential non-compliance issues through annual self-assessment data analysis, conduct inquiry to obtain additional information as needed, issue findings of noncompliance if necessary, implement corrective action plans, provide technical assistance, and assure correction of noncompliance in accordance with federal requirements.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, self-assessment identified one county that required correction for findings in 8a and 8b. The county was required to submit monthly self-assessment reports on an improvement plan to the REIC through December 2009 to track correction. Verification of the county corrections for both 8a and 8b were timely.</p> <p>REICs provided technical assistance (TA) to the county SCU targeted for SCU administrators and service coordinators</p>
Conduct on-site focused monitoring visits based on incident reports, procedural safeguards complaints, self-assessment data and concerns identified through on-going review of system point of entry (SPOE) database.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, NJEIS state staff conducted two onsite focused monitoring visits as follow-up to agencies with ongoing compliance issues. The two agencies were under at risk sanctions.</p>
Identify areas for additional professional development using data from Procedural Safeguards Office reports and implement professional development activities as needed to ensure compliance.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, training and technical assistance was provided by the lead agency through statewide and regional provider meetings and training events.</p>
Review information from procedural safeguards workshops to identify area on which clarification of law, regulations, policies and procedures are needed to ensure compliance. Issue and disseminate clarifications as needed.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>There were no specific clarifications necessary during this year.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

### 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.

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100% of signed written complaints with reports issued will be resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

**Actual Target Data for FFY 2008: 100% of signed written complaints with reports issued were resolved within 60 days.**

In FFY 2008, four requests for complaint investigation were received. Three of those requests were resolved with reports issued within the required timeline. The remaining request was dismissed. Therefore  $[3+0 \text{ divided by } 3 \text{ times } 100] = 100\%$ .

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

- During FFY 2008, four signed written complaints were received and three were investigated compared to FFY 07 where all four requests received were withdrawn or dismissed with no complaint investigation necessary.
- One of the four complaint requests received in FFY 2008 was dismissed because the complaint did not involve a violation of Part C Individuals with Disabilities Education Act (IDEA). The complaint which was dismissed involved allegations about a specific practitioner. Although it was not a Part C Violation, the lead agency investigated the matter based on New Jersey Early Intervention System (NJEIS) personnel policies and procedures. The family was also referred to the Division of Consumer Affairs, Board of Licensing.
- The three remaining complaint requests were resolved with the issuance of reports within the required timelines.
- No findings were issued.

Improvement Activities	Status
Maintain a procedural safeguards database to track requests for alternative dispute resolution.	<b>Ongoing Activity 2006-2011</b> In FFY 2008, a procedural safeguards database continued to be maintained and

Improvement Activities	Status
	enhanced as needed.
<p>Evaluate and revise the procedural safeguards training format and materials following completion of federal regulations resulting from IDEA reauthorization.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2007, NJEIS began development of an online version of procedural safeguards training with the Northeast Regional Resource Center (NERRC) and a national consultant, Larry Edelman. The project has also been expanded to work with Connecticut and Vermont with a target completion date by spring 2010.</p> <p>In FFY 2008, NJEIS purchased and received training on the software application "Articulate" and modules are under development. Key NJEIS staff received training from the state contracted Human Resources Development Institute (HRDI) on another software application for online module development and a complementary learning management system.</p> <p>Arrangements are in process to have the Human Resources Development Institute (HRDI) host the administration and implementation of training activities using HRDI technology including NJEIS practitioner training enrollment, online registration, webinars, training modules.</p>
<p>Conduct periodic procedural safeguards trainings in each region for practitioners and families.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, forty-two procedural safeguards trainings were conducted and attended by 747 service coordinators, practitioners and administrators. The trainings were offered in each region on a monthly or as needed basis to ensure access statewide.</p> <p>Evening and weekend sessions were added in each region to expand access to trainings</p> <p>"Articulate" was used to begin development of modules in order to move the procedural safeguards training on-line. NJEIS continued to work with the NERRC and Larry Edelman to develop the online training during FFY 2008. This training will initially be developed for practitioners and then be modified for families.</p> <p>SPAN offered to work with the NJEIS in</p>

Improvement Activities	Status
	<p>FFY 2008 to provide opportunities for families to receive procedural safeguards training through toll free conferencing or access to pre-recorded information. A teleconference on procedural safeguards in the Early Intervention System was created by SPAN based on materials jointly developed by SPAN and the NJEIS.</p> <p>SPAN hosted statewide teleconferences on early intervention and transition from early intervention to preschool. Both teleconferences included relevant procedural safeguards. Both are archived on the SPAN website along with the resource materials, the PowerPoint, and a link to the New Jersey Early Intervention System website. Approximately 400 families accessed the archived teleconferences.</p>
<p>Link the REIC data regarding informal complaints by families resolved at regional level with the state procedural safeguards database.</p>	<p><b>This activity is now scheduled to occur during FFY 2009-2010</b></p> <p>This activity has been delayed due to insufficient staffing resources and staff changes in the Procedural Safeguards Office.</p> <p>Currently, the REICs collect and compile data related to informal complaints by county and according to 19 topical issues. These data are submitted to the Procedural Safeguards Office on a quarterly basis.</p> <p>The lead agency will continue to explore the feasibility of a database that can link the REIC data with the lead agency database.</p>
<p>Explore the feasibility of developing online training and other innovative learning opportunities for families and practitioners.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2007, NJEIS began development of an online version of procedural safeguards training with the Northeast Regional Resource Center (NERRC) and a national consultant, Larry Edelman. The project has also been expanded to work with Connecticut and Vermont with a target completion date by spring 2010.</p> <p>In FFY 2008, NJEIS purchased and received training on the software application "Articulate" and modules are under development. Key NJEIS staff</p>

Improvement Activities	Status
	<p>received training from the state contracted Human Resources Development Institute (HRDI) on another software application for online module development and a complementary learning management system</p> <p>Arrangements are in process to have the state contracted Human Resources Development Institute host the administration and implementation of training activities using technology including NJEIS practitioner training enrollment, online registration, webinars and training modules.</p>
Revise Family Rights Handbook.	<p><b>Completed FFY 2009</b></p> <p>The Family Rights Handbook was revised in October 2009.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

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

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

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

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

FFY	Measurable and Rigorous Target
2008 (2007-2008)	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline.

#### Actual Target Data for FFY 2008:

In FFY 2008, no due process hearings were conducted since all seven requests received were resolved without a hearing within the required timeline.

#### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

- During FFY 2008, seven requests for a due process hearing were received and all seven were resolved without a hearing.
  - Three requests for a due process hearing were included with a request for mediation. These were resolved through a mediation agreement and no hearing was necessary.
- The Procedural Safeguards Office, Procedural Safeguards Coordinator determined that four requests for due process hearings were not related to a Part C requirement.

Improvement Activities	Status
Maintain a procedural safeguards database to track requests for dispute resolution.	<b>Ongoing Activity 2006-2011</b> In FFY 2008, a procedural safeguards database continued to be maintained and enhanced as needed.
Link the REIC data regarding informal complaints by families resolved at regional level with the state procedural safeguards database.	<b>This activity is now scheduled to occur during FFY 2009-2010</b> This activity has been delayed due to insufficient staffing resources and staff changes in the Procedural Safeguards Office. Currently, the REICs collect and compile data related to informal complaints by county and

Improvement Activities	Status
	<p>according to 19 topical issues. These data are submitted to the Procedural Safeguards Office on a quarterly basis.</p> <p>The lead agency will continue to explore the feasibility of a database that can link the REIC data with the lead agency database.</p>
<p>Evaluate and revise the procedural safeguards training format and materials following completion of federal regulations resulting from IDEA reauthorization.</p>	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2005, the training was modified and moved under the responsibility of the REIC Training &amp; Technical Assistance Coordinators. This will provide additional training days across the state. It is anticipated that additional modifications will be needed when the final Federal Part C Regulations are published.</p> <p>In FFY 2007, NJEIS began development of an online version of procedural safeguards training with the Northeast Regional Resource Center (NERRC) and a national consultant, Larry Edelman. The project has also been expanded to work with Connecticut and Vermont with a target completion date by spring 2010.</p> <p>In FFY 2008, NJEIS purchased and received training on the software application "Articulate" and modules are under development. Key NJEIS staff received training from the state contracted Human Resources Development Institute (HRDI) on another software application for online module development and a complementary learning management system</p> <p>Arrangements are in process to have the state contracted Human Resources Development Institute host the administration and implementation of training activities using HRDI technology including NJEIS practitioner training enrollment, online registration, webinars, training modules.</p>

Improvement Activities	Status
<p>Conduct bi-annual or more frequently as needed, training for Hearing Officers.</p>	<p><b>FFY 2009- No longer Applicable</b></p> <p>As a result of the promulgation of N.J.A.C. 8:17 in November 2008, the hearing panel was replaced with judges from the Office of Administrative Law. As a result, all due process hearings are heard by an administrative law judge.</p> <p>Therefore this activity is considered completed and will no longer be an ongoing activity.</p>
<p>Conduct periodic procedural safeguards trainings in each region for practitioners and families.</p>	<p><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, forty-two procedural safeguards trainings were conducted and attended by 747 service coordinators, practitioners and administrators. The trainings were offered in each region on a monthly or as needed basis to ensure access statewide. In addition, evening and weekend sessions were added in each region to expand access to trainings.</p>
<p>Continue recruitment of hearing officers to ensure adequate coverage for hearings requested.</p>	<p><b>Completed FFY 2008 No Longer Applicable</b></p> <p>As a result of the promulgation of N.J.A.C. 8:17 in November 2008, the hearing panel was replaced with a judges from the Office of Administrative Law. As a result, all due process hearings are heard by an administrative law judge.</p> <p>Therefore this activity is considered completed and will no longer be an ongoing activity.</p>
<p>Revise Family Rights Handbook.</p>	<p><b>Completed FFY 2009</b></p> <p>The Family Rights Handbook was revised in October 2009.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

**Part C State Annual Performance Report (APR) for FFY 2008-2009**

**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.

FFY	Measurable and Rigorous Target
	<b>Not applicable for New Jersey Part C system because Part B due process procedures have not been adopted by NJEIS.</b>

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

<b>Monitoring Priority: Effective General Supervision Part C / General Supervision</b>
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**Indicator 13:** Percent of mediations held that resulted in mediation agreements.

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

<b>Measurement:</b> Percent = [(2.1(a) (i) + 2.1(b) (i)) divided by 2.1] times 100.
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FFY	Measurable and Rigorous Target
<b>2008</b> (2008-2009)	NJEIS had less than ten mediations; therefore no targets have been set for this indicator.

**Actual Target Data for FFY 2008:**

For FFY 2008 (2008-2009), New Jersey's Part C System received five requests for mediation. Of these five mediation requests:

- Three mediations were related to requests for due process hearings. These three mediations were held and agreements reached.
- Two mediations were not held as the mediation requests were withdrawn by the families. Both issues were resolved informally – one after redetermination of continuing eligibility, and one after the IFSP team came to agreement on a service frequency issue.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

- Since the number of mediations was less than ten, targets were not established.

Improvement Activities	Status
Maintain a procedural safeguards database to track requests for dispute resolution.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> <p>The database continues to be used to track informal and formal requests for assistance and/or dispute resolution. The data is used by the monitoring team and Procedural Safeguards Office (PSO) to identify potential issues and trends within counties, regions or statewide. Data analysis is conducted when preparing for data verification visits, focused monitoring visits, incident investigations, and corrective actions.</p>
Link the REIC data regarding informal complaints by families resolved at regional level with the state	<p style="text-align: center;"><b>This activity is now scheduled to occur during FFY 2009-2010</b></p> <p>This activity has been delayed due to insufficient staffing resources and staff</p>

Improvement Activities	Status
procedural safeguards database.	<p>changes in the Procedural Safeguards Office.</p> <p>Currently, the REICs collect and compile data related to informal complaints by county and according to 19 topical issues. These data are submitted to the Procedural Safeguards Office on a quarterly basis.</p> <p>The lead agency will continue to explore the feasibility of a database that can link the REIC data with the lead agency database.</p>
Evaluate and revise the procedural safeguards training format and materials following completion of federal regulations resulting from IDEA reauthorization.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>This activity remains on hold pending promulgation of the final Federal Part C Regulations.</p>
Conduct bi-annual or more frequently as needed, training for Mediators.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>Mediators were notified and provided access to the new NJEIS rules that were finalized in November 2008.</p>
Conduct periodic procedural safeguards trainings in each region for practitioners and families.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>In FFY 2008, forty-two procedural safeguards trainings were conducted and attended by 747 service coordinators, practitioners and administrators. The trainings were offered in each region on a monthly or as needed basis to ensure access statewide. Evening and weekend sessions were added in each region to expand access to trainings.</p>
Conduct recruitment of mediators to ensure adequate coverage for hearings requested.	<p align="center"><b>Ongoing Activity 2006-2011</b></p> <p>This is an ongoing activity as needed. In FFY 2008 there were adequate numbers of mediators available and no additional recruitment was necessary.</p>
Revise Family Rights Handbook.	<p align="center"><b>Completed FFY 2009</b></p> <p>The Family Rights Handbook was revised in October 2009.</p>

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

## Part C State Annual Performance Report (APR) for FFY 2008-2009

**Overview of the Annual Performance Report Development:** See overview description on page one

### 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)

FFY	Measurable and Rigorous Target
2008 (2008-2009)	<ul style="list-style-type: none"> <li>▪ 100% of state reported data including 618, SPP and APR will be timely.</li> <li>▪ 100% of state reported data including 618, SPP and APR will be accurate.</li> </ul>

#### Actual Target Data for FFY 2008:

14a. 100% of state reported data including 618, SPP and APR are timely.

14b. 100% of state reported data including 618, SPP and APR are accurate.

SPP/APR Data - Indicator 14			
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	N/A	N/A	0

13	1	1	2
		<b>Subtotal</b>	28
<b>APR Score Calculation</b>	<b>Timely Submission Points</b> - If the FFY 2008 APR was submitted on-time, place the number 5 in the cell on the right.		5
	<b>Grand Total</b> - (Sum of subtotal and Timely Submission Points) =		33

<b>618 Data - Indicator 14</b>					
<b>Table</b>	<b>Timely</b>	<b>Complete Data</b>	<b>Passed Edit Check</b>	<b>Responded to Data Note Requests</b>	<b>Total</b>
<b>Table 1 - Child Count</b> Due Date: 2/1/09	1	1	1	N/A	3
<b>Table 2 - Program Settings</b> Due Date: 2/1/09	1	1	1	N/A	3
<b>Table 3 - Exiting</b> Due Date: 11/1/09	1	1	1	N/A	3
<b>Table 4 - Dispute Resolution</b> Due Date: 11/1/09	1	1	1	N/A	3
				<b>Subtotal</b>	12
<b>618 Score Calculation</b>			<b>Grand Total</b> (Subtotal X 2.5) =		30

<b>Indicator #14 Calculation</b>	
A. APR Grand Total	33.00
B. 618 Grand Total	30.00
C. APR Grand Total (A) + 618 Grand Total (B) =	63.00
Total NA in APR	2.00
Total NA in 618	5.00
<b>Base</b>	<b>63.00</b>
D. Subtotal (C divided by Base*) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

\*Note any cell marked as N/A will decrease the denominator by 1 for APR and 2.5 for 618

In FFY 2008 (2008-2009) 100% of New Jersey's APR data were timely and accurately reported. The child specific electronic database, standardized state paperwork, and REIC responsibility for data entry assist in ensuring the integrity of data reported.

In FFY 2008 (2008-2009) 100% of New Jersey's 618 data were timely and accurately reported. The child specific electronic database, standardized state paperwork, and REIC responsibility for data entry assist in ensuring the integrity of data reported.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**

NJEIS has implemented a number of measures to ensure that data reflects compliance with requirements to report both timely and accurate data.

**618 Data** - EIS has developed and distributes reports that monitor a number of business rules to help identify child records that may need to be updated or closed. A combination of the child count reports and possible closed reports assist in ensuring accurate data by Identifying specific records that require review, holding counties responsible for the accuracy of the database, greatly improving the accountability of the early intervention system, verifying that the database contains accurate data, and ensuring that reports generated from the database are reliable.

- The NJEIS database includes a drop down list for race/ethnicity, closed reasons, and settings that limits choices, provides standard data collection and reduces data entry input errors.
- NJEIS data reports are provided to the Service Coordination Units (SCU) at least twice per year for data clean-up and verification to ensure that the December Tables are valid and accurate.
  - Aged out Active - Children who have reached their third birthday without an exit date or exiting reason recorded in the SPOE child record
  - Intake greater than 90 Day - Records that have been open for more than 90 days without an Initial IFSP being recorded
  - Active No IFSP - Children who have not been closed and have no active IFSP recorded in the SPOE child record
  - No Authorizations - Children with an active IFSP but no authorizations for services for 60 days
  - No Direct Services - Children with an active IFSP and authorization however, no services received in the last 60 days
- NJEIS provides instructions and technical assistance to the counties to help them identify the corrections required. In order to ensure that the changes identified are ultimately updated in the SPOE database, the counties provide a report to NJEIS on the corrections required. NJEIS then monitors the data system to ensure that the changes are made so that generated reports are accurate.
- The SCUs are required to attest to an accurate December 1 report in January of each year prior to the February 1 submission of Table 1 and 2.
- The NJEIS Data Manager conducts a final review of the child count and ensures there are no duplicates.

**Monitoring Data Desk Audit - Indicators 1, 7, and 8C**

- The monitoring process NJEIS uses is comprehensive with data drill down to the child specific level. The monitoring team conducts activities to document, verify and correct data as needed. This is done through review of child records which includes progress notes, IFSPs, claims and service authorization data; and in some cases on-site visits to verify child records.
- NJEIS Monitoring team uses the NJEIS database to gather a stratified random sample of three months of FFY 2008 data for a data desk audit.
- The monitoring team conducts the desk audit to identify possible non-compliance.

- A data desk inquiry is sent to the appropriate provider agency to:
  - Verify the data for accuracy;
  - Provide opportunity for data clean up;
  - Submit data corrections as appropriate;
  - Provide reasons for any non-compliance identified by the local agency and/or DHSS-NJEIS;
  - Provide barriers and improvement for correction of each incident of non-compliance.

**Indicator 1** – Timely service data passes through a number of edit checks including that there is a valid IFSP date with a billing authorization within the IFSP period, a claim filed by the provider agency supported by a service encounter verification log signed by the parent and an explanation of benefits provided to the family as a secondary verification that the service type, date and intensity are accurate.

**Indicator 2** – Covered in the 618 Data description above.

**Indicator 3** – In selecting the BDI-2 to report on child outcomes, NJEIS chose a standardized tool with published reliability and validity. The use of palm pilots with BDI software eliminates common scoring errors up to 80% by guiding users through the appropriate item administration for each domain. The palm software also computes all necessary calculations including basal, ceiling, raw scores and standard scores to eliminate operator error. The electronic storing of child outcome data from the BDI is accomplished through a password protected web-based data system from the Riverside Publishing Company.

For children selected and included in indicator 3A, 3B & 3C, DHSS compares authorized evaluation date and evaluator information to ensure the BDI system and the SPOE system match prior to the inclusion of data in reporting. Any data errors identified through a periodic audit of the BDI data base by DHSS are remanded to the targeted evaluation teams for correction.

**Indicator 4** – The NJEIS used the Impact on Family Scale (IFS) family survey. This survey was developed and validated by the National Center for Special Education Accountability Monitoring (NCSEAM). The Rasch measurement framework was used for analysis and reporting. In addition, the NJEIS also instituted a chi square test to verify that the returned sample was representative of each county.

**Indicator 5 & 6** – Covered in the 618 Data description above.

**Indicator 7** – The NJEIS database includes the referral, evaluation and IFSP dates for each child. Edit checks for missing data that prohibits data entry to proceed if missing critical data (i.e. Initial IFSP Meeting date cannot be entered if missing eligibility determination). If the period between the referral and IFSP is greater than 45 days the database requires a delay reason. This data is then used to conduct the monitoring desk audit.

**Indicator 8A & 8B** – Self Assessment data is reviewed by the REIC and DHSS-NJEIS and a rubric is used to ensure complete and accurate information is submitted.

**Indicator 8C** – The NJEIS uses two sources of data from the database 1) the authorization date of the TPC obtained from the team page signed by the parent and 2) the date of the TPC recorded from the service coordinator verification log. The monitoring team confirms this data through desk audit analysis. Based on these dates, and the child's date of birth, an inquiry is prepared for the county to identify possible non-compliance.

**Indicator 9** – The NJEIS monitoring team maintains a tracking of all findings.

**Indicator 10, 11 & 13** - The NJEIS procedural safeguards office maintains a database which includes: contacts to the procedural safeguards office, type of dispute request, and the date the

request is opened and closed. This information is used to compile the data reported in indicator 10, 11 and 13.

**General Procedures to Ensure Valid and Reliable Data**

- NJEIS has established procedures and implemented edit checks including:
  - A data quality tracking matrix to identify and correct “funky data” including identification of inaccurate or missing information and duplicate entries.
  - Restricted drop-down lists for data fields that minimize data errors due to typographical error or submission of incorrect information.
- Data must be entered into critical fields in the NJEIS database in order to allow data entry to progress.
- REICs and SCUs have the capacity within the system to generate reports and review for errors manually.
- Ongoing on-site and remote consultation and technical assistance is provided to ensure data integrity.
- REIC responsibility for data entry and follow-up assist in ensuring the integrity of data reported.
- Providing child count reports to the counties that include a list of children between referral and initial IFSP, and children with an active IFSP. The service coordinators use these reports to verify and update the current status of child data as recorded in the data system.

Improvement Activities	Status
Maintain and enhance the electronic management information business rules to eliminate data entry errors through automated checks and balances.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008 the DHSS-NJEIS state staff completed several minor updates to the NJEIS database to automate checks and balances. Additional enhancements are pending the successful re-bid of the Central Management Office contract in FFY 2009.
Conduct periodic data runs of SPOE database to identify and as needed correct missing and/or questionable data.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008 the NJEIS state staff continued to use a data matrix to audit and identify missing or questionable data (funky data).
Maintain a data entry check list and conduct follow-up of missing data or potential data errors.	<p style="text-align: center;"><b>Ongoing Activity 2006-2011</b></p> In FFY 2008 the REICs continue to implement a state developed checklist to identify missing or potential data errors when entering data from paper to the electronic data system. The REICs issue “OOPS tickets” to agencies to follow-up on corrections.
Continue enhancements of SPOE Database as described throughout the SPP.	<p style="text-align: center;"><b>Not Completed</b></p> State fiscal concerns have increased the oversight of state contracts. A third contract extension was issued to Covansys to maintain the Central Management Office into calendar year 2010. The proposed activities remain on hold based on a decision by the State Treasury that enhancements are not

Improvement Activities	Status
	allowable under the current contract with the Central Management Office (CMO) vendor and must be bid out under a new RFP. RFP has been drafted to re-bid the contract during calendar year 2010 and is pending approval to move forward under the new administration that takes office on January 19, 2010. The RFP is intended to enhance the CMO performance through an on-line web-based application that will include enhancements for data collection and reporting.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2009:**

No revisions to targets or improvement activities were recommended or identified by the NJEIS Part C Steering Committee or the State Lead Agency. Timelines were modified as noted under status.

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

TABLE 4  
REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE  
INDIVIDUALS WITH DISABILITIES EDUCATION ACT  
2008-09

SECTION A: WRITTEN, SIGNED COMPLAINTS	
(1) Total number of written, signed complaints filed	4
(1.1) Complaints with reports issued	3
(a) Reports with findings of noncompliance	1
(b) Reports within timeline	3
(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	1
SECTION B: MEDIATION REQUESTS	
(2) Total number of mediation requests received	5
(2.1) Mediations held	3
(a) Mediations related to hearing requests	3
(i) Mediation agreements related to hearing requests	3
(b) Mediations not related to hearing requests	0
(i) Mediation agreements not related to hearing requests	0
(2.2) Mediations not held (including pending)	2
SECTION C: HEARING REQUESTS	
(3) Total number of hearing requests filed (for all States)	7
(3.1) Resolution meetings (applicable ONLY for states using Part B due process hearing procedures)	NA
(a) Written settlement agreements reached through resolution meetings	NA
(3.2) Hearings (fully adjudicated) (for all states)	0
(a) Complete EITHER item (1) OR item (2), below as applicable.	
(1) Decisions within timeline - Part C procedures	0
(2) Decisions within timeline - Part B procedures	NA
(b) Decisions within extended timeline (applicable ONLY if using Part B Due process hearing procedures)	NA
(3.3) Resolved without a hearing (for all States)	7

**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)<sup>1</sup> under Part C of the IDEA. This certification (including the annual report or APR) is due no later than February 1, 2010.

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

1.  Submitting its own annual report (which is attached); or
2.  Using the State's Part C APR for FFY 2008 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C APR for accuracy and completeness.<sup>2</sup>

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

  
\_\_\_\_\_  
Signature of ICC Chairperson

January 22, 2010  
Date

NJ State Interagency Coordinating Council  
Attn: Terrie Goeke  
116 Woolsey Court  
Pennington, NJ 08534-2831  
SICC@njeis.org

<sup>1</sup> 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).

<sup>2</sup> If the ICC is using the State's Part C APR and it disagrees with data or other information presented in the State's Part C APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 1, 2010.