

NJ Part C

FFY2014 State Performance Plan / Annual Performance Report

Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

Executive Summary:

The New Jersey Early Intervention System (NJEIS) is submitting this Part C State Performance Plan/Annual Performance Plan (SPP/APR), to the U.S. Department of Education, Office of Special Education Programs (OSEP) by February 1, 2016 in accordance with the Individuals with Disabilities Education Act (IDEA). The plan was developed based upon guidance from OSEP and with broad stakeholder involvement and input.

New Jersey (NJ) is a geographically small north eastern state with a diverse population of 8,958,013 according to the July 1, 2015 estimate by the U.S. Census Bureau. Despite its small geographic size New Jersey ranks first as the most density populous state in the country (1,027 people per square mile). New Jersey is divided into three geographic regions: they are North Jersey, Central Jersey and South Jersey. NJ has a twenty-one county governmental structure and is the only state that has had every county deemed "urban" as defined by the Census Bureau's Combined Statistical area. The U.S. Census Bureau estimates that New Jersey's median household income in 2014 was \$72,062. The 2014 U.S. Census estimates include 316,129 children under three years of age in New Jersey. The US Census Bureau reported for 2014 that 12.6% of New Jersey's children under the age of five were below the federal poverty level.

New Jersey is made up of a very diverse population. As of 2014, the breakdown of languages spoken at home for New Jersey residents, age 5 and older was: 69.7% spoke only English, while 15.6% spoke Spanish/Spanish Creole, 8.5% spoke other Indo-European Languages, 4.7% spoke Asian and Pacific Island languages and 1.5% spoke other languages. In total, 30.3% of New Jersey's population age 5 and older spoke a native language other than English.

The New Jersey Department of Health (DOH) is the designated State lead agency for the New Jersey Early Intervention System (NJEIS) established under Part C of the IDEA. As such, DOH is ultimately responsible for implementing its general supervisory authority to ensure the availability of appropriate early intervention services for eligible infants, toddlers and their families in accordance with federal and state requirements. New Jersey has participated in the federal program since 1987. The Early Intervention System was originally located within the Department of Education. On October 1, 1993, the responsibility for the Early Intervention System was transferred to the DOH.

The NJEIS has a referral system point of entry for children and families through four Regional Early Intervention Collaboratives (REICs) that cover the state's twenty-one counties. Grant/Contracts to the REICs and thirteen (13) Service Coordination Units (SCUs) that provide ongoing service coordination for the twenty-one counties are executed annually. Direct early intervention services are provided by approximately sixty-two (62) Early Intervention Program (EIPs) provider agencies through contracts with the DOH. EIPs are contracted to serve as a comprehensive agency, a service vendor agency, and/or a targeted evaluation team (TET). Comprehensive agencies are expected to serve as an early intervention home for a child and family, providing all identified services on the IFSP. Service vendors serve as a backup in providing services not available through a comprehensive agency. Individual practitioners must be enrolled with the NJEIS through one of the contracted EIPs.

REICs are also responsible to facilitate family and community involvement in the NJEIS and assure that local resources are coordinated to assist families to meet the needs of their infants and toddlers with developmental delays and disabilities. The REICs are responsible for ensuring that families have an active voice in decision-making on Regional Boards. Each of the four REICs employs at least one full-time Training and Technical Assistance Coordinator and one full-time Family Support Coordinator. The Family Support Coordinator positions are required to be staffed by a parent of a child with a disability.

Early intervention supports and services are provided in accordance with Part C statute and regulations and NJEIS state rules. Policies and procedures are disseminated statewide and posted on the NJEIS website.

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General Supervision System:

The systems that are in place to ensure that IDEA Part C requirements are met, e.g., monitoring systems, dispute resolution systems.

The NJEIS implements a general supervision system that identifies noncompliance, ensures verification of correction in a timely manner in accordance with federal requirements and promotes enhanced performance and results for children and families. This is accomplished through the Monitoring Unit, Procedural Safeguards Office, and the Central Management Office through ongoing activities including data verification, data analysis of performance data, fiscal monitoring, response to disputes, public reporting of data, local determinations, contracts management, personnel development, training, technical assistance, issuing of findings, corrective actions, verification of correction, on-site focused monitoring, and enforcement. In addition, NJEIS has established and implements a Code of Conduct. All approved providers, administrators, and practitioners are required to review and sign their commitment to follow the provisions of this code.

Additional information about these processes is included below:

Monitoring Activities

A significant component of the NJEIS general supervision system is the performance desk audit process that was

developed and implemented using data compiled through the System Point of Entry (SPOE) database. The purpose of the SPOE data desk audit is to: (1) ensure data in SPOE are accurate; (2) to identify noncompliance and areas for improvement; and (3) to verify correction of noncompliance in accordance with federal requirements in OSEP 09-02.

The SPOE database is an electronic central data system that:

- Ensures an unduplicated count for federal reporting;
- Verifies data;
- Establishes and provides trend data for improvement planning;
- Identifies potential areas of non-compliance that are then targeted for follow-up by telephone, record submission or site visit; and
- Allows tracking of required corrective actions.

SPOE data desk audits review compliance and performance data for selected priority indicators for all counties/provider agencies. An inquiry response format has been developed and implemented to verify accuracy of data, request missing information and determine if barriers are appropriately addressed to correct performance issues. As needed, findings and corrective action plans are issued and verification of correction is completed in accordance with federal requirements.

On-site focused monitoring is an important component of the NJEIS general supervision system. NJEIS selects EIPs or SCUs whose performance data and/or history of uncorrected noncompliance suggest an onsite visit is necessary. Improvement plans and revised corrective actions plans are issued, as necessary, as a result of onsite visits. Onsite visits are conducted to verify correction or to determine the need for additional sanctions such as designation of at-risk or high-risk status when correction is not timely.

Procedural Safeguards Office

The NJEIS has a Procedural Safeguards Office, located within the DOH, Office of the Assistant Commissioner, to ensure the effective implementation of procedural safeguards including family rights. The Procedural Safeguards Office helps to ensure that parents receive and understand their rights and have access to formal, as well as informal systems of dispute resolution, as needed. Procedural safeguards are available to all families and are described in the document "New Jersey Early Intervention System (NJEIS) Family Rights".

Service coordinators are given the responsibility to assist families in accessing informal and formal dispute resolution including completion and submission of requests for formal dispute resolution, if desired. A parent liaison is available through the Procedural Safeguards Office to advise parents of their rights under the NJEIS, help them understand the options available to them when disputes arise, and assist in resolving informal disputes as needed.

The Procedural Safeguards Office responds to parent issues/concerns and documents contacts on state logs for review and analysis. Parents can contact the Procedural Safeguards Office through a toll-free hotline. Parents who call are always advised of their right to file a request for formal dispute resolution at any time. The Procedural Safeguards Office issues compensatory services as appropriate,

A tracking system is used by the Procedural Safeguards Office to document informal and formal communications from parents by telephone, emails and/or written letters. Tracking includes date of request, issues, resolutions, and timelines by county. The data collection tracks requests and outcome of informal and formal dispute resolutions received by the Procedural Safeguards Office. A list of issue categories for statewide reporting of informal and formal disputes ensures county/regional/statewide systemic response to issues as necessary.

The Procedural Safeguards Office compiles information on disputes and shares with state entities including REICs, SCUs, and EIPs, as necessary to facilitate systematic training and technical assistance. In addition, a Procedural Safeguards Office report is presented at each State Interagency Coordinating Council (SICC) meeting on informal and formal complaints and resulting system responses.

Formal dispute resolution procedures are used to identify and correct non-compliance through:

- A statewide mediation system available to ensure parents may voluntarily access a non-adversarial process for the

resolution of individual disputes regarding the NJEIS including identification, evaluation and assessment, eligibility determination, placement or the provision of appropriate early intervention services. The Procedural Safeguards Office identifies community dispute resolution centers, mediation centers, and/or individual mediators to provide early intervention mediation services. Mediators are required to undergo training as a condition of serving as mediators. The Procedural Safeguards Office maintains a list of qualified and impartial mediators who are trained in effective mediation techniques and are knowledgeable in laws, regulations and guidelines related to the provision of early intervention services.

- A statewide impartial hearing system available through the Office of Administrative Law (OAL) to ensure parents may voluntarily access a fair process for the resolution of individual disputes regarding the provision of early intervention services including identification, evaluation and assessment, eligibility determination, placement or the provision of appropriate early intervention services.
- A complaint resolution process available to address complaints filed by individual, families, groups, organizations, or from any source, including an organization or individual from another state, indicating a deficiency(s) in the fulfillment of the requirements, or a violation of the requirements, by public or private agencies, which are or have been receiving financial funding or payment under Part C of IDEA or other pertinent state or federal early intervention legislation; or by other public agencies involved in the state's early intervention system. The Procedural Safeguards Office is responsible for investigating and resolving complaints in accordance with Part C requirements.

Family Survey

NJEIS utilizes the Family Survey developed by the National Center Special Education Accountability Monitoring (NCSEAM). This instrument has been selected because of the rigorous development process it underwent to ensure that the data obtained are valid and reliable. Data from the family survey are analyzed as part of the identification of issues and areas for improvement. REICs have been working with selected counties targeted based on performance in this indicator. A data use framework is being utilized to analyze the data, identify hypotheses and develop and implement county improvement plans. See Indicator 4 for a discussion of how the survey is implemented and the data utilized.

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Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to early intervention service (EIS) programs.

The New Jersey Comprehensive System of Personnel Development (CSPD) is designed as a statewide network of regional training and technical assistance coordinators (T&TA) who work at the regional/local provider level under the guidance of the REICs and state CSPD Coordinator. Each of the four REICs employs at least one full-time Training and Technical Assistance Coordinator and one full-time Family Support Coordinator. The Family Support Coordinator positions are required to be staffed by a parent of a child with a disability. The REICs offer monthly provider meetings as an opportunity to review NJEIS policies and procedures and provide training and technical assistance on topics as identified by the state, REIC or local provider agencies.

The New Jersey CSPD:

- Provides training for a variety of early intervention practitioners, including service coordinators and paraprofessionals; families; and primary referral sources.
- Ensures that training relates specifically to understanding the basic components of early intervention services, federal and state requirements, and how to coordinate transition services for infants and toddlers with disabilities from early intervention to a preschool program under Part B of IDEA or to other early childhood services.
- Provides regional ongoing targeted training and technical assistance to program administrators, service coordinators, and service providers to address areas in need of improvement as well as areas of noncompliance as identified through general supervision activities.

The DOH, NJEIS identified a continuing need to expand to on-line training to meet the training and education needs of NJEIS personnel. Mercer County Community College (MCCC) is contracted to provide NJEIS with access to a Learning Management System that provides access to and tracking of online training to individual administrators and practitioners enrolled with the NJEIS. The contract includes tracking of training/technical assistance modules/webinars, tracking of constituent participation and awarding of CEUs and support Webinars for up to 500 individuals synchronously. NJEIS administrators/ practitioners are able to access and view schedules of upcoming live webinars, view descriptions of available modules, and also view job-specific requirements. MercerOnline and Mercer Institute of Management & Technology training provides e-mail and telephone support to assist practitioners with log-in, troubleshooting, system navigation, etc.

NJEIS requires that every practitioner enrolled with the NJEIS have an active email to ensure that the NJEIS can communicate information down to the direct service practitioner. In the past, communications were sent through provider agency administrators with no assurance that the agency passed information down to their direct service practitioners.

Content for the modules and webinars are provided by staff of the NJEIS and modules are designed with the assistance of MCCC staff including IT professionals, Instructional Design Technologists, and MercerOnline staff. Available software includes Soft Chalk, Articulate, Captivate, Adobe Connect Pro, and Go-to-Webinar. Additional and/or supplemental course materials are uploaded and stored in the Learning Management System for participants to access. Module set-up includes rendering PowerPoint Web-ready; enabling Printer-Friendly Format; conversion/import of quiz questions; grade book configuration; instructional technologist oversight; Shell Creation, Materials Upload and Setup; close captioning (for voice-over); and quality assurance review.

Live webinars are conducted by NJEIS staff members on Go-to-Webinar allowing access for up to 500 participants. Mercer Institute provides IT support for each session. Sessions are recorded and stored in the MCCC streaming server, for access via the Learning Management System so that participants have access to recorded versions of the session. Both live and stored sessions track when each participants logs in and out of the system.

Modules are developed and offered asynchronously on the LMS based on content developed by NJEIS staff with the assistance of Instructional Design and IT support provided by MercerOnline. To ensure retention of the material, quizzes or other supplemental information are developed and placed on the LMS. Participants are required to achieve a “passing score” to receive credit for the completing the module and can test as many times as necessary.

In addition to the modules developed by NJEIS, modules and webinars offered by outside providers can be linked to the LMS and listed in the course catalog. Quizzes can be developed and stored on the LMS for external modules.

Procedural Safeguards Modules

NJEIS implemented six modules on procedural safeguards and requires every individual enrolled with NJEIS to successfully complete the modules as a condition of their ongoing ability to provide early intervention services. The roll-out to the over 4500 existing practitioners started in May 2014 and was completed in January 2016. Effective July 1, 2014, NJEIS requires completion of the modules for any individual prior to their enrollment and approval to provide early intervention services through the NJEIS.

MCCC provides a report to NJEIS on the use of online modules on a weekly basis for all six procedural safeguards modules and at a mutually agreed frequency for additional online modules that may be developed. Reporting for the procedural safeguards modules provide NJEIS with a list of administrators/practitioners who have accessed the modules, number of modules viewed and a list of practitioners who have successfully completed all six required modules. Reporting information on additional modules that may be developed will be mutually agreed upon by Mercer Institute, Mercer Online and NJEIS. Additionally, survey results are available to NJEIS for each of the six procedural safeguards modules and any additional modules that may be developed.

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Professional Development System:

The mechanisms the State has in place to ensure that service providers are effectively providing services that improve results for infants and toddlers with disabilities and their families.

The NJEIS has established personnel standards for all practitioners that provide early intervention services. These standards are maintained and monitored for all early intervention practitioners, requiring educational background and licensure as appropriate for each position in the state. Individual practitioners must be enrolled with the NJEIS through one of the contracted EIPs.

NJEIS has specific enrollment requirements for agencies under contract with the DOH as an early intervention provider and the individuals they use as practitioners for the provision of early intervention services. Agency and practitioner enrollment is through an NJEIS Central Management Office. Agency requirements include proof of agency and practitioner liability insurance, certification statement for submitting claims for services by means other than paper, confirmation of practitioner police and background checks, and copies of signed Code of Conduct acknowledgement for agency administrative staff. Requirements for practitioner enrollment include a completed initial enrollment form that includes discipline specific information including degrees, certification and license numbers that are used to confirm current status of the individual to meet personnel standards, a copy of a signed Code of Conduct acknowledgement and verification that the practitioner has completed required pre-enrollment training.

NJEIS staff recruitment, preparation, qualification, support, and retention efforts are conducted to facilitate an adequate supply of qualified, capable and skilled early intervention personnel.

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Stakeholder Involvement: apply this to all Part C results indicators

The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.

NJEIS relies each year on a Part C Steering Committee which includes the State Interagency Coordinating Council to advise and assist in the development of NJEIS State Performance Plans/Annual Performance Reports (SPP/APR).

This SPP/APR was developed with broad stakeholder input at a January 13, 2016 full-day Part C Steering Committee meeting. This included review of data for fiscal year 2014 (July 1, 2014 - June 30, 2015). The stakeholders reviewed available data and analyzed the status of the state Part C system including local performance data and the current targets for FFY 2014-2018. This included discussion on progress and slippage as well as challenges and resources related to each indicator. Discussion included potential implications for the OSEP results driven accountability initiative and the current NJEIS work on the State Systemic Improvement Plan (SSIP). A final draft of the SPP/APR was reviewed and discussed at the January 22, 2016 SICC meeting at which time the SICC certified the FFY 2014 SPP/APR as their annual report.

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Reporting to the Public:

How and where the State reported to the public on the FFY 2012 performance of each EIS Program or Provider located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2012 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2012 APR in 2014, is available.

The NJEIS Part C State Performance Plan/Annual Performance Report (SPP/APR) is disseminated to the public through posting to the state website (<http://www.nj.gov/health/fhs/eis/report.shtml>) and the Regional Early Intervention Collaboratives (REICs) at <http://www.njreic.org/>. The SPP/APR is 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.

Updates on this SPP/APR will be prepared and submitted each February. These NJEIS reports and past reports are posted at: <http://www.nj.gov/health/fhs/eis/report.shtml>. The SPP/APR will 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.

FFY 2014 County Performance Reports and Part C Determinations outlining the performance of each county in relation to state targets and Part C requirements will be prepared and disseminated within 120 days of the submission of this SPP/APR.

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Actions required in FFY 2013 response

None

Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments

Compliance indicator: 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)

Historical Data
Baseline Data: 2013

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		82.30%	93.20%	88.17%	97.06%	92.09%	92.70%	97.12%	97.10%	94.58%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
312	328	94.58%	100%	95.12%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner)	null
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What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

Definition of Timely Services
NJEIS established with Part C Steering Committee input, a policy for “timely services” as “All services are provided within 30 calendar days from the date the IFSP is signed by the parents documenting consent for the services on the IFSP.”

Sampling Plan:

- NJ continues to monitor all 21 counties every two years for 10 counties in odd numbered FFYs (Cohort A) and 11 counties in even number FFYs (Cohort B).
- NJEIS has a statewide database that authorizes the IFSP services consented to by the parent for assignment and billing by local provider agencies.

- Business rules include all active children and all services during a quarter (3 months) of the FFY.
- A simple random sampling plan without replacement with a 95% confidence level and +/- 5 confidence interval ensures that child records chosen appropriately represent the state population.
- Therefore, the FFY 2014 timely services monitoring uses the statewide database to begin a data desk audit based on a simple random sampling without replacement of three months of FFY 2014 service claim data. The data represents all active child records for the months of August through October 2014 for eleven of the twenty one counties in New Jersey. The other ten counties were reviewed in FFY 2013 and reported in the APR submitted February 1, 2015.

Data Desk Audit, Inquiry and Record Review:

- The NJEIS electronic state database does not currently capture all variables needed to determine whether a service is timely including reasons for delay and is unable to provide data that identifies whether a service is timely if it was first authorized under a periodic/annual IFSP. Therefore, as part of the monitoring process, the monitoring team conducts a data desk audit and inquiry.
- The purpose of the data desk audit and inquiry is 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 provided although late.
- The monitoring team uses all the information received to determine where in the process the delay occurred and who was responsible.
- The identification of the data needed to conduct a timely data desk audit, inquiry, and record review is driven by the availability of actual service claims data to ensure that complete and accurate data is available for the data desk audit. Provider agencies have up to 90 days from the date of service to submit claims data for billing. For example, service claim data provided between August 1 and October 31 are not complete until February 1.
- The data desk audit, inquiry and record review has historically taken 3 to 6 months to confirm non compliance and determine the responsible agency(s) and root causes for the non compliance.
- Timely service data passes through a number of edit checks including:
 - Verification that there is a valid IFSP date with a billing authorization within the IFSP period,
 - Verification there is a valid claim filed by the provider agency;
 - Verification the claim is supported by a service encounter verification log signed by the parent and;
 - An explanation of benefits provided to the family details the services rendered as a secondary verification that the service type, date and intensity are accurate.
- The sample of data is analyzed to verify the number of days to the first service by comparing the parent consent date of service to the first service claim date. Further inquiry includes:
 - Reason and explanation of delay;
 - Identification of type of IFPS (initial, review, annual review);
 - Date IFSP was sent by SCU and received by Early Intervention Program (EIP);
 - EIP assignment date;
 - Reasons and barriers that affected meeting the 30 day timely service provision;
 - Agency’s response to correct the system barrier;
 - Description of how the agency is assured that the barrier has been corrected;
 - Submission of policies and procedures which were created or revised; and
 - Confirmation the agency followed NJEIS policies and procedures.

Provide additional information about this indicator (optional)

Data Analysis and Results:

- There were 1,911 children in the state database for the quarter monitored meeting the business rules stated above.
- These children had a total of 3,116 services.

Data	Children	Services
Quarter of Data: August-October 2014	1,911	3,116
Sample of the Quarter (Denominator)	328	536

Initial Timely Services (Dirty Data without Desk Inquiry)	287	485
Initial Untimely Services (Dirty Data without Desk Inquiry)	41	51
Desk Inquiry Verification of Family Reason for delay or On-Time	25	31
Desk Inquiry Verification of Untimely service	16	20
Corrected Numerator (Timely + Family Reasons)	287+25=312	485+31=516
State Compliance Percentage	312/328=95.12%	516/536=96.27%

The 20 services delays were:

Delayed Service Type	Number of Children
Physical Therapy	5
Speech Therapy	8
Occupational Therapy	3
Developmental Intervention	4

Of the 20 services delayed:

Days Delayed	Count
Delayed between 1-5 days	3
Delayed between 6-10 days	8
Delayed over 11 days	9

- The desk audit random sample included 328 active child records and 536 services obtained from the NJEIS data system.
- The initial data desk audit identified that 312 of the 328 children (516 of 536 services) did receive timely services based on consent date of the IFSP. Without the necessary drill down for reason for delay, 25 children (31 services) appeared to have received at least one service untimely.
- The inquiry was conducted by the lead agency monitoring staff to obtain the necessary additional information on 25 of the 328 children and 31 of their 536 services.
- The results of the inquiry identified that for 25 of the 41 children in the database identified to have received their services late (31 of 51 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, 25 of the 41 children (31 of the 51 services) were determined to have exceptional family circumstances that resulted in services being considered timely. 16 children (20 services) were determined to have non-compliance in timely services.
- Overall 96.27% (516/536) of the services were timely including 31 services which were delayed due to family reason.

NJEIS 21 Counties	FFY 07-08	FFY 08-09	FFY 09-10	FFY 10-11	FFY 11-12	FFY 12-13	FFY 13-14	FFY 14-15
Cohort A (10 counties)	88.17%		92.09%		97.12%		94.58%	
Cohort B (11 counties)		97.06%		92.70%		97.10%		95.12%

Findings Issued:

As a result of the additional inquiry, 9 findings of non-compliance were issued in FFY 2014 based on this monitoring data from FFY 2014 with Corrective Action Plans to:

Indicator 1	Agencies	Findings	Agency Name(s)	Date of Findings
Service Coordination Units (SCUs)		7	Bergen, Camden, Gloucester, Middlesex, Salem, Sussex, Union	April 15, 2015 (FFY 2014)
Early Intervention Programs (EIPs)		2	TheraNorth, Sunny Days	April 15, 2015 (FFY 2014)
Total Findings for FFY 2014		9		Passaic CAP is from

Number of Findings Closed As of 2/1/16	9		
Number of Findings Not Verified as of 2/1/16	0		

As of December 2015, nine (9) of the nine (9) findings have verified 100% compliance and therefore have been closed.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
12	12	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Twelve (12) findings of non compliance were issued in FFY 2013 based on monitoring data from FFY 2013 performance. These findings went to three (3) SCU and nine (9) EIPs.

- All twelve (12) findings were issued on May 28, 2014.
- Ten (10) of the twelve (12) findings were verified as corrected according to both prongs within 5 months.
- Two (2) of the twelve (12) findings were verified as corrected according to both prongs within 9 months.

NJEIS has:

- Identified the responsible agencies, the percentage of non compliance in each county and determined reasons for delay (root causes).
- Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the corrective action plan required the agency to establish and/or revise appropriate policies, procedures and/or practices. Agencies are held accountable to specific timelines at each step of the process to facilitate services starting sooner to better ensure meeting the 30 day timeline.. (Prong 2).
- Ensured that each agency with identified non-compliance is correctly implementing the specific regulatory requirements based on a monthly review and verification of timely initiation of services for all children who had an IFSP event. These monthly reviews continue until the agency is operating at 100% compliance for this indicator at which point the finding is closed.

Describe how the State verified that each individual case of noncompliance was corrected

NJEIS has accounted for all instances of non compliance identified through the NJEIS database, desk inquiry, and record review and in some instances on-site data verification. The DOH confirmed that services were initiated for each child, although late for any child whose services were not initiated in a timely manner, unless the child was no longer in the jurisdiction of NJEIS as verified by the monitoring team through claims data, service encounter verification sign-off, and progress notes (Prong 1).

Activities for documentation and verification of the correction include updated data from the 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. These monthly reviews continue until the agency is operating at 100% compliance for this indicator at which point the finding is closed.

FFY 2012 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One agency, Passaic Service Coordination Unit (SCU) hasn't corrected to 100% and remains in High Risk grantee status since January 29, 2014. NJEIS continues to monitor the agency for implementation of the CAP and provide technical assistance to assist the agency in obtaining sustained correction. As of 12/23/15, the agency has demonstrated 97.3% compliance and it is expected that the finding will be closed in several months.

Indicator 2: Services in Natural Environments

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			99.20%	99.30%	99.40%	99.45%	99.50%	99.50%	99.50%	99.81%
Data		99.39%	99.29%	97.80%	98.78%	99.46%	99.67%	99.82%	99.81%	99.92%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	99.81%	99.84%	99.87%	99.89%	99.92%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

For federal fiscal year 2014 reporting on performance for July 1, 2014 - June 30, 2015, the Part C Stakeholders reviewed current state/local data, trends over time in performance.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	11,393	
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	Total number of infants and toddlers with IFSPs	11,413	

FFY 2014 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of infants and toddlers with IFSPs	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
11,393	11,413	99.92%	99.81%	99.82%

Provide additional information about this indicator (optional)

In FFY 2014, the 618 data reported (11,393/11,413) 99.82% of infants and toddlers with IFSPs primarily received early intervention services in the home or community-based settings as compared to 99.92% in FFY 2013. The 11,393 included:

- 10,512 children who received services primarily in the home (92.11%); and
- 881 children who received services primarily in community based settings (7.72%) as compared to 840 children (7.80%) in FFY 2013.

In FFY 2014, 0.18% (20 children) of children were counted in other settings (percentage of non-natural environment settings).

NJEIS finds that the requirement, which designates the primary setting as the location where the child receives most of their services, under represents the number of services provided in community settings. A review of the December 1 data from FFY 2014 indicated that 1,028 of the 10,512 that received services primarily in the home also received at least one service in the community. The percentage of children who received any services in the community would be 9.0% (1,028/11,413). This is a 0.3% increase compared to FFY 2013 percentage of 8.7%.

In FFY 2014, 66.67% (14 of the 21) counties exceeded the target of 99.81% of children primarily served in natural environments.

Actions required in FFY 2013 response

None

Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Does your State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i)? No

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A1	2012	Target ≥						56.30%	58.50%	58.50%	58.50%	38.15%
		Data					55.31%	40.54%	40.29%	42.61%	30.62%	38.15%
A2	2012	Target ≥						86.64%	87.50%	89.25%	89.75%	77.29%
		Data					86.64%	89.25%	85.18%	83.59%	79.03%	77.29%
B1	2012	Target ≥						80.39%	83.00%	83.00%	83.00%	82.59%
		Data					80.39%	81.34%	83.79%	82.42%	77.32%	82.59%
B2	2013	Target ≥						60.50%	64.00%	68.00%	72.00%	45.87%
		Data					60.12%	71.49%	65.99%	56.43%	50.73%	45.87%
C1	2012	Target ≥						92.72%	95.00%	95.00%	95.00%	92.85%
		Data					92.72%	95.16%	93.97%	89.45%	92.25%	92.85%
C2	2012	Target ≥						85.44%	86.50%	88.50%	91.12%	78.75%
		Data					85.44%	91.12%	85.85%	83.07%	80.37%	78.75%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A1 ≥	38.15%	39.85%	41.55%	43.25%	45.00%
Target A2 ≥	77.29%	77.97%	78.65%	79.33%	80.00%
Target B1 ≥	82.59%	83.20%	83.80%	84.40%	85.00%
Target B2 ≥	45.87%	46.90%	47.90%	49.02%	50.00%
Target C1 ≥	92.85%	92.85%	92.88%	92.88%	93.00%
Target C2 ≥	78.75%	79.81%	80.87%	81.93%	83.00%

Key:

Explanation of Changes

Pre-populated data in A2 2018 was missing. State added the target of 80.00% as determined by stakeholders.

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

The NJEIS steering committee reviewed Indicator 3 data for FFY 2014 on January 13, 2016 as part of the comprehensive discussion on SPP/APR. Targets were set with the help of the steering committee last year and it was determined to maintain the set target without changes.

As Determinations now include a state's performance results compared to national performance, the committee discussed the possibility of re-assessing targets in January 2017. This will provide the committee with 2 years of NJEIS performance data as compared against national performance. Two years of national data will provide more concrete and useful information to the NJEIS stakeholders, who will then advise if adjustments to targets are indicated/recommended.

FFY 2014 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	3971.00
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Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	103.00	2.59%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	550.00	13.85%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	137.00	3.45%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	296.00	7.45%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2885.00	72.65%

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	433.00	1086.00	38.15%	38.15%	39.87%
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	3181.00	3971.00	77.29%	77.29%	80.11%

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

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	20.00	0.50%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	520.00	13.09%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	1543.00	38.86%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	1315.00	33.12%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	573.00	14.43%

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	2858.00	3398.00	82.59%	82.59%	84.11%

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	1888.00	3971.00	45.87%	45.87%	47.54%

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Infants and toddlers who did not improve functioning	4.00	0.10%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	109.00	2.74%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	672.00	16.92%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	936.00	23.57%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	2250.00	56.66%

	Numerator	Denominator	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	1608.00	1721.00	92.85%	92.85%	93.43%
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	3186.00	3971.00	78.75%	78.75%	80.23%

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? No

Provide the criteria for defining “comparable to same-aged peers” and list the instruments and procedures used to gather data for this indicator.

New Jersey utilizes the Battelle Developmental Inventory 2nd (BDI-2) edition to measure child outcomes and answer Indicator 3A,B & C. Each child is administered the BDI-2 at entry into the NJEIS. Children who participate in the system for at least 6 months are eligible to have a BDI-2 administered at the time of their exit from the NJEIS. Those children that have both an entry BDI-2 and an Exit BDI-2 are included in the data reported here.

NJEIS set the Standard Score of 80 to indicate a child who is comparable to same-aged peers. A child's Standard Score on the Personal-Social Domain is used to answer Indicator 3A. The Cognitive and Communication Domains are used to indicate a child's progress in Indicator 3B and the Adaptive and Motor Domains indicate a child's progress for Indicator 3C. Children are recorded in progress category (d) in 3B & 3C when both Domains met the Standard Score of 80 or above.

Scoring is done electronically and stored using the publisher's data system- the BDI2 Data Manager.

Actions required in FFY 2013 response

None

Indicator 4: Family Involvement

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: 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)

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
A	2012	Target ≥			59.90%	64.00%	68.00%	71.00%	73.01%	73.01%	75.00%	71.18%
		Data			59.90%	67.10%	71.60%	66.80%	69.60%	70.86%	69.37%	71.18%
B	2012	Target ≥			55.60%	60.00%	64.00%	67.50%	69.88%	69.88%	72.00%	66.67%
		Data			55.60%	63.20%	68.40%	63.90%	65.20%	68.86%	64.77%	66.67%
C	2012	Target ≥			70.40%	73.00%	74.50%	75.50%	76.96%	83.80%	85.00%	83.09%
		Data			70.40%	80.80%	83.80%	83.40%	82.70%	81.84%	80.96%	83.09%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target A ≥	71.18%	72.14%	73.09%	74.05%	75.00%
Target B ≥	66.67%	67.50%	68.34%	69.17%	70.00%
Target C ≥	83.09%	83.57%	84.05%	84.52%	85.00%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

For federal fiscal year 2014 reporting on performance for July 1, 2014 - June 30, 2015, the Part C stakeholders reviewed current state/local data and performance trends over time.

FFY 2014 SPP/APR Data

Number of respondent families participating in Part C	790.00
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	575.00
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	790.00
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	546.00
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	790.00

C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	659.00
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	790.00

	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	71.18%	71.18%	72.78%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	66.67%	66.67%	69.11%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	83.09%	83.09%	83.42%

Describe how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State.

For the ninth year, NJEIS 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 analyzed through the Rasch measurement framework.

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 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 a valid and reliable instrument 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.

Data from the scale was analyzed through the Rasch measurement framework. For the IFS 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 state in regard to the impact of early intervention on family outcomes. The mean measure on the IFS was 635.9. The standard deviation was 154, and the standard error of the mean was 5.5. The 95% confidence interval for the mean was 625.1-646.7. This means that there is a 95% likelihood that the true value of the mean is between these two values.

- On August 5, 2015, 3,944 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 13, 2015 to allow families additional time to respond.
- Of the 3,944 surveys distributed across twenty-one counties, 790 were returned for a response rate of 20.03%. In total, 370 paper surveys and 420 web responses were collected. There were 721 responses in English and 69 in Spanish. This number is high enough for the estimated statewide percents on the indicator to be within an adequate confidence interval (confidence level of 95%) based on established survey sample guidelines (e.g., <http://www.surveysystem.com/sscalc.htm>).
- The county return distribution for the state adequately represented the NJEIS county population. The range of variance between the return rate and the December 1 2014 rate by county was -2.2% to +1.5%. The median percent difference was 0.1% and the mode was 0.1%.
- The December 1, 2014 population by race/ethnicity matched the FFY 2014 survey race/ethnicity of respondents within +/-2.07% for all race/ethnicity groups. The NJEIS has historically observed an under-representation in survey response from the African American/Not Hispanic (AA/NH) and Hispanic (H) race/ethnicity groups and therefore has conducted surveys with an over-sampling of these two populations. In addition, secondary follow-up was attempted to families from these race/ethnicity groups that did not respond to the initial survey request.
- The final county return race/ethnicity distribution for the state adequately represented the NJEIS county race/ethnicity population surveyed.

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

- o The range of variance between the return race/ethnicity population and the December 1 2014 race/ethnicity by county was -0.86% to +2.07%.
- o The Median difference between the race/ethnicity population and the returns was -0.36%
- o The Hispanic population was under-represented by less than .54%, and the African American population was under-represented by less than 0.37%.

2014-2015 Race/Ethnicity	Distributed	Returned	Return Rate	Percent of Return	Dec 1 2014 Race	Dec 1 2014 Race %	Difference Return - Race
White/ Not Hispanic	1,554	383	24.65%	48.48%	5,297	46.41%	2.07%
African American/ Not Hispanic	517	81	15.67%	10.25%	1,211	10.61%	-0.36%
Hispanic	1,526	248	16.25%	31.39%	3,643	31.92%	-0.53%
Native Hawaiian or other Pacific Islander	10	2	20.00%	0.25%	30	0.26%	-0.01%
Asian	193	47	24.35%	5.95%	777	6.81%	-0.86%
American Indian/ Alaskan Native	5	1	20.00%	0.13%	9	0.08%	0.05%
Multiracial	139	28	20.14%	3.54%	446	3.91%	-0.36%
Total	3,944	790	20.03%	100.00%	11,413	100.00%	

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No

Yes, the data accurately represent the demographics of the State

No, the data does not accurately represent the demographics of the State

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

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 6,497 families. The NJEIS filters out all duplicates (siblings, multiple births). NJEIS total unduplicated population size is 6,215 and is documented by the table below.

CountyName	African American/ Not Hispanic	American Indian/ Alaskan Native	Asian	Hispanic	Multiracial	Native Hawaiian or other Pacific Islander	White/ Not Hispanic	Grand Total
ATLANTIC	21		3	64	12		85	185
BERGEN	29		61	186	25	5	279	585
BURLINGTON	41	2	9	46	24		164	286
CAMDEN	59		13	97	18		143	330
CAPE MAY	1			5	1		30	37
CUMBERLAND	12			56	6		26	100
ESSEX	211	2	15	224	19	3	129	603
GLOUCESTER	13			20	17	1	148	199
HUDSON	28	1	50	228	16	3	91	417
HUNTERDON	2		2	23	3		38	68
MERCER	48		21	73	6		66	214
MIDDLESEX	38	1	92	200	15	3	181	530
MONMOUTH	26		9	113	18		236	402
MORRIS	6		23	65	13	2	158	267
OCEAN	14		6	105	12		628	765
PASSAIC	41		15	223	15	2	114	410
SALEM	5			6	2		32	45
SOMERSET	18		31	61	10		97	217
SUSSEX	1		3	18	2		65	89
UNION	76		15	152	15		154	412
WARREN	6		3	8	2		35	54
Grand Total	696	6	371	1973	251	19	2899	6215

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, African American/Not Hispanic (AA/NH) and Hispanic (H) families have lower return rates than other race groups (White/Asian/American Indian/Hawaiian-Pacific Islander/Multi Race)(W/A/AI/HI/PI/MULTI). This difference was documented in the analysis of the 2005-2006 family survey return rates. Therefore, the

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

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 African American/Not Hispanic (AA/H) and Hispanic (H) race group were pulled at higher percentages than other race groups (W/A/AI/PI/MULTI). 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 20% with a minimal county stratum size of 20 and a maximum county stratum size of 75.

The margin of error (MOE) per county varied from 11% to 21%. The margin of error for 15 out the 21 counties is less than or equal to 18%.

The overall statewide margin of error (MOE) was 4%.

Step 2: Calculate outgoing sample.

To compensate for a projected lower response rate from African American/Not Hispanic and Hispanic race groups, an additional sample was drawn in each of the county stratum. With a 20% expected return rate, the actual number of family surveys mailed was 3,944 for the NJEIS population of 6,215 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.

CID	CountyName	W/AI/A /HI/PI /MULTI	Child Count		Expected returns			design effects		Sample out		
			B/H	Child count	N	s.f.	MOE	wt	wt-norm	W/AI/A /HI/PI /MULTI	f.s.r.	B/H
1	ATLANTIC	100	85	185	20	11%	21%	0.9	1.E-03	54	54%	69
2	BERGEN	370	215	585	59	10%	12%	1.0	2.E-03	187	51%	163
3	BURLINGTON	199	87	286	29	10%	17%	1.0	2.E-03	101	51%	66
4	CAMDEN	174	156	330	33	10%	16%	1.0	2.E-03	87	50%	117
5	CAPE MAY	31	6	37	20	54%	15%	0.2	3.E-04	31	100%	6
6	CUMBERLAND	32	68	100	20	20%	20%	0.5	8.E-04	32	100%	68
7	ESSEX	168	435	603	60	10%	12%	1.0	2.E-03	84	50%	325
8	GLOUCESTER	166	33	199	20	10%	21%	1.0	2.E-03	83	50%	25
9	HUDSON	161	256	417	42	10%	14%	1.0	2.E-03	81	50%	193
10	HUNTERDON	43	25	68	20	29%	18%	0.3	5.E-04	43	100%	25
11	MERCER	93	121	214	21	10%	20%	1.0	2.E-03	46	49%	89
12	MIDDLESEX	292	238	530	53	10%	13%	1.0	2.E-03	146	50%	179
13	MONMOUTH	263	139	402	40	10%	15%	1.0	2.E-03	131	50%	104
14	MORRIS	196	71	267	27	10%	18%	1.0	2.E-03	99	51%	54
15	OCEAN	646	119	765	75	10%	11%	1.0	2.E-03	317	49%	88
16	PASSAIC	146	264	410	41	10%	15%	1.0	2.E-03	73	50%	198
17	SALEM	34	11	45	20	44%	16%	0.2	4.E-04	34	100%	11
18	SOMERSET	138	79	217	22	10%	20%	1.0	2.E-03	70	51%	60
19	SUSSEX	70	19	89	20	22%	19%	0.4	7.E-04	70	100%	19

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

20	UNION	184	228	412	41	10%	15%	1.0	2.E-03	92	50%	170
21	WARREN	40	14	54	20	37%	17%	0.3	4.E-04	40	100%	14
	Grand Total	3546	2669	6215	703		4%	648	648	1901		2043

Promotion of the Survey and Follow-Up

Each year, families mail the completed survey directly to an outside contractor to analyze the survey results. A unique child identification number is documented on each survey to allow for demographic analysis. The contractor conducting the analysis only provides a listing of the child identification numbers of families responding to the survey back to the NJEIS. This enables the NJEIS to conduct follow-up activities to obtain a representative sample. At no time does the contractor share information with NJEIS on how any individual family responded.

To ensure NJEIS receives the representative sample, the following are implemented annually: Distributing the survey with the impact questions on one form with English on one side and Spanish on the other side so that all families in the sample receive the survey in both languages.

Families who do not identify English as their primary language are identified through the demographic data and the NJEIS provides families with a translated version of the survey (if available); or offers to conduct a phone survey with the family utilizing Language Line.

Language	Total
African	2
Arabic	33
Cantonese	2
Chinese	9
English	3099
Farsi	1
French	2
French Creole	8
Hebrew	2
Hindi	16
Italian	2
Japanese	2
Korean	5
Laotian	1
Mandarin	4
Polish	8
Portuguese	15
Russian	4
Sign Language	2
Spanish	717
Tagalog	7
Turkish	3
Grand Total	3944

Since FFY 2008, NJEIS added an option for families to respond to the survey through the Internet using a unique child identification number (PLINK number). To improve response rates, the lead agency reviews and verifies family addresses with the Service Coordination Units prior to the initial mailing of the survey. Returned mail and phone contacts with families resulted in a verification, correction of address and re-mailing of the survey to a confirmed address and/or the option to complete the survey via phone and Internet. The response rate is reviewed and any counties under represented on the expected return rate, are identified by race.

Additional follow up surveys are conducted to the under-represented race groups per counties by having regional family support coordinators contact families and offer assistance to complete the survey by mail or through the Internet. Once there is sufficient response, the survey is closed.

Provide additional information about this indicator (optional)

There were 790 returned surveys. The return distribution by county compared to the December 1 2014 child count is displayed below. Passaic county was slightly under represented by 2.2%.

Warren county was slightly over represented by 1.5%.

The Median was 0.1%.

The Range was -2.2% to 1.5%.

The Mode was 0.1%.

2015 County	Distributed	% Distributed	N Returned	% Returned	Dec 1 2014	Dec 1 2014 %	Difference Return - Dec 1
ATLANTIC	123	3.1%	25	3.16%	316	2.8%	0.4%
BERGEN	350	8.9%	73	9.24%	1132	9.9%	-0.7%
BURLINGTON	167	4.2%	32	4.05%	492	4.3%	-0.3%
CAMDEN	204	5.2%	32	4.05%	586	5.1%	-1.1%
CAPE MAY	37	0.9%	9	1.14%	79	0.7%	0.4%
CUMBERLAND	100	2.5%	17	2.15%	175	1.5%	0.6%
ESSEX	409	10.4%	74	9.37%	1061	9.3%	0.1%
GLOUCESTER	108	2.7%	22	2.78%	371	3.3%	-0.5%
HUDSON	274	6.9%	52	6.58%	832	7.3%	-0.7%
HUNTERDON	68	1.7%	17	2.15%	114	1.0%	1.2%

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

MERCER	135	3.4%	35	4.43%	379	3.3%	1.1%
MIDDLESEX	325	8.2%	70	8.86%	1032	9.0%	-0.2%
MONMOUTH	235	6.0%	49	6.20%	756	6.6%	-0.4%
MORRIS	153	3.9%	34	4.30%	475	4.2%	0.1%
OCEAN	405	10.3%	84	10.63%	1306	11.4%	-0.8%
PASSAIC	271	6.9%	39	4.94%	818	7.2%	-2.2%
SALEM	45	1.1%	10	1.27%	82	0.7%	0.5%
SOMERSET	130	3.3%	27	3.42%	404	3.5%	-0.1%
SUSSEX	89	2.3%	18	2.28%	163	1.4%	0.9%
UNION	262	6.6%	53	6.71%	749	6.6%	0.1%
WARREN	54	1.4%	18	2.28%	91	0.8%	1.5%
	3944	100.0%	790	100.00%	11413	100.0%	

Responses were received from all twenty one (21) counties in New Jersey.

Survey responses were received from 790 families, representing a 20.03% return rate (790/3944).

The target was met for 4A, 4B and 4C. Specifically:

Performance increased 1.6% in 4A from 71.18% in FFY 2013 to 72.78% in FFY 2014.

Performance increased 2.44% in 4B from 66.67% in FFY 2013 to 69.11% in FFY 2014.

Performance increased 0.33% in 4C from 83.09% in FFY 2013 to 83.42% in FFY 2014.

The following chart represents the performance by race/ethnicity groups:

SFY 2015 Percent of Respondents Meeting or Exceeding each of the Standards for Indicator #4 by Race/Ethnicity

Race/Ethnicity	Indicator 4A	Indicator 4B	Indicator 4C
	Percent of families who report that Early Intervention services helped them know their rights	Percent of families who report that Early Intervention services helped them effectively communicate their children's needs	Percent of families who report that Early Intervention services helped them help their child develop and learn
STATE PERFORMANCE	72.78%	69.11%	83.42%
STATE TARGETS	71.18%	66.67%	83.09%
African American/Not Hispanic (N=81)	65.4%	61.7%	76.5%
American Indian/ Alaskan Native (N=1)	100.0%	100.0%	100.0%
Asian (N=47)	66.0%	61.7%	83.0%
Hispanic (N=248)	72.2%	69.4%	86.3%
Multiracial (N=28)	71.4%	71.4%	78.6%
Native Hawaiian or Other Pacific Islander (N=2)	100.0%	100.0%	100.0%
White/Not Hispanic (N=383)	75.5%	71.0%	83.3%

Based on 2011 Steering Committee recommendations, state and county performance on this indicator are included in the local determination criteria and a statewide report comparing trend by county is posted on the state website at:

http://www.state.nj.us/health/fhs/eis/documents/system_data/family_outcome_survey_result.pdf

Actions required in FFY 2013 response

None

Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

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

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			0.62%	0.62%	0.72%	0.82%	0.72%	0.72%	0.75%	0.65%
Data		0.56%	0.63%	0.65%	0.57%	0.67%	0.64%	0.63%	0.62%	0.65%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	0.65%	0.65%	0.66%	0.66%	0.67%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

For federal fiscal year 2013 reporting on performance for July 1, 2014 - June 30, 2015, the Part C stakeholders reviewed current state/local data and performance trends over time.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	Number of infants and toddlers birth to 1 with IFSPs	729	null
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	4/3/2014	Population of infants and toddlers birth to 1	104,144	null

FFY 2014 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
729	104,144	0.65%	0.65%	0.70%

Provide additional information about this indicator (optional)

FFY 2014 status of 0.70% is 0.05% higher than the FFY 2013 performance and also met the target of 0.65% as recommended by stakeholders for this reporting period. When compared with FFY 2013, the New Jersey state percentage of children birth to one year increased by 0.05% (0.65%-0.70%) while the national percentage of 1.15% (45,298/3,948,350) increased by 0.04% (1.11%-1.15%).

In FFY 2014, 66.67% (14/21), fourteen of the twenty-one NJEIS counties met or exceeded the target of 0.65%.

The total number of referrals of children, birth to age one year, received from July 1, 2014 through June 30, 2015, increased by 18.85% (3,633 to 4,318) than the number received from July 1, 2013 through June 30, 2014.

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

The number of referrals from July 1, 2014 through June 30, 2015 examined by age and eligibility outcome indicates that:

- 4.18% (4,318/103,305) of 2014 live births as per the Centers for Disease Control and Prevention National Center for Health Statistics website (most current data as of December 2015) were referred to NJEIS. This is a 0.64% increase compared to FFY 2014 (3.54%=3633/102,575).
- The ineligibility rate for children referred birth to age one was 27.51% in FFY 2014 and 33.0% in FFY 2013. This is a 5.49% decrease in the amount of ineligible children aged 0-1.

The chart below summarizes the five year trend in referrals and ineligibility rates:

- In FFY 2014 there was an increase in the overall referral growth rate by 2.7% and 13.52% in children aged 0-1.
- The ineligibility rate decreased by 5.5% from 33.0% in FFY 2013 to 27.5% in FFY 2014.

Age	FFY 2010 Referrals	FFY 2011 Referrals	FFY 2012 Referrals	FFY 2013 Referrals	FFY 2014 Referrals	FFY 2010	FFY 2011	FFY 2012	FFY 2013	FFY 2014	FFY 2010	FFY 2011	FFY 2012	FFY 2013	FFY 2014
						% Growth	Inelig	Inelig	Inelig	Inelig	Inelig				
0 – 1	3163	3349	3449	3633	4318	-4.84%	5.88%	2.99%	5.33%	18.85%	30.1%	31.3%	34.9%	33.0%	27.5%
1 – 2	6538	6617	6625	7127	7618	0.99%	1.21%	0.12%	7.58%	6.89%	22.1%	23.0%	23.2%	22.5%	19.5%
2 – 3	5273	5722	5690	6082	6513	1.72%	8.52%	-0.56%	6.89%	7.09%	25.2%	26.8%	32.0%	25.9%	22.8%
Total	14,974	15,688	15,764	16,842	18,449	-0.05%	4.77%	0.48%	6.84%	9.54%	24.9%	26.2%	28.9%	26.0%	22.6%

Actions required in FFY 2013 response

None

Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

Results indicator: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

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

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥			2.31%	2.31%	2.55%	2.70%	2.87%	3.14%	3.14%	3.38%
Data		2.53%	2.80%	2.84%	2.93%	3.14%	3.31%	3.35%	3.22%	3.38%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥	3.38%	3.40%	3.42%	3.43%	3.45%

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

For federal fiscal year 2014 reporting on performance for July 1, 2014 - June 30, 2015, the Part C stakeholders reviewed current state/local data and performance , trends over time.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Child Count/Educational Environment Data Groups	7/2/2015	Number of infants and toddlers birth to 3 with IFSPs	11,413	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	7/2/2015	Population of infants and toddlers birth to 3	316,129	

FFY 2014 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
11,413	316,129	3.38%	3.38%	3.61%

Provide additional information about this indicator (optional)

For FFY 2014, New Jersey served 3.61% (11,413/316,129) of infants and toddlers, birth to three, with IFSPs, compared to the national average of 2.95% (350,581/11,868,245).

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

New Jersey met the target of 3.38% as set by stakeholders for this reporting period.

When compared to FFY 2013, the percentage of infants, birth to three, with IFSPs in New Jersey increased by 0.23% (3.38% - 3.61%) while the national percentage increased 0.13% (2.82% - 2.95%).

The total number of referrals birth to three years received July 1, 2014 through June 30, 2015 increased by 1,607 children, which is a 9.54% increase (16,842 to 18,449).

0.57% (12/21) of NJEIS counties met or exceeded the target of 3.38%.

Actions required in FFY 2013 response

None

Indicator 7: 45-day timeline

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		86.20%	95.80%	92.77%	91.59%	97.89%	97.92%	99.11%	98.21%	98.85%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
335	348	98.85%	100%	96.26%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline)	null
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Explanation of Slippage

The slippage in FFY 2014 Initial IFSP meetings conducted within 45 days of referral was primarily due to the increase in Department of Children and Families (DCF) Division of Child Protection & Permanency (DCP&P) referrals.

The New Jersey DCP&P was audited in FFY 2014 which found many children that should have been referred to NJEIS, were not. Referrals from DCP&P increased from 11.23% in FFY 13 (2,168 children) to 14.34% in FFY 14 (3,008 children) of all referrals. Overall, this was a 38.8% increase in the number of DCP&P referrals from FFY 13 to FFY 14. This influx of referrals caused delays in conducting an initial evaluation and IFSP meeting within Part C timelines of 45 days from referral.

What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

Sampling Plan

Data reported for this indicator are from the NJEIS state 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.

NJEIS uses a simple random sampling plan without replacement, and a 95% confidence level and +/- 5 confidence interval, ensures that child records were chosen appropriately and represent the state population.

Data Desk Audit, Inquiry and Record Review

Monitoring begins with a data desk audit based on a simple random sample without replacement of three months of FFY 2014 data (August, September, and October 2014). 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 inquiry required the Service Coordination Units and EIP Targeted Evaluation Teams (TETs) to submit copies of child progress notes, and service encounter verification logs as verification of the data in the statewide database and claims submission.

The Lead Agency 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.

Provide additional information about this indicator (optional)

Data Analysis and Results

Of the 2,896 children for whom an initial IFSP meeting was required to be conducted during the three months of inquiry, data from a random selection of 348 children were monitored. Of the 348 children, 335 of the IFSPs were in compliance with the 45 calendar day requirement, including the 37 initial IFSP meetings that were delayed because of family reasons and 5 due to verified extreme weather.

The 37 family-initiated reasons for delay and 5 verified extreme weather delays were included in the calculations and documented in service coordinator notes and NJEIS data system. Family reasons include child illness or hospitalization, family response time, missed scheduled appointments and family requested delays related to the parent's work schedule.

Indicator 7 Data

	Children
Total IFSPs for Quarter of Data: August, September and October 2014	2,896
Sample of the Quarter (Denominator)	348
Initial Timely Initial IFSPs (Dirty Data without Desk Inquiry)	293
Initial Untimely Initial IFSPs (Dirty Data without Desk Inquiry)	55
Desk Inquiry Verification of Family Reason for delay + Extreme weather	37 + 5= 42
Desk Inquiry Verification of Untimely IFSP	13
Corrected Numerator (Timely + Family Reasons + corrected Timely)	293 + 42= 335
State Compliance Percentage	335/348= 96.26%

In order to determine the responsibility for the noncompliance identified, additional data were reviewed to determine the following:

- Of the thirteen (13) initial IFSP meetings delayed for systems reasons: one (1) out of the 348 (0.29%) was due to the targeted evaluation team; four (4) out of 348 (1.15%) delays were the result of the Service Coordination Unit and eight (8) out of the 348 (2.30%) was the result of a Regional Early Intervention Collaborative (REIC) delay at the System Point of Entry (SPOE).
- No finding was issued to the TET as NJEIS verified correction according to both prongs.
- NJEIS reviewed documentation to verify that all thirteen (13) children who were delayed for system reasons received their initial IFSP meeting although late. The range of days delayed included:
 - 3 children received their IFSP meeting 2-4 days late;
 - 4 children received their IFSP meeting between 6-14 days late and;
 - 6 children received their IFSP meeting over 14 days late as depicted in the chart below.

Untimely Initial IFSPs: # of Days Delayed

Children

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

1 to 4 Days Delayed	3
5 to 14 Days Delayed	4
14+ Days Delayed	6

Findings Issued:

As a result of the additional inquiry, three (3) findings were issued and the agencies were required to complete a Corrective Action Plan (CAP) and monthly reports until 100% compliance is verified as per OSEP 09-02.

Indicator 7

Agencies	Findings	Agency Name(s)	Date of Finding
Service Coordination Units (SCUs) Targeted Evaluation Team (TETs)	1	Hudson	July 23, 2015 (FFY 15)
Regional Early Intervention Collaborative (REICs)	2	MJREIC (for 2 counties), FLREIC (for 2 counties)	July 23, 2015 (FFY 15)
Total Findings for FFY 2014	3		SJREIC CAP is from FFY 13
Number of Findings Closed As of 2/1/16	2		
Number of Findings Not Verified as of 2/1/16	1	Hudson	Agency has until July 22, 2016 to verify correction

As of February 1, 2016, two (2) of the three (3) findings have verified compliance. The remaining agency continues to improve but has not yet obtained 100% compliance.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
3	2	0	1

FFY 2013 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

NJEIS has accounted for all instances of noncompliance identified through the NJEIS state database, desk audit/inquiry, record review and, in some instances, onsite data verification. In addition, 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 the state 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.

NJEIS:

- Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
- Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the corrective action plan requires the agency to establish and/or revise appropriate policies, procedures and/or practices (Prong 2).

- Ensured that each agency with identified non-compliance is correctly implementing the specific regulatory requirements based on a monthly review and verification of timely initial IFSP meeting events. These monthly reviews continued until the agency is operating at 100% compliance for this indicator at which point the finding is closed (Prong 2).

Describe how the State verified that each individual case of noncompliance was corrected

The process NJEIS used to verify correction was comprehensive with data drill down to the child specific level. In addition, monthly updated data was 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.

NJEIS accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and, in some instances, onsite data verification. The DOH confirmed that an initial IFSP meeting was held, although late for any child whose initial IFSP meeting did not occur in a timely manner, unless the child was no longer in the jurisdiction of NJEIS as verified by the monitoring team through claims data, service encounter verification sign-off, IFSP team pages and progress notes (Prong 1).

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One out of three agencies have not yet corrected the non-compliance from FFY 2013. The Southern New Jersey Regional Early Intervention Collaborative (SJREIC) continues to be monitored monthly on their initial 45 day IFSP performance. Corrective action continues to focus on timely contact/follow-up with the family.

The lead agency has continued to provide the agency technical support and has gone on-site during FFY 14 and FFY 15 to do observations and provide technical assistance. Monitoring staff provided feedback on the agency's practices and procedures which should help the agency get to 100% compliance. The agency's most current performance compliance is 93.4%.

Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2011

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		95.20%	96.50%	99.20%	99.70%	100%	99.65%	98.10%	100%	100%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

Data include only those toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday.

- Yes
- No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
314	314	100%	100%	100%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of children exiting Part C who have an IFSP with transition steps and services)	null
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What is the source of the data provided for this indicator?

- State monitoring



Describe the method used to select EIS programs for monitoring.

Sampling Plan

Data were reported for all twenty-one counties.

Data reported for 8A were collected through the annual desk audit record review process. Data reported on the desk audit is verified against what is in the child's record (e.g. NJEIS IFSP Review Transition Information Page).

The data desk audit was conducted on one quarter of FFY14 for the months of March, April and May 2015 and identified 2,424 children that turned age three.

Sampling methodology was implemented to ensure that the NJEIS population is appropriately represented based on the population size of the state. Therefore, a simple random sampling plan without replacement with a 95% confidence level and +/- 5 confidence interval ensures that child records chosen appropriately represent the state population.

Of the 2,424 children who exited the program, a random selection of 314 children were monitored.

Data Desk Audit, Inquiry and Record Review

The monitoring team first confirmed the child's date of birth was accurate in the NJEIS state database. Based on the child's date of birth, an inquiry was prepared for the county to identify possible non-compliance.

The monitoring team implemented inquiry which drilled down to obtain child specific information, reasons for delays and verification of transition steps, although late. The Service Coordination Units were required to submit copies of child progress notes, IFSPs, and service encounter verification logs. The monitoring team used all the information received to determine where in the process the delay occurred and who was responsible.

Provide additional information about this indicator (optional)

Data Analysis and Results

8A Data	Children
Total of Children who turned 3 for Quarter of Data: March-May 2015	2,424
Sample of the Quarter (Denominator)	314
Developed IFSP Transition Steps and Services >=90 days to <=9 mons prior to third birthday	314
State Compliance Percentage	314/314 = 100%
NJEIS achieved 100% compliance on 314/314 records.	
NJEIS had continued 100% compliance on this indicator in FFY 12, FFY 13 and FFY 14 .	

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
0	0	0	0

Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		98.90%	98.40%	98.74%	99.70%	100%	99.19%	91.14%	90.24%	92.40%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

Data include notification to both the SEA and LEA

- Yes
- No

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
270	314	92.40%	100%	95.74%

Number of parents who opted out (this number will be subtracted from the number of toddlers with disabilities exiting Part C who were potentially eligible for Part B when calculating the FFY 2014 Data)	32
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Describe the method used to collect these data

Sampling Plan

Data were reported for all twenty-one counties.

Data reported for 8B LEA notification monitoring were collected through the annual desk audit record review process. Data reported on the desk audit is verified against what was in the child's record (e.g. NJEIS IFSP Review Transition Information Page, progress notes, opt out letters and notification/identification letters).

A data desk audit was conducted on one quarter of FFY14 for the months of March, April and May 2015 that identified 2,424 children that turned age three.

The NJEIS implemented a sampling methodology for monitoring notification to the LEA to ensure that the NJEIS population is appropriately represented based on the population size of the state. Therefore, a simple random sampling plan without replacement with a 95% confidence level and +/- 5 confidence interval ensures that child records were appropriately represented.

Of the 2,424 children, a random selection of 314 children was monitored.

Of the 314 children, thirty-two (32) families opted out of SEA/LEA notification.

Data Desk Audit, Inquiry and Record Review

The LEA notification is the responsibility of service coordination units. The Lead Agency submits the notification to the SEA.

The monitoring team first confirmed the child's date of birth was accurate in the NJEIS database. Based on the child's date of birth, an inquiry was prepared and forwarded to the appropriate county to address possible non-compliance.

The monitoring team implemented inquiry which drilled down to obtain child specific information, reasons for delays and verification of transition notice, although late. The Service Coordination Units were required to submit copies of child progress notes, IFSPs, service encounter verification logs, signed opt out forms and LEA notification letters. The monitoring team used all the information received to determine where in the process the delay occurred and who was responsible.

Do you have a written opt-out policy? Yes

Is the policy on file with the Department? Yes

What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

Data is selected from all twenty-one counties.

A data desk audit was conducted on one quarter of FFY14 for the months of March, April and May 2015 that identified 2,424 children that turned age three representing all twenty-one counties.

The NJEIS implemented a sampling methodology for monitoring notification to the LEA to ensure that the NJEIS population is appropriately represented based on the population size of the state. Therefore, a simple random sampling plan without replacement with a 95% confidence level and +/- 5 confidence interval ensures that child records were appropriately represented.

Provide additional information about this indicator (optional)

Data Analysis and Results

8B Data	Children
Total of Children who turned 3 for Quarter of Data: March-May 2015	2,424

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Sample of the Quarter (Denominator)	314
Notified the SEA at least 90 days prior to third birthday	282
Notified the LEA at least 90 days prior to third birthday	270
Opt Out	32
Untimely Notification	12
Potentially Eligible-Opt Out	314-32=282
State Compliance Percentage	270/282=95.74%

The DOH sent 100% (282/282) of notifications that were required (consistent with any opt-out policy adopted by the state) directly to the SEA at least 90 days prior to toddlers with disabilities turning three (in March, April and May 2015).

NJEIS achieved 95.74% compliance based on 270/282 of notifications that were required (consistent with any opt-out policy adopted by the state) directly to the LEA at least 90 days prior to toddlers with disabilities turning three (in March, April and May 2015).

NJEIS increased compliance by 3.34% on this indicator moving from 92.40% reported for FFY 2013 to 95.74% for FFY 2014.

Findings Issued:

As a result of the additional inquiry, eight (8) findings were issued and the agencies were required to complete a Corrective Action Plan (CAP) and monthly reports until 100% compliance is verified as per OSEP 09-02:

Indicator 8B

Agencies	Findings	Agency Name(s)	Date of Finding
Service Coordination Units (SCUs)	8	Bergen, Burlington, Camden, Gloucester, Middlesex, Morris, Passaic, Somerset	June 30, 2015 (FFY 14)
Total Findings for FFY 2014	8		
Number of Findings Closed As of 2/1/16	8		
Number of Findings Not Verified as of 2/1/16	0		

As of January 2016, eight (8) of the eight (8) findings have verified 100% compliance and therefore have been closed.

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	8	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Based on FFY 2013 data, eight (8) agencies were found to have non-compliance for 8B. The eight agencies were each given a finding issued on September 16, 2014. These agencies developed CAPs and NJEIS reviewed monthly data, tracked and verified correction of the non-compliance. Eight of the eight agencies corrected within one year of the finding.

NJEIS has accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and, in some instances, onsite data verification. In addition, monthly updated data was used to track and verify correction of all noncompliance. Activities for documentation and verification of the correction include updated data from the 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.

NJEIS:

- Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
- 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 (Prong 2).
- Ensured that each agency with identified non-compliance was correctly implementing the specific regulatory requirements based on a monthly review and verification of timely initial IFSP meeting events. These monthly reviews continued until the agency was operating at 100% compliance for this indicator at which point the finding was closed (Prong 2).

Describe how the State verified that each individual case of noncompliance was corrected

The process NJEIS used to verify correction was comprehensive with data drill down to the child specific level. In addition, monthly updated data was used to track and verify correction of all noncompliance. Activities for documentation and verification of the correction include updated data from the 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.

NJEIS has accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and, in some instances, onsite data verification. The DOH confirmed that notification to the SEA and the LEA where the toddler resides, consistent with the NJEIS opt-out policy, was provided at least 90 days prior to the toddlers third birthday for toddler potentially eligible for Part B preschool services. For any child whose notification did not occur in a timely manner, notification was provided unless the child was no longer in the jurisdiction of NJEIS as verified by the monitoring team through claims data, service encounter verification sign-off, IFSP team pages and progress notes (Prong 1).

Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Compliance indicator: The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:

- A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;
- B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and
- C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2013

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target			100%	100%	100%	100%	100%	100%	100%	100%
Data		96.00%	95.20%	95.00%	92.70%	90.48%	90.94%	96.18%	95.88%	93.38%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%

FFY 2014 SPP/APR Data

Data reflect only those toddlers for whom the Lead Agency has conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services

- Yes
- No

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
231	314	93.38%	100%	95.94%

Number of toddlers for whom the parent did not provide approval for the transition conference (this number will be subtracted from the number of toddlers with disabilities exiting Part C who were potentially eligible for Part B when calculating the FFY 2014 Data)	43
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Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B)

29

What is the source of the data provided for this indicator?

- State monitoring
- State database

Describe the method used to select EIS programs for monitoring.

Sampling Plan

Data were reported for all twenty-one counties.

Data reported for 8C Transition Planning Conference (TPC) monitoring was collected through the annual desk audit record review process. Data reported on the desk audit is verified against what is in the child's record (e.g. NJEIS IFSP Review Transition Information and Team pages, progress notes, service encounter verifications; service authorizations and TPC invitation letter/emails).

A data desk audit was conducted on one quarter of FFY14 for the months of March, April and May 2015 that identified 2,424 children that turned age three.

Sampling methodology was implemented to ensure that the NJEIS population is appropriately represented based on the population size of the state. Therefore, a simple random sampling plan without replacement with a 95% confidence level and +/- 5 confidence interval ensures that child records were appropriately represented.

Of the 2,424 children, a random selection of 314 children were monitored. Of the 314 children, 43 families declined the TPC, reducing the total number of records monitored to 271 children.

Data Desk Audit, Inquiry and Record Review

The NJEIS used two sources of data from the database: (1) date of the TPC obtained from the team page signed by the parent; and (2) date of the TPC recorded from the service coordinator verification log. The monitoring team confirmed this data through desk audit analysis using the state database. Based on these dates, and the child's date of birth, an inquiry was prepared and forwarded to the appropriate county to review possible non-compliance.

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 required to submit copies of child progress notes, TPC and LEA notification letters, IFSPs, 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.

Provide additional information about this indicator (optional)

Data Analysis and Results

8C Data	Children
Total of Children who turned 3 for Quarter of Data: March-May 2015	2,424
Sample of the Quarter (Denominator)	314
Families who declined a TPC	43
Initial Timely TPCs (Dirty Data without Desk Inquiry)	231
Initial Untimely TPCs (Dirty Data without Desk Inquiry)	40
Desk Inquiry Verification of Family Reason for delay or on time	29
Desk Inquiry Verification of Untimely TPC	11
Corrected Numerator (Timely + Family Reasons + corrected Timely)	231 + 29 = 260
Sample of the Quarter - Family Declines	314 - 43 = 271
State Compliance Percentage	260/271= 95.94%

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

95.94% (260/271) 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 within the required timeline.

The numerator and denominator does not include the 43 families who did not provide approval to conduct a transition planning conference.

Of the 271 children, 231 were timely, 29 were delayed due to family reasons and 11 untimely due to NJEIS.

All eleven (11) children whose TPCs were delayed for systems reasons, exited the system prior to receiving a TPC.

The 29 family-initiated reasons were included in the calculations and documented in service coordinator notes. Family reasons included family vacations, child illness or hospitalization, family response time, family not keeping scheduled appointments and family requested delays.

NJEIS performance for this indicator increased by 2.56% from 93.38% in FFY 2013 to 95.94% in FFY 2014.

Findings Issued:

As a result of the additional inquiry, four (4) findings were issued and the agencies were required to complete a Corrective Action Plan (CAP) and monthly reports until 100% compliance is verified as per OSEP 09-02:

Indicator 8C

Agencies	Findings	Agency Name(s)	Date of Finding
Service Coordination Units (SCUs)	4	Morris, Ocean, Passaic, Union	June 30, 2015 (FFY 14)
Total Findings for FFY 2014	4		
Number of Findings Closed As of 2/1/16	0		
Number of Findings Not Verified as of 2/1/16	4		Agency has until June 29, 2016 to correction
As of January 2016, zero (0) of the four (4) findings have verified 100% compliance however, the agencies have until June 29, 2016 to verify correction.			

Actions required in FFY 2013 response

None

Correction of Findings of Noncompliance Identified in FFY 2013

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	7	0	0

FFY 2013 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

Based on FFY 2013 data, seven (7) findings were issued on September 16, 2014 based on FFY 2013 non-compliance. These agencies developed CAPs and NJEIS reviewed monthly data, tracked and verified correction of the non-compliance. All of the findings were closed timely between September 2014 and February 2015 after correction of both prongs was verified

in accordance with federal requirements.

NJEIS:

- Identified the responsible agencies, the percentage of noncompliance in each county and determined reasons for delay (root causes).
- Determined if any policies, procedures and/or practices contributed to the reasons for delays. If yes, the corrective action plan required the agency to establish and/or revise appropriate policies, procedures and/or practices (Prong 2).
- Ensured that each agency with identified non-compliance was correctly implementing the specific regulatory requirements based on a monthly review and verification of timely initial IFSP meeting events. These monthly reviews continued until the agency was operating at 100% compliance for this indicator at which point the finding was closed (Prong 2).

Describe how the State verified that each individual case of noncompliance was corrected

The process NJEIS used to verify correction was comprehensive with data drill down to the child specific level. In addition, monthly updated data was used to track and verify correction of all noncompliance. Activities for documentation and verification of the correction included updated data from the state 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.

NJEIS has accounted for all instances of noncompliance identified through the NJEIS database, desk inquiry, and record review and, in some instances, onsite data verification. The DOH confirmed that a transition planning conference was provided at least 90 days prior to the toddlers third birthday for toddlers potentially eligible for Part B preschool services. For any child whose transition planning conference did not occur in a timely manner, a conference was provided, although late unless the child was no longer in the jurisdiction of NJEIS. This was verified by the monitoring team through claims data, service encounter verification sign-off, IFSP team pages and progress notes (Prong 1).

Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: 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)

Historical Data

Baseline Data:

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥										
Data										

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥					

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	3.1(a) Number resolution sessions resolved through settlement agreements	NA	null
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/5/2015	3.1 Number of resolution sessions	NA	null

FFY 2014 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
NA	NA			NA

Actions required in FFY 2013 response

None

Indicator 10: Mediation

Monitoring Priority: Effective General Supervision Part C / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Target ≥										
Data		100%	100%	100%	100%	50.00%	50.00%	0%	100%	

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target ≥					

Key:

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1.a.i Mediations agreements related to due process complaints	n	null
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1.b.i Mediations agreements not related to due process complaints	n	null
SY 2014-15 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/5/2015	2.1 Mediations held	n	null

FFY 2014 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2013 Data*	FFY 2014 Target*	FFY 2014 Data
0	0	0			

Actions required in FFY 2013 response

None

Indicator 11: State Systemic Improvement Plan

Monitoring Priority: General Supervision

Results indicator: The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Reported Data

Baseline Data: 2013

FFY	2013	2014
Target		38.15%
Data	38.15%	39.87%

Key: Gray – Data Prior to Baseline Yellow – Baseline
Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	39.85%	41.55%	43.25%	45.00%

Key:

Description of Measure

The State Identified Measureable Result (SIMR) is to substantially increase the rate of children's growth in their development of positive social emotional skills by the time they exit the program as defined by Indicator 3A Summary Statement 1.

The NJEIS uses the Battelle Developmental Inventory 2nd edition (BDI) to report child outcomes in Indicator 3. Each referred child is evaluated using the BDI. For each eligible child, the BDI serves as their baseline measurement for child outcome reporting and upon exit from the program children are evaluated again using the BDI. This provides a pre-post measure for determining the child's progress category for each child in each of the three child outcome measures. Children must participate in the NJEIS for at least six (6) months for their data to be included in the Indicator 3 report.

Targets: Description of Stakeholder Input - Please see the Stakeholder Involvement section of the [introduction](#).

Enter additional information about stakeholder involvement

See attached for Phase II

Phase I: The NJEIS assembled a large group of committed stakeholders that undertook each of the activities (Infrastructure Analysis, Data Analysis, Selection of Coherent Improvement Strategies, Development of Theory of Action and Target setting) required for the development and implementation of the SSIP.

The NJEIS Part C Stakeholder group met in January 2015 to set Targets for all APR Indicators including Indicator 3 child outcome measures. The Stakeholders recommended moving the baseline year from FFY 2008 to FFY 2012. From FFY 2008 through FFY 2011, NJEIS used an approved sampling plan to report child outcomes. Through collaborations with national TTA staff, the NJEIS began to recognize the usefulness of the data set for Indicator 3 was limited, specifically the

data completeness resulting from the use of a sampling plan. As a result, the NJEIS decided to make a financial and workforce investment and moved from the sampling plan to statewide collection of exit data for children that participated in the system for at least 6 months effective July 1, 2012.

The NJEIS also moved to require an annual BDI evaluation for all children prior to the development of their annual IFSP and developed business rules to use the annual BDI as the exit evaluation if conducted within 4 months of the child's exit date. These efforts resulted in an increase in the reported N for FFY2012 and FFY2013 and improved the stability of the performance data.

The Stakeholders recommended targets in consideration of the acknowledged concerns about evaluator fidelity and completeness rate and recommended to set a modest target for the initial year with targets increasing in equal intervals in each of the subsequent years. The DOH accepted the Stakeholders recommendations and those are reflected in the FFY 2014-FFY 2018 targets listed in above.

Overview

The complete Phase II SSIP is submitted as an attachment. The submitted report includes discussions of 1) NJEIS Infrastructure Development, 2) Support for EIS programs and providers in the implementation of evidence based practice, 3) an evaluation plan, 4) information on stakeholder involvement, and 5) the NJEIS use of technical assistance supports.

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., EIS program and/or EIS provider, geographic region, race/ethnicity, socioeconomic status, gender, etc.) As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

See Complete SSIP as attached.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in EIS programs and/or EIS providers to implement, scale up, and sustain the use of evidence-based practices to improve results for infants and toddlers with disabilities and their families. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and other early learning initiatives, such as Race to the Top-Early Learning Challenge and the Home Visiting program and describe the extent that these new initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

See Complete SSIP as attached.

State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and Their Families

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with

FFY 2014 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).

Statement

The SIMR for NJEIS is:

The New Jersey Early Intervention System will substantially increase the rate of children's growth in their development of positive social emotional skills by the time they exit the program, as defined by the targets established for Indicator 3A, Summary Statement 1 in each of the years FFY 201-FFY2018.

See Complete SSIP as attached.

Description

See Complete SSIP as attached.

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families. The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support EIS program and/or EIS provider implementation of evidence-based practices to improve the State-identified result(s) for infants and toddlers with disabilities and their families. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build EIS program and/or EIS provider capacity to achieve the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

See Complete SSIP as attached.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in EIS programs and/or EIS providers, and achieve improvement in the State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families.

Submitted Theory of Action: No Theory of Action Submitted

 Provide a description of the provided graphic illustration (optional)

Infrastructure Development

- Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

See complete SSIP as attached.

Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

See complete SSIP as attached

Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

See complete SSIP as attached

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

See complete SSIP as attached

Certify and Submit your SPP/APR

This indicator is not applicable.