

# ANNUAL PERFORMANCE REPORT

## FOR NORTH CAROLINA 2012

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## **Part C State Annual Performance Report (APR) for FFY 2012**

### **Overview of the APR Development:**

North Carolina's early intervention program is organizationally located in the North Carolina (NC) Department of Health and Human Services, in the Division of Public Health. The Early Intervention Branch within the Women's and Children's Health Section of the Division of Public Health manages the program on a statewide level. The Early Intervention Branch's sixteen (16) employed and contracted Children's Developmental Services Agencies (CDSAs) administer the program on a local level. In preparation for developing the APR, the NC Early Intervention Branch Central Office reviewed the most recent state APR (FFY 2011), recent monitoring data, and the NC 2013 OSEP Determination Letter for FFY 2011-2012.

The NC EI Program continues to value and obtain broad input from several different stakeholder groups on a continuing basis. For this APR, the NC Interagency Coordinating Council (ICC) served as the primary advisory board and provided feedback at a meeting held in November 2013.

The NC EI Program has been engaging in a process focused on results, specifically a focus on Family Outcomes (Indicator 4a), increasing the percentage of families participating in Part C who report that early intervention have helped their family know their rights. This effort was initiated as a result of the Office of Special Education Programs (OSEP) Continuous Improvement Monitoring Process in 2011. An update on the status and progress of the NC EI Program's capacity building plan is included in Indicator 4.

The NC EI Program will disseminate the Annual Performance Report to stakeholders through the local lead agencies and post it on the program's website ([www.bearly.nc.gov/publications](http://www.bearly.nc.gov/publications)).

**Part C State Annual Performance Report (APR) for 2012**

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

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

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

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

**Measurement:** Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.  
Account for untimely receipt of services, including the reasons for delays.

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for FFY 2012:**

98.29% (n = 864)

**Actual Target Data for FFY 2012:** Seven hundred ninety-two (792) children received their services in a timely manner. Seventy two (72) children did not receive their services in a timely manner due to documented exceptional family circumstances. Two percent (n = 15) of children did not receive all their services in a timely manner due to CDSA specific delays. Therefore, services for eight hundred sixty-four (864) out of eight hundred seventy-nine (879) children (98.29%) met the timely services indicator.

<b>CDSA</b>	<b>2012</b>
Blue Ridge	100%
Cape Fear	100%
Charlotte	100%
Concord	100%
Durham	81.82%
Elizabeth City^	96.30%
Greensboro	100%
Greenville	100%
Morganton	100%
New Bern	100%
Raleigh^	94.92%
Rocky Mount	96.36%
Sandhills^	94.83%
Shelby	100%
Western NC^	96.49%
Winston-Salem	100%
<b>Totals</b>	<b>98.29%</b>

Compliance by the CDSAs in meeting the timely services (30-days) compliance indicator was determined via a self-assessment record review of all children who had services added to their Individualized Family Service Plan (IFSP) in January 2013. The self-assessment record review included newly enrolled children and children already enrolled in the program. Eight hundred sixty-four (864) records of children were reviewed for timeliness of initial and subsequent service initiation. Seven hundred ninety-two (792) received their services in a timely manner. Eight percent (n = 72) of children did not receive all their services in a timely manner due to documented exceptional family circumstances. Two percent (n = 15) of children did not receive all their services in a timely manner due to CDSA specific delays. The reasons for the delays included: delays in evaluation scheduling, delays in referrals to providers, delays in providers initiating services, inadequate follow up and lack of appropriately qualified community-based providers.

**Identification of Noncompliance in FFY 2012**

Record review data indicate ten (10) CDSAs achieved 100% compliance (including documented family exceptional circumstances). Four (4) CDSAs (denoted in chart with ^) have been issued findings and received a Corrective Action Plan (CAP) to show correction of noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance).

During the time of monitoring, one CDSA (Rocky Mount) identified and corrected the non-compliance prior to a finding being issued. The EI Branch Central Office staff verified through record review that the CDSA: (1) is correctly implementing the specific regulatory requirements; (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program. One CDSA (Durham) was still in correction planning from the FFY 2011 self-assessment, but has since corrected noncompliance within one year. The EI Branch Central Office staff verified through record review that the CDSA: (1) is correctly implementing the specific regulatory requirements; (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program.

**Infants and Toddlers with IFSPs who receive Early Intervention Services in a Timely Manner:**

a. Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (including exceptional circumstances)	<b>864</b>
b. Total number of infants and toddlers with IFSPs	<b>879</b>
Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (Percent = [(a) divided by (b)] times 100)	<b>98.29%</b>

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:**

The NC EI Program experienced improvement from 97.85% (FFY 2011) to 98.29% (FFY 2012). Improvement activities to address individual instances of noncompliance included: CDSAs provided services when a community provider is not available, examining local processes to initiate timely services, and focused technical assistance.

In FY 2009, based upon stakeholder input, the NC EI Program focused its improvement activities towards a comprehensive systems improvement initiative. This initiative was designed to address a number of systems variations across the state in the following areas:

- Implementation and interpretation of state policies and procedures
- Use of evidence-based practices
- Provision of services in a timely manner
- Percentage of children enrolled in the NC EI Program
- Staff roles/responsibilities due to loss of positions and funding

The program received technical assistance through the National Early Childhood Technical Assistance Center (NECTAC), now the Early Childhood Technical Assistance Center (ECTA Center), Mid-South Regional Resource Center (Mid-South) and the Data Accountability Center (DAC) in order to better serve children and families by ensuring equal access and availability to all children and families to high quality EI services.

The program completed a series (phases) of trainings/technical assistance activities with CDSAs in FY 2012 in order to fully operationalize a change in service delivery practice and to address the variations across the state. Weekly support calls were held with EI Branch Central Office staff and core teams from each CDSA to discuss content of trainings as well as implementation considerations. Progress to date is as follows:

- State Part C policies and procedures have been revised to reflect new IDEA regulations 2011
- Onsite technical assistance provided to CDSAs to ensure a consistent application of eligibility evaluations, family assessment and child assessments. CDSAs have made adjustments in personnel in order to meet the requirements of these components as well as the implementation of five required eligibility evaluation tools.
- IFSP training modules developed and trainings provided to a core team of practitioners from each CDSA on how to link evaluation and assessment information to the development of functional, high quality outcomes. An emphasis was also included in the trainings on the IFSP team’s role in making decisions about services and supports on a child’s IFSP.

## APR Template – Part C (4)

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- The State's Individualized Family Service Plan (IFSP) has been revised to include all regulatory components and a format that will lead to functional, high quality outcomes for enrolled infants, toddlers and their families.
- Use of evidenced based practices and implementation science embedded throughout all phases of trainings and technical assistance opportunities. Full scale implementation scheduled for spring of 2014.

### Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 97.85%

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011, through June 30, 2012)	<b>8</b>
2. Number of FFY 2011 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	<b>8</b>
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

### Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	<b>0</b>
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	<b>0</b>
6. Number of FFY 2011 findings <u>not</u> verified as corrected [(4) minus (5)]	<b>0</b>

### Actions Taken if Noncompliance Not Corrected:

Not Applicable

### Verification of Correction of FFY 2011 noncompliance or FFY 2011 findings (either timely or subsequent)

#### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011:

There were six (6) CDSAs in corrective action issued in FFY 2011. These CDSAs received intensive monitoring, technical assistance and support from the EI Branch Central Office to correct the noncompliance within one year of the finding being issued. The EI Branch Central Office staff verified through record reviews that the CDSA: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program.

The North Carolina EI Program continues to have a system to identify and correct noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance). This corrective action process

## APR Template – Part C (4)

North Carolina  
State

includes the EI Branch Central Office issuing findings for noncompliance to specific CDSAs, with regulatory requirements within this process, and requiring a CDSA to use a root cause analysis framework to drill down to reasons for noncompliance. CDSAs submit progress reports to the EI Branch Central Office on an approved schedule. The process used to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the timely services requirement is being implemented in accordance with IDEA. The North Carolina EI Program continues to address how to sustain correction of noncompliance in specific areas of the state and improvements regarding the implementation of local procedures for timely service initiation.

### Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):

1. Number of remaining uncorrected FFY 2010 findings of noncompliance noted in OSEP's June 2013, FFY 2011 APR response table for this indicator	<b>0</b>
2. Number of remaining FFY 2010 findings the State has verified as corrected	<b>0</b>
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	<b>0</b>

### Verification of Correction of Remaining FFY 2010 findings

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:**

Not Applicable

**Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):**

Not Applicable

**Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

Statement from the Response Table	State's Response
<b>Not Applicable</b>	

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):**

Not applicable

Part C State Annual Performance Report (APR) for 2012

Overview of the Annual Performance Report Development:

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

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

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

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

FFY	Measurable and Rigorous Target
2012	98%

**Actual Target Data for FFY 2012:** Actual Target Data is gathered from North Carolina’s statewide Health Information System (HIS) database.

10,127 ÷ 10,206 = 99.2%

CDSA	Dec 1, 2012 Head Count	Number of children receiving services at home or in other natural environments	Percent of children receiving services at home or in other natural environments
Blue Ridge	234	234	100.0%
Cape Fear	1002	992	99.0%
Charlotte	1099	1099	100.0%
Concord	803	803	100.0%
Durham	685	683	99.7%
Elizabeth City	192	191	99.5%
Greensboro	832	829	99.6%
Greenville	484	483	99.8%
Morganton	354	350	98.9%
New Bern	441	436	98.9%
Raleigh	1151	1147	99.7%
Rocky Mount	564	564	100.0%
Sandhills	531	507	95.5%
Shelby	501	491	98.0%
Western NC	600	590	98.3%
Winston-Salem	733	728	99.3%
<b>North Carolina</b>	<b>10206</b>	<b>10127</b>	<b>99.2%</b>



## APR Template – Part C (4)

North Carolina  
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**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2012-2013:**

Target Met

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2012-2013:**

Not Applicable

## Part C State Annual Performance Report (APR) for 2012

## Overview of the Annual Performance Report Development:

## Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

**Measurement:**

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

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

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

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

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

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

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

C. Use of appropriate behaviors to meet their needs:

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

**Summary Statements for Each of the Three Outcomes:**

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

**Measurement for Summary Statement 1:** Percent = # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

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

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

FFY	Measurable and Rigorous Target	
2012	<u>Summary Statement 1</u> Outcome A: 73.5% Outcome B: 80.0% Outcome C: 78.0%	<u>Summary Statement 2</u> Outcome A: 59.6% Outcome B: 51.1% Outcome C: 57.8%

**Overview of Issue/Description of System or Process:**

The process for implementing child outcomes measurement within North Carolina is on target and is consistent with activities outlined in the State Performance Plan and previous annual reports. North Carolina is using the ECO Child Outcomes Summary Form (COSF) as the measurement tool. Per ECO’s website, there are numerous assessment tools that States use to inform child outcomes ratings. North Carolina uses a variety of assessment procedures to inform the child’s IFSP team of the rating in each of the three outcome areas.

Specifically, all children enrolled in early intervention for a minimum of six months receive an entry and exit measurement of their developmental status when compared with same-aged peers.<sup>1</sup> The three areas of development are positive social-emotional skills, acquiring and using knowledge and skills, and use of appropriate action to meet needs. The measurement of these behaviors and skills is completed by reviewing all available information compiled through developmental evaluation, observation, input of caregivers, and interviews with parents of the child.

The process in NC is embedded in the on-going delivery of early intervention services as outlined in the child’s IFSP. The initial rating in each area is assigned as the child enters services when the IFSP is signed. An exit rating is determined at one of two junctures: no more than 30 days prior to the child’s third birthday and transition from early intervention services or at exit from the program. Starting in FFY 2012, child outcome data from the CDSAs is being entered directly into the Health Information System (HIS). The data from HIS is uploaded into the Client Services Data Warehouse (CSDW), where staff at the CDSAs and at the central office are able to generate and run reports to determine if children have not received required initial or exit COSF ratings. Periodic agency-wide data cleaning activities are also conducted and include audits for “impossible” rating combinations and missing data elements.

**Actual Target Data for (Insert FFY):**

Summary Statements	Targets FFY 2012 (Percent of children)	Actual FFY 2012 (Percent and number of children)
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>		
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program	73.5%	71.9%= [(1196+2047)/ (54+1213+ 1196+2047)] x 100
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	59.6%	62.0%= [(2047+1967)/(54+1213 + 1196+2047+ 1967)] x 100
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>		
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program	80.0%	79.0%= [(1819+2719)/(37+1167 +1819+2719)] x 100

<sup>1</sup>Note: Because NC uses the ECO COSF measurement tool, “compared with same-aged peers” refers to the assignment of a score of 6 (Child’s functioning generally is considered appropriate for his or her age but there are some significant concerns about the child’s functioning in this outcome area. These concerns may be substantial enough to suggest monitoring or possible additional support.) or 7 (Child shows functioning expected for his or her age in all or almost all everyday situations that are part of the child’s life. Functioning is considered appropriate for his or her age.) on the rating scale to measure developmental status.

# APR Template – Part C (4)

North Carolina  
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2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	51.1%	53.3%= [(2719+735)/ (37+1167+ 1819+2719+ 735)] x 100
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>		
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program	78.0%	78.3%= [(1386+2858)/ (42+1131+ 1386+2858)] x 100
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	57.8%	60.5%= [(2858+1060)/ (42+1131+ 1386+2858+ 1060)] x 100

## Progress Data for FFY 2012

A. Positive social-emotional skills (including social relationships):	Number of children	Percent of children
a. Percent of children who did not improve functioning	54	0.8%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1213	18.7%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	1196	18.5%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	2047	31.6%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	1967	30.4%
Total	N= 6477	100%
B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of children who did not improve functioning	37	0.6%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1167	18.0%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	1819	28.1%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	2719	42.0%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	735	11.3%
Total	N= 6477	100%

C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of children who did not improve functioning	42	0.6%
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1131	17.5%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	1386	21.4%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	2858	44.1%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	1060	16.4%
Total	N= 6477	100%

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

Data from FFY 2012 child outcomes indicate that the agency is making strides toward meeting its statewide targets. For Summary Statement 1, the agency met the target for Outcome C, and was within two percentage points of meeting the target for the remaining outcomes. For Summary Statement 2, targets were met for all outcomes.

In addition to increasing the number of targets met from two in FFY 2011 to four in FFY 2012, the agency increased the percentages in all targets from FFY 2011 to FFY 2012, as illustrated in the chart below.

Summary Statements	Actual FFY 2011	Actual FFY 2012
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>		
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program	69.2%	71.9%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	59.9%	62.0%
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>		
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program	77.4%	79.0%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	50.9%	53.3%
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>		
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program	75.5%	78.3%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	58.4%	60.5%

Statewide efforts continue to focus on maintaining and improving the capacity to collect and report consistent, reliable data. Prior to FFY 2012, child outcomes data was reported on a monthly basis to EI Branch Central Office staff and entered into an Access database. As of July 1, 2012, CDSA staff began entering COSF information into the Health Information System (HIS) used by the agency to collect other child information, including: demographics, referral, evaluation/assessment, IFSP, exit and billed services data. This has resulted in many benefits for the program. It has streamlined the process to determine whether there were children who should have had initial or exit COSF entered in the system but had not, so that these ratings could be completed. This enhancement has resulted in more comprehensive data for reporting purposes. It has also made it possible to conduct deeper analyses of the data given the greater level of detailed information on each child available in HIS.

During FFY 2012 the NC EI Program has worked on integrating child outcomes measurement with the complete early intervention process, from referral to transition/exit. Using an implementation science approach, the NC EI Program identified two CDSAs to be early implementers of this effort. The benefits of integrating child outcomes measurement within the early intervention process include: a greater emphasis on teaming and gathering functional information across settings and situations within the context of the three child outcomes and more active involvement of families in understanding, identifying and facilitating their children's progress within the three child outcomes areas. The CDSAs chosen for early implementation will plan and engage in initial implementation of the integrated effort and evaluate and inform planning for statewide implementation.

In addition, the NC EI Program continues to participate in the ENHANCE Project. This project is funded by the U.S. Department of Education and looks at the quality of child outcomes data collected with the COSF. Through this project, state data studies are being conducted over a four year period. These studies will investigate local processes, examine statewide data, explore patterns, and provide insight into how to promote data quality.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *(Insert FFY)***

Not applicable.

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

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

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

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

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

**Measurement:**

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

FFY	Measurable and Rigorous Target
2012	a) know their rights: <b>90%</b> b) effectively communicate their children's needs: <b>86%</b> c) help their children develop and learn: <b>91%</b>

**Actual Target Data for FFY 2012:**

For FFY 2012, families of children who were enrolled in the program as of March 1, 2013, who had been in early intervention services at least six months were mailed the *NCSEAM Family Survey – Early Intervention*. The *NCSEAM Family Survey* is designed to yield reliable, valid and useful measures of families' perceptions and involvement in early intervention. It is specifically intended to measure the outcome areas required by OSEP. For assistance in distributing surveys and analyzing results of returned surveys, NC contracted with The Frank Porter Graham Child Development Institute at the University of North Carolina at Chapel Hill (UNC-FPG). UNC-FPG sub-contracted with the Jackson Group for the distribution and the collection of the survey. The UNC-FPG analyzed the results and prepared the report.

This year several aspects of the survey implementation process were revised, including the addition of an online survey response option and the inclusion of a pre-notification postcard with an individual password for completion of the survey online, along with instructions on how to complete the survey online. A total of 5,583 pre-notification postcards were mailed by the Jackson Group using a client address file provided



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by the North Carolina EI Branch Central Office. After the pre-notification postcard mailing, several weeks were allowed for families to complete the survey online, and for any postcards to be returned as undeliverable. Families who did not complete the online version of the survey were mailed a paper copy with a return envelope. Information about how to complete the online version was given again to families in the mailing, giving them two options of how to respond. Those families whose mailed postcard was returned by the post office as undeliverable did not receive a paper copy of the survey and were removed from the denominator to calculate the response rate. From the initial mailing, 204 postcards (3.7%) were returned due to undeliverable addresses. The total number of postcards and surveys mailed and delivered was 5,379 which represents the March 1, 2013 headcount (10,157) minus children who had not been enrolled at least six months (4,574) and minus the undeliverable (204) surveys.

### Survey Results

The *NCSEAM Family Survey – Early Intervention* includes one demographic item (child’s age at the time he/she was referred for early intervention services) and 47 rating scale items divided into two groups: “Family-Centered Services” and “Impact of Early Intervention Services on Your Family.”

Of the 5,379 surveys, 885 surveys were completed. The effective response rate was approximately 16.5%. An analysis of the responses to the survey’s *Impact of Early Intervention (EI) Services on Families* scale is used for reporting the State Performance Plan (SPP) / Annual Performance Report (APR) indicators 4a, 4b, and 4c. The data meet or exceed the National Center for Special Education Accountability Monitoring (NCSEAM) 2005 National Item Validation Study’s standards for the internal consistency, completeness, and overall quality.

### Survey Data by Race/Ethnicity

Data	Source	N	Am Ind.	Asian/ Pac. Is	Black	Hispanic	White	Other
March 1, 2013 Headcount	3/1/13 data	<b>10157</b>	119 (1.2%)	176 (1.7%)	2679 (26.4%)	1786 (17.6%)	5175 (51%)	222 (2.2%)
Target Group	Total surveys and postcards distributed	<b>5379</b>	69 (1.3%)	84 (1.6%)	1373 (25.5%)	941 (17.5%)	2783 (51.7%)	129 (2.4%)
Respondent Pool	Total surveys returned	<b>885</b>	8 (0.9%)	18 (2.0%)	141 (15.9%)	120 (13.6%)	577 (65.2%)	21 (2.4%)

### Survey Data by Gender and Language

Data	Source	N	Male	Female	English	Spanish
Target Group	Total surveys distributed	<b>5379</b>	3251 (60.4%)	2128 (39.6%)	4708 (87.5%)	671 (12.5%)
Respondent Pool	Total surveys returned	<b>885</b>	551 (62.3%)	334 (37.7%)	800 (90.4%)	85 (9.6%)

**Representativeness of Data**

The response rates among race/ethnicity subgroups were varied. Families of Asian, White/Caucasian, and multiple race/ethnicities had the highest response rates (21.4%, 20.7%, and 17.1% respectively). Families of Hispanic/Latino, Black/African American, and American Indian/ Alaska Native children all had response rates slightly below the mean. Proportions of returns by race/ ethnicity groups show that White/Caucasian families were proportionally over-represented in the response pool, while Black/African American families were proportionally under-represented. Responses from Hispanic families were also under-represented. Proportions of responses among other subgroups showed minor differences. For language, response rates were lower for families who received the survey in Spanish (12.7%) compared to English (17.0%). When looking at gender, rates of response were comparable, although slightly higher for families of boys (16.9% for boys and 15.7% for girls).

The following table provides a summary of North Carolina’s target goals and actual survey results for FFY 2012.

Indicator	FFY 2012 NCSEAM Survey	Target Goals FFY 2012	Actual Results FFY 2012
4: Percent of families participating in Part C who report that early intervention services have helped the family to:	NCSEAM Family Survey – Early Intervention		
a) know their rights;	a) 75.2%= 656 of 872 families <i>Over the past year, Early Intervention services have helped me and/or my family know about my child's and family's rights concerning Early Intervention services.</i>	a) 90%	a) 75.2%
b) effectively communicate their children’s needs; and	b) 72.2%= 630 of 872 families <i>Over the past year, Early Intervention services have helped me and/or my family communicate more effectively with the people who work with my child and family.</i>	b) 86%	b) 72.2%
c) help their children develop and learn	c) 83.1%= 725 of 872 families <i>Over the past year, Early Intervention services have helped me and/or my family understand my child's special needs.</i>	c) 91%	c) 83.1%

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:**

The *NCSEAM Family Survey – Early Intervention Survey* analysis of the responses to the survey’s Impact of Early Intervention (EI) Services on Families scale includes responses rated “strongly agree” or “very strongly agree”.

### Explanation of Progress or Slippage

A total of 885 surveys were completed, for an overall response rate of 16.5%. There was a slight decrease in the response rate from the last reporting year (16.7% in FFY 2011). The trend over the last several reporting years has also been of decreasing response rates, with the earlier years having 19.0% (FFY 2010) and 23.1% (FFY 2009). Families did use the option of completing the surveys online, with almost half (418 of the 885 or 47%) completing the online version. The remaining 53% of families completed the paper version with mailed return.

The overall representativeness of responses is still significantly impacted by the low response rate. Data suggest improvements need to continue to address areas such as survey response rates, representativeness of responses, and targeted activities for improving practices for some of the CDSAs. To improve survey response rates and overall representativeness of responses, families will still be given an option of completing the *NCSEAM Family Survey – Early Intervention Survey* online as well as receiving a reminder postcard a few weeks after the paper copy of the survey has been mailed.

### North Carolina Early Intervention Program Results Plan

The North Carolina Early Intervention Program has been undertaking a Results Focus process as part of the US Department of Education, Office of Special Education Programs (OSEP) Continuous Improvement Monitoring Process. This process has included input from stakeholders since its inception in November 2011. The Results Plan is posted on the program's website.

The area of focus for FY 2012 has been to enhance the early intervention family rights materials (Goal 3, Actions 1, 2 and Goal, Action 1, 2). Statewide technical assistance has been provided to all CDSAs across the state on family's rights and procedural safeguards. New training modules, procedural guidance documents, talking points/scripts were developed for staff and materials provided to families were revised to assist with enhancing program practices and to help improve the percentage of families participating in the program who report that early intervention services have helped their family know their rights.

The Family Outcomes Results Steering Committee will continue to monitor statewide capacity building plan activities and benchmarks. Those activities will include initiating work groups to address material development, survey dissemination and state-wide and CDSA-specific training and technical assistance needs.

### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

Not applicable

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

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

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

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

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

FFY	Measurable and Rigorous Target
2012	1.10%

**Actual Target Data for FFY 2012:** There were 1,430 children aged birth to one year enrolled in NC’s EI Program on December 1, 2012. On December 1, 2012, the state population for this group was 120,328. The actual percentage is **1.19%**.

CDSA	Children Aged Birth to One	Population Aged Birth to One	Percent of Population Aged Birth to One
Blue Ridge	39	1,921	2.03%
Cape Fear	102	14,586	0.70%
Charlotte	199	14,446	1.38%
Concord	124	9,443	1.31%
Durham	104	8,625	1.21%
Elizabeth City	16	2,087	0.77%
Greensboro	99	10,543	0.94%
Greenville	46	5,071	0.91%
Morganton	50	4,287	1.17%
New Bern	69	7,406	0.93%
Raleigh	131	13,300	0.98%
Rocky Mount	70	6,174	1.13%
Sandhills	78	6,320	1.23%
Shelby	85	5,381	1.58%
Western NC	102	6,221	1.64%
Winston-Salem	116	8,620	1.35%
<b>North Carolina (State Demographer)</b>	<b>1,430</b>	<b>120,431</b>	<b>1.15%</b>
<b>North Carolina (US Census)</b>	<b>1,430</b>	<b>120,328</b>	<b>1.19%</b>
<b>National</b>	<b>42,225</b>	<b>3,983,689</b>	<b>1.06%</b>

This table provides the birth to one year of age data for the CDSAs. The table also shows the statewide percentage of children enrolled in early intervention services as compared to the same-age population.

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**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:**

Target Met

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012**

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

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

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

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

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

FFY	Measurable and Rigorous Target
2012	2.10%

**Actual Target Data for FFY 2012:** There were 10,206 children aged birth to three enrolled in NC’s EI Program on December 1, 2012. On December 1, 2012, the state population for this group was 365,208. The actual percentage is **2.79%**.

CDSA	Children Aged Birth to Three	Population Aged Birth to Three	Percent of Population Aged Birth to Three
Blue Ridge	234	5,679	4.12%
Cape Fear	1,002	43,342	2.31%
Charlotte	1,099	41,881	2.62%
Concord	803	27,193	2.95%
Durham	685	26,020	2.63%
Elizabeth City	192	6,206	3.09%
Greensboro	832	31,668	2.63%
Greenville	484	15,394	3.14%
Morganton	354	13,030	2.72%
New Bern	441	22,187	1.99%
Raleigh	1,151	38,361	3.00%
Rocky Mount	564	18,178	3.10%
Sandhills	531	18,768	2.83%
Shelby	501	16,133	3.11%
Western NC	600	18,251	3.29%
Winston-Salem	733	25,580	2.87%
<b>North Carolina (State Demographer)</b>	<b>10,206</b>	<b>367,871</b>	<b>2.77%</b>
<b>North Carolina (US Census)</b>	<b>10,206</b>	<b>365,208</b>	<b>2.79%</b>
<b>National</b>	<b>333,542</b>	<b>12,028,122</b>	<b>2.77%</b>

This table provides the birth to three year of age data for CDSAs. The table also shows the statewide percentage of children enrolled in early intervention services as compared to the same-age population.

## APR Template – Part C (4)

North Carolina  
State

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:**

Target Met

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012**

Not Applicable

**Part C State Annual Performance Report (APR) for FFY 2012**

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

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

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

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

**Measurement:**

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

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

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for FFY 2012:**

99.03% (n = 829)

Compliance by the CDSAs in meeting the 45-day timeline indicator was determined via a self-assessment record review of all children referred to the program between November 17, 2012 – December 17, 2012, who are children with IFSP due dates in January 2013. During FFY 2012, the EI Branch Central Office provided each CDSA with a list of children (extracted from the state's database) who were referred November 17, 2012 – December 17, 2012, for whom IFSPs were due in 2013. The record review process is used to determine compliance or noncompliance including an account for untimely evaluations, assessments, and initial IFSP meetings, including the specific reasons for delays.

Actual Target Data for FFY 2012: Data on eight hundred twenty-nine (829) children were examined to verify the 45-day timeline for compliance. Seven hundred thirty-three (733) children received an IFSP within 45 days of referral. Eighty-eight (88) children did not receive an IFSP in a timely manner due to documented exceptional family circumstances. Therefore, the records of eight hundred twenty-one (821) out of eight hundred twenty-nine (829) children (99.03%) met the 45-day timeline indicator. This figure represents slight slippage of 0.36% from the FFY 2011 figure of 99.39%.



# APR Template – Part C (4)

## Infants Evaluated and Assessed and provided an Initial IFSP meeting Within Part C’s 45-day timeline:

a. Number of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline (including exceptional circumstances)	<b>821</b>
b. Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted	<b>829</b>
Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline (Percent = [(a) divided by (b)] times 100)	<b>99.03%</b>

## Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:

See improvement activities in Indicator 1.

In FFY 2012, of the eight hundred twenty-nine (829) children whose records were reviewed, approximately 88.42% (n = 733) of children received an IFSP within 45 days of referral. Documented exceptional family circumstances affected 10.6 (n=88) IFSPs. Less than one percent (n = 8) of children’s IFSPs show noncompliance. Each CDSA submitted reasons why any child did not receive an IFSP within 45 days. The reasons for the CDSA delays were due to delays in evaluation and inadequate follow-up. The next table shows CDSA-specific data.

January 2013 CDSA	Compliance
Blue Ridge	100%
Cape Fear^	94.38%
Charlotte	100%
Concord	100%
Durham^	100%
Elizabeth City	100%
Greensboro	100%
Greenville	100%
Morganton	100%
New Bern^	97.78%
Raleigh	100%
Rocky Mount	98.11%
Sandhills^	97.92%
Shelby	100%
Western NC	100%
Winston-Salem	100%
<b>Totals</b>	<b>99.03%</b>

CDSAs continue to use their internal quality assurance processes to monitor the 45-day timeline. The EI Branch Central Office staff continue to verify data and ensure that CDSAs maintain compliance. Ongoing monitoring and technical assistance are occurring per the SPP. These ongoing monitoring and technical

assistance efforts focus on the identification and correction of any noncompliance as soon as possible but in no case more than one year from identification.

**Identification of Noncompliance in FFY 2012**

Record review data indicate twelve (12) CDSAs achieved 100% compliance (including documented exceptional family circumstances). Three (3) CDSAs (denoted in chart with ^) have been issued a finding(s) and received a Corrective Action Plan (CAP). One (1) CDSA (Rocky Mount) identified and corrected their non-compliance prior to a finding being issued. Noncompliance must be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance).

The slight slippage from 99.39% to 99.03% can be attributed to delays in evaluation scheduling or inadequate follow-up.

**Related Requirements:**

As a result of FFY 2012 focused monitoring and other monitoring activities, five (5) CDSAs were issued a total of nine (9) findings for noncompliance in the following areas:

- Written Prior Notice 3 findings
- Invitation to Initial IFSP meeting 1 finding
- Confidentiality 1 finding
- Timely and Accurate Data 2 findings
- Surrogate Parent 1 finding
- Eligibility Determination 1 finding

As a result of FFY 2012 focused monitoring and other monitoring activities, five (5) CDSAs were issued a total of nine (9) findings for areas of improvement in the following areas:

- Quality Documentation 8 findings
- Establish QI/QA Process 1 finding

These CDSAs received a Corrective Action Plan (CAP) to show correction of noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance).

**Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance):**

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 99.39%

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011, through June 30, 2012)	<b>4</b>
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	<b>4</b>
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

**Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	<b>0</b>
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# APR Template – Part C (4)

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5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	<b>0</b>
6. Number of FFY 2011 findings <u>not</u> verified as corrected [(4) minus (5)]	<b>0</b>

**Actions Taken if Noncompliance Not Corrected: Not applicable**

Not Applicable

**Verification of Correction of FFY 2011 noncompliance or FFY 2011 findings (either timely or subsequent):**

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011:**

There were three (3) CDSAs in corrective action issued in FFY 2011. These CDSAs received intensive monitoring, technical assistance and support from the EI Branch Central Office to correct the noncompliance within one year of the finding being issued. The EI Branch Central Office staff verified through record reviews that the CDSA: (1) is correctly implementing the specific regulatory requirements; and (2) has developed an IFSP for each child, although late, unless the child is no longer within the jurisdiction of the NC EI Program.

The North Carolina EI Program has a system to identify and correct noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance). For those CDSAs issued finding(s), the CDSA with assistance from the EI Branch Central Office investigated the underlying reasons that contributed to the noncompliance. The specific regulatory requirements are reviewed with the CDSA. A corrective action process is developed by the CDSA that matches strategies with root causes of the noncompliance. During the corrective action process, the EI Branch Central Office staff monitors the status of the CDSA’s progress through record review data and a review of the implemented strategies. Correction of noncompliance is achieved as soon as possible, but in no case more than one year from identification. The process used to determine correction of noncompliance includes: analysis of progress report information, verification of the correction of child-specific noncompliance and review of updated subsequent data verifying that the 45-day timeline requirement is being implemented in accordance with IDEA. The North Carolina EI Program continues to address how to sustain correction of noncompliance in specific areas of the state and improvements regarding the implementation of local procedures for the 45-day timeline.

**Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):**

1. Number of remaining FFY 2010 findings of noncompliance noted in OSEP’s June 2012, FFY 2010 APR response table for this indicator	<b>0</b>
2. Number of remaining FFY 2010 findings the State has verified as corrected	<b>0</b>
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	<b>0</b>

# APR Template – Part C (4)

## Verification of Remaining FFY 2010 findings:

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

Not Applicable

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
Not Applicable	

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Not Applicable

**Part C State Annual Performance Report (APR) for FFY 2012**

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

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

**Indicator 8A:** The percentage of 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.

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

**Measurement:**

Percent = [(# of toddlers with disabilities exiting Part C who have 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 their third birthday) divided by the (# of toddlers with disabilities exiting Part C)] times 100.

Account for untimely transition planning, including the reasons for delays.

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for FFY 2012:**

Service Plan Includes Transition Steps and Services: 99.83% (n=575)

Data for IFSPs with transition steps and services are collected via a self-assessment process. CDSAs were provided with a list of records for all children who were 2 years, 9 months of age in January 2013, and should have had a transition plan with steps developed, notification to the LEA/SEA, and a transition-planning conference by January 2013 to review as part of the self-assessment process. Reasons for noncompliance were collected when noncompliance was identified.

# APR Template – Part C (4)

CDSA	FFY 2012
Blue Ridge	100%
Cape Fear	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Greensboro	100%
Greenville	100%
Morganton	100%
New Bern	100%
Raleigh	100%
Rocky Mount	100%
Sandhills	100%
Shelby^	97.67%
Winston-Salem	100%
WNC	100%
Total	<b>99.83%</b>

This table denotes 99.83% (n=575) compliance FFY 2012 for children who are transitioning and have IFSPs with transition steps and services.

### Identification of Noncompliance in FFY 2012

Record review data indicate fifteen (15) CDSAs achieved 100% compliance. One (1) CDSA (denoted in chart with ^) has been issued a finding and received a Corrective Action Plan (CAP) to show correction of noncompliance as soon as possible, but in no case more than one year from identification (i.e., the date on which the NC EI Program provided written notification to the CDSA of the noncompliance).

### Children Exiting Part C who Received Timely Transition Planning:

a. Number of children exiting Part C who have an IFSP with transition steps and services	<b>574</b>
b. Number of children exiting Part C	<b>575</b>
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Percent = [(a) divided by (b)] times 100)	<b>99.83%</b>

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:

The slight slippage from 100% to 99.83% can be attributed to an instance of non-compliance by one CDSA. This CDSA has received a Corrective Action Plan that includes a progress reporting timeline and submission of subsequent data. The EI Branch Central Office staff will verify correction to ensure that the CDSA is correctly implementing the regulatory requirements and that any noncompliance that involves an individual child is corrected.

### Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 100%

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011, through June 30, 2012)	<b>0</b>
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2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	0
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

### Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2011 findings <u>not</u> verified as corrected [(4) minus (5)]	0

### Actions Taken if Noncompliance Not Corrected:

Not Applicable

### Verification of Correction of FFY 2011 noncompliance (either timely or subsequent):

Not Applicable

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011:

Not Applicable

### Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2010 findings of noncompliance noted in OSEP’s June 2011, FFY 2010 APR response table for this indicator	0
2. Number of remaining FFY 2010 findings the State has verified as corrected	0
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2010 findings:

Not applicable.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

Not Applicable

# APR Template – Part C (4)

North Carolina  
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## Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

Not Applicable

## Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
Not Applicable	

## Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Not Applicable



**Part C State Annual Performance Report (APR) for FFY 2012**

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

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

**Indicator 8B:** The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has 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 potentially eligible Part B preschool services. (Transition Notification)

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

**Measurement:**

Percent = [(# of toddlers with disabilities exiting part C where notification (consistent with any opt-out policy adopted by the State) to the SEA and the LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services) divided by the (# of toddlers with disabilities who were potentially eligible for Part B)] times 100.

Account for untimely transition planning, including the reasons for delays.

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for FFY 2012:**

Notification to the LEA and SEA of children deemed potentially eligible: 99.83% (n=575)

Data for the notification to LEA and SEA, if the child is potentially eligible for Part B, are collected via self-assessment. CDSAs were provided with a list of records for all children who were two (2) years, nine (9) months of age in January 2013, and should have had a transition plan with steps developed, notification to the LEA and SEA and a transition-planning conference by January 2013 to review as part of the self-assessment process. All children enrolled in Part C as they approach their third birthday are potentially eligible for Part B in NC. Reasons for noncompliance were collected when noncompliance was identified.

<b>CDSA</b>	<b>FFY 2012</b>
Blue Ridge	100%
Cape Fear	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Greensboro	100%
Greenville	100%
Morganton	100%
New Bern	100%
Raleigh	100%
Rocky Mount	100%
Sandhills	100%
Shelby^	97.67%
Winston-Salem	100%
WNC	100%
Total	<b>99.83%</b>

**Identification of noncompliance in FFY 2012**

In FFY 2012, 575 records were reviewed to examine whether the LEA and SEA was appropriately notified of potentially eligible children. Fifteen (15) of the CDSAs reported 100% compliance. One (denoted with ^) CDSA was cited with one finding. Corrective actions were developed and implemented to address internal processes for tracking of LEA and SEA notification. Correction of noncompliance is to occur within one year from written notification of the finding.

**Children Exiting Part C who Received Timely Transition Planning (Notification to LEA and SEA):**

a. Number of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred	<b>574</b>
b. Number of children exiting Part C who were potentially eligible for Part B	<b>575</b>
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Notification to LEA) (Percent = [(a) divided by (b)] times 100)	<b>99.83%</b>

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:**

Slight slippage from 100% to 99.83% can be attributed to an instance of inadequate follow-up by one CDSA.

**Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance):**

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 99.83%

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011, through June 30, 2012)	<b>1</b>
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	<b>1</b>
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

**Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	<b>0</b>
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	<b>0</b>
6. Number of FFY 2011 findings <u>not</u> verified as corrected [(4) minus (5)]	<b>0</b>

**Actions Taken if Noncompliance Not Corrected:**

Not Applicable

**Verification of Correction of FFY 2011 noncompliance (either timely or subsequent):**

For FFY 2011 strategies to address the findings were identified in the corrective action process, and correction of noncompliance occurred less than one year from notification. EI Branch Central Office staff, together with individual CDSA staff, investigated the underlying reasons that contributed to the noncompliance. The specific regulatory requirements were reviewed. A corrective action process was developed, matching strategies with the root causes of noncompliance. During the corrective action process, EI Branch Central Office staff members monitored the status of progress through the submission of record review data and through a review of the implementation of efficient strategies. For this CDSA, correction of all noncompliance regarding policies and procedures occurred less than one year from the finding being issued. In addition, all child specific noncompliance was corrected as soon as possible, unless the child was no longer within the jurisdiction of the NC EI Program. EI Branch Central Office staff analyzed progress report information, held discussions with CDSA management, and verified through subsequent record review on site. Through this process EI Branch Central Office staff verified that this CDSA corrected noncompliance, systematically correctly implemented the specific regulatory requirement and had provided LEA and SEA notification for each child-specific noncompliance, unless the child was no longer within the jurisdiction of the CDSA/NC EI Program.

**Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):**

1. Number of remaining FFY 2010 findings of noncompliance noted in OSEP’s June 2012, FFY 2010 APR response table for this indicator	<b>0</b>
2. Number of remaining FFY 2010 findings the State has verified as corrected	<b>0</b>
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	<b>0</b>

**Verification of Correction of Remaining FFY 2010 findings:**

Not Applicable

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:**

Not Applicable

**Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):**

Not Applicable

**Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

Statement from the Response Table	State’s Response
Not Applicable	

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):**

Not Applicable

**Part C State Annual Performance Report (APR) for FFY 2012**

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

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

**Indicator 8C:** The percentage of toddlers with disabilities exiting Part C with timely transition planning 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

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

**Measurement:**

Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred 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) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition planning, including the reasons for delays.

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for FFY 2012:**

Transition Planning Conference: 99.12% (n=566)

Data for timely transition planning conferences, if a child is potentially eligible for Part B, are collected via self-assessment. CDSAs were provided a list of records for all children who were two (2) years and nine (9) months of age in January 2013, and should have had a transition plan with steps developed, notification to the LEA and SEA and a transition-planning conference by January 2013 to review as part of the self-assessment process. Reasons for noncompliance were collected when noncompliance was identified.

## APR Template – Part C (4)

North Carolina  
State

CDSA	FFY 2012
Blue Ridge	95.24%
Cape Fear	100%
Charlotte	100%
Concord	100%
Durham	100%
Elizabeth City	100%
Greensboro	100%
Greenville^	96.88%
Morganton	100%
New Bern^	94.59%
Raleigh^	98.28%
Rocky Mount	100%
Sandhills	100%
Shelby	100%
Winston-Salem	100%
WNC	100%
<b>Total</b>	<b>99.12%</b>

The data shows 99.12% compliance for FFY 2012, which represents improvement as compared to FFY 2011 data of 98.78%.

In FFY 2012, 566 records were reviewed to examine the percentage of children potentially eligible for Part B and whether a timely transition-planning conference was held no later than 90 days before the child's third birthday. Eighty-nine percent (503 of 566) records denoted that a conference was held in a timely manner and 10% (58) were not held in a timely manner due to documented exceptional family circumstances or late referral to Part C--defined as a referral received less than 90 days before the third birthday, whereas the remaining records (n=5) indicated a CDSA-specific noncompliance.

### Children Exiting Part C who Received Timely Transition Planning (Transition Conference):

a. Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred	<b>561</b>
b. Number of children exiting Part C who were potentially eligible for Part B	<b>566</b>
Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday (Transition Conference) (Percent = [(a) divided by (b)] times 100)	99.12%

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:

#### Identification of Noncompliance in FFY 2012

The data represent 99.12% performance for FY 2012, which is improvement for Indicator 8C as compared to FFY 2011 data of 98.78%. Twelve (12) CDSAs reported 100% compliance. Three (3) CDSAs (denoted with ^) were cited with a finding; corrective action plans were developed and implemented. One (1) CDSA identified and corrected non-compliance prior to a finding being issued. Compliance is to be corrected as soon as possible for all findings but no later than one year from the written notification.

## APR Template – Part C (4)

North Carolina  
State

The NC EI Program continues to focus its improvement activities on maintaining compliance regarding effective transition practices. A focused partnership with Part B 619 program helps to ensure that procedures are in place for children to experience a smooth transition from Part C to Part B. The Part C and Part B 619 program's *Interagency Agreement and Guiding Practices in Transition* document are completed and pending approval. Part C local lead agencies (CDSAs) and their respective LEAs review their regional catchment area plans on an annual basis if deemed necessary. These plans outline the specific steps the CDSAs and LEAs will take to ensure the transition policy is being implemented.

### Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 98.78%

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011, through June 30, 2012)	4
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	4
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

### FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2011 findings <u>not</u> verified as corrected [(4) minus (5)]	0

### Actions Taken if Noncompliance Not Corrected:

Not Applicable

### Verification of Correction of FFY 2011 noncompliance (either timely or subsequent):

There were four CDSAs with a total of four findings in corrective action issued in FFY 2011. These four CDSAs received intensive monitoring. EI Branch Central Office staff, together with individual CDSA staff members, investigated the underlying reasons that contributed to the noncompliance. A corrective action process was developed for each CDSA matching strategies with the root causes of noncompliance. During the corrective action process, EI Branch Central Office staff monitored the status of each CDSA's progress through the submission of record review data and a review of the implementation of efficient strategies. For these four CDSAs, correction of all noncompliance regarding policies and procedures occurred less than one year from the finding being issued. In addition, all child-specific noncompliance was corrected with transition conferences occurring as soon as possible unless the child was no longer within the jurisdiction of the NC EI Program. EI Branch Central Office staff analyzed the progress report information, held discussions with CDSA management, and verified through subsequent record review on site. Through this process EI Branch Central Office staff verified that these four CDSAs have corrected

## APR Template – Part C (4)

North Carolina  
State

noncompliance, are systemically correctly implementing the specific regulatory requirements, and have conducted a transition conference for each child potentially eligible for Part B, although late, unless the child is no longer within the jurisdiction of the CDSA/NC EI Program.

### Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2010 findings of noncompliance noted in OSEP's June 2012, FFY 2010 APR response table for this indicator	0
2. Number of remaining FFY 2010 findings the State has verified as corrected	0
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2010 findings

**Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:**

Not Applicable

### Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

Not Applicable

**Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):**

Statement from the Response Table	State's Response
Not Applicable	

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011 (if applicable):**

Not Applicable



**Part C State Annual Performance Report (APR) for FFY 2012**

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

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

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

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

**Measurement:**

Percent of noncompliance corrected within one year of identification:

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

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

**States are required to use the “Indicator C 9 Worksheet” to report data for this indicator (see Attachment 1).**

FFY	Measurable and Rigorous Target
FFY 2012	100%

**Actual Target Data for FFY 2012:**

100%
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**INDICATOR C-9 WORKSHEET**

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# APR Template – Part C (4)

North Carolina  
State

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2011 (7/1/11 through 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 through 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	6	8	8
	Dispute Resolution: Complaints, Hearings	0	0	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0

# APR Template – Part C (4)

North Carolina  
State

5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution: Complaints, Hearings	0	0	0
7. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
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;	Dispute Resolution: Complaints, Hearings	0	0	0
8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1

# APR Template – Part C (4)

North Carolina  
State

<p>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</p>	<p>Dispute Resolution: Complaints, Hearings</p>	<p>0</p>	<p>0</p>	<p>0</p>
<p>8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:</p>	<p>Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other</p>	<p>4</p>	<p>4</p>	<p>4</p>
<p>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.</p>	<p>Dispute Resolution: Complaints, Hearings</p>	<p>0</p>	<p>0</p>	<p>0</p>
<p>OTHER AREAS OF NONCOMPLIANCE: Authorization to Disclose PII</p>	<p>Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other</p>	<p>6</p>	<p>6</p>	<p>6</p>
	<p>Dispute Resolution: Complaints, Hearings</p>	<p></p>	<p></p>	<p></p>

# APR Template – Part C (4)

North Carolina  
State

OTHER AREAS OF NONCOMPLIANCE: Procedural Safeguards/Accurate Data	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	7	14	14
	Dispute Resolution: Complaints, Hearings			
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
<b>Sum the numbers down Column a and Column b</b>			37	37
<b>Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.</b>			<b>(b) / (a) X 100 =</b>	<b>100.00%</b>

Note: To add more rows for Other areas of noncompliance, highlight row 25, right click and choose Insert.

Repeat - there are now two new rows. Highlight rows 26 and 27. Copy these rows.

Highlight rows 25 and 26. Paste. Following these steps will allow the calculation to work correctly.

### Describe the process for selecting EIS programs for Monitoring:

All CDSAs received monitoring activities this year. These monitoring activities included on-site focused monitoring visits, desk audits/data review, self- assessment data submission and/or data verification visits.

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2012<sup>2</sup>:

In FY 2011, there were a total of thirty-seven (37) findings of noncompliance identified in thirteen (13) CDSAs (some CDSAs had multiple findings). All findings of noncompliance were corrected within one year of identification. The Early Intervention Program verified that each CDSA with

<sup>2</sup> In an effort to reduce reporting burden, in the FFY 2012 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2011; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2012; and b) results indicators where the State has met its FFY 2012 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

findings of noncompliance identified in FY 2011 was correctly implementing the specific regulatory requirements, (i.e., achieved 100% compliance) based on a review of updated data. This subsequent data was collected through on-site monitoring or desk audits. The Early Intervention Program also verified that each CDSA had corrected each individual case of noncompliance, unless the child was no longer within the jurisdiction of the CDSA, consistent with OSEP Memo 09-02, dated October 17, 2008.

The North Carolina Early Intervention Program's general supervision system is consistent with the structure that is previously described to OSEP through annual performance reports. The program's data system, "Health Information System" (HIS) is not fully operational for the purposes of monitoring; therefore child record review is the primary method for verifying the correction of noncompliance. The Early Intervention Program will be implementing use of additional modules in HIS in FY 2012 that will lead to use of the data system for monitoring purposes.

CDSAs are required to complete child record review self-assessments annually. The EI Branch Central office collects self-assessment data at designated points and times each year for indicators 1, 8a, 8b, and 8c as these data are not collected in the program's data system. These data are either collected based on a month or quarter. In order to continue to improve compliance in timeliness of services (Indicator 1), the Central Office provides each CDSA with the names of all children enrolled in the program who had a new service added to their IFSP (newly enrolled children and children already receiving services) during a given month. In order to maintain compliance with transition indicators (Indicator 8 sub-components), the Central Office provides the CDSAs with the names of all children who should have had a transition planning conference as of a specific date. Data are also collected to assure that: 1) there was a transition plan with steps and services in place; and 2) if a child was potentially eligible for preschool services, the LEA was notified. Data and a data analysis report are submitted by each CDSA to the EI Branch Central office with reasons why any timeline is not being met and any unique data related to specifics regarding each individual child. Data verification occurs by the EI Branch Central office staff through an on-site verification visit.

**Note: For this indicator, report data on the correction of findings of noncompliance the State identified in FFY 2011 (July 1, 2011 through June 30, 2012) and verified as corrected as soon as possible and in no case later than one year from identification.**

**Timely Correction of FFY 2011 Findings of Noncompliance (corrected within one year from identification of the noncompliance):**

1. Number of findings of noncompliance the State identified in FFY 2011 (the period from July 1, 2011, through June 30, 2012) (Sum of Column a on the Indicator C9 Worksheet)	<b>37</b>
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C9 Worksheet)	<b>37</b>
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

**Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	<b>0</b>
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	<b>0</b>
6. Number of FFY 2011 findings <u>not</u> yet verified as corrected [(4) minus (5)]	<b>0</b>

*\*PC Users - To utilize the auto-calculating function; enter numbers in the appropriate boxes. Next, place the cursor in the grey box (in front of the text labeled “0”), then right click for a menu of options, and then select “update field.”*

**Verification of Correction for findings of noncompliance identified in FFY 2011 (either timely or subsequent):**

When a finding is issued, the CDSA receives a written notification of the finding and a written corrective action plan within 30 days. Corrective Action Plans (CAPs) are issued when there is noncompliance and a finding is noted. Corrective action plans include strategies and required evidence of change. These CAPs are written by the EI Branch Central Office staff in collaboration with the CDSAs. Required reporting occurs until noncompliance is corrected. The EI Branch 1) verifies updated data throughout the CAP process to ensure the local program is correctly implementing the regulatory requirements of IDEA, 2) ensures that the CDSA is correcting any child specific instances (although late), unless the child is not enrolled in the NC EI Program and 3) ensures that the root cause of noncompliance has been addressed. The EI Branch Central Office Regional Consultants provide technical assistance and consultation to CDSAs as needed to ensure root cause issues are being addressed. The EI Branch submits a letter confirming correction of noncompliance to the CDSA when correction has occurred (100% compliance).

The CDSAs have an opportunity to correct noncompliance prior to the issuance of a written notification of a finding. The CDSA must provide updated data that demonstrates 1) CDSA is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data and 2) CDSA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. The EI Branch Central office staff verifies (through record reviews) that correction has occurred for both of these steps.

Throughout the year, activities are completed by the EI Branch Central Office to verify the reliability, accuracy and timeliness of data reported by the CDSAs. Several methods for data verification are utilized, such as error reports, routine data reports, data reports summarizing contract performance and on-site

## APR Template – Part C (4)

North Carolina  
State

data verification visits. Point in time data are routinely provided to CDSAs to ensure reliable, valid data for 619 data reporting.

### Actions Taken if Noncompliance Not Corrected:

Not Applicable

### Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable)

If the State reported less than 100% for this indicator in its FFY 2011 APR and did not report in the FFY 2011 APR that the remaining FFY 2010 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2010 findings noted in OSEP's July 1, 2013 FFY 2011 APR response table for this indicator	0
2. Number of remaining FFY 2010 findings the State has verified as corrected	0
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	0

Not applicable

### Correction of Any Remaining Findings of Noncompliance identified in FFY 2009 or Earlier (if applicable)

Provide information regarding correction of any remaining findings of noncompliance identified in FFY 2009 or earlier using the same table format provided above.

Not applicable

### Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Not Applicable

### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Not applicable



**Part C State Annual Performance Report (APR) for 2012**

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

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

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

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

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

FFY	Measurable and Rigorous Target
2012	<i>Not Applicable</i>

**Actual Target Data for 2012:**

Not applicable to North Carolina as Part C due process procedures are used.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2012:**

Not applicable

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2012:**

Not applicable

**Part C State Annual Performance Report (APR) for 2012**

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

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

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

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

**Measurement:** Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for 2012:**

The lead agency received one request for mediation near the end of FFY 2011. This mediation occurred in FY 2012-2013 with a signed mediation agreement.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2012:**

Not applicable

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2012:**

Not applicable

**Part C State Annual Performance Report (APR) for 2012**

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

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

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

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

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

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

As stated in the Indicator Measurement Table, States may, but are not required, to report data for this indicator. OSEP will use the Indicator 14 Rubric to calculate the State’s data for this indicator. States will have an opportunity to review and respond to OSEP’s calculation of the State’s data.

FFY	Measurable and Rigorous Target
2012	100%

**Actual Target Data for FFY 2012:**

All state reported data, including 618 data, State performance plan and annual performance reports are submitted in a timely manner and accurately cover the correct year and follow the correct measurement.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:**

EI Branch Central Office staff reviewed the results of the self-assessment data submitted to the state office for compliance indicators. Each CDSA was contacted if any clarification was needed on the reported results. This ensured that the data were reported accurately and consistently across CDSAs. The EI Branch Central Office staff also conducts data verification visits to selected CDSAs each year to verify that data entered in the State’s data system, HIS, matches data in the child’s record.

EI Branch Central Office staff also worked with CDSA staff to ensure that data in HIS, the database used for 618 reporting, were kept accurate through periodic data-cleaning activities. Focused technical assistance was provided as needed.

Development has continued on HIS which was implemented in the North Carolina Department of Health and Human Services as of July 1, 2010. During FFY 2012, CDSAs have increased their use of HIS with additional data fields. HIS is used for reporting 618 data, as well as data for the compliance indicators in the APR.

## APR Template – Part C (4)

North Carolina  
State

In FY 2012, staff began entering Child Outcome data into HIS and this data was also available in the Client Service Data Warehouse (CSDW). The CSDW allows users to generate reports from HIS based upon criteria selected by the users through queries. This has allowed Child Outcome reports to be generated to improve the completeness and accuracy of Child Outcomes data. Additionally, improvements were made in FY 2012 to the referral and exit screens, providing users with a more complete selection of options in drop down menus and removing some open text fields to remove possibilities for data entry errors and increase the uniformity of data entered.

During FFY 2013, additional report queries will be developed to audit data entry errors and to improve overall data integrity by CDSAs. Beginning FFY 2013, CDSA staff will be entering early intervention services and transition data into HIS. This information will be available in CSDW for query building to ensure valid and reliable data. Staff at the local CDSAs will continue to receive training and technical assistance on how to use queries generated at the EI Central Office, as well as on how to modify existing queries.

The EI Branch Central Office will review and respond to OSEP's calculation for this indicator.

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012**

Not Applicable