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

General Supervision System:

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

The Mississippi State Department of Health (MSDH), as the lead agency under Part C of IDEA, administers the Early Intervention Program (EIP) in Mississippi, known as the MS First Steps EIP. MS First Steps EIP consists of nine Public Health Districts (PHDs) that implement EI services to families and children at the local levels (82 counties). State staff monitor PHDs through general and focused monitoring, data reviews (i.e., data captured in the Child Registry), desk audits (i.e, submission of paper records), annual fiscal audits, dispute resoultions, and training/technical assitance.

In FFY 2012, the MS First Steps EIP's General Supervision Manual was developed by State staff with technical assistance from the the Southeast Regional Resource Center (SERRC) and the Early Childhood Technical Assistance (ECTA) Center. In FFY 2013, the MS First Steps EIP staff made revisions to the General Supervision Manual (see attachment) and these revisions are currently being implemented within the Early Intervention System (EIS) programs.

The State staff work closely with the PHDs, along with four Quality Techinical Assistants and one contract Quality Monitor, to identify the root cause(s) of noncomplinace within the EIS programs, ensure timely correction of noncompliance, and as appropriate, take enforcement actions against any EIS program that continues to show noncompliance.

Technical Assistance System:

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

The State contracts with four Quality Technical Assistants (QTAs) who provide intense, high quality, evidence based technical assistance and support to assigned regional EIS programs. The EI Data Manager and other State staff identify TA needs according to periodic data analyses and surveys of the PHDs. EIS program staff also request TA from The QTAs or State staff also respond to specific requests for TA from local EIS programs and staff.

QTAs and State staff provide TA and support local staff via face-to-face visits, conference calls, and video-conferences. The QTAs provide new Service Coordinators (SCs) with training through coaching and hands-on experiences. QTAs periodically accompany SCs and service providers on home visits to offer guidance and support during comprehensive evaluations and Individualized Family Service Plan (IFSP)meetings. QTAs also periodically visit with SCs in their offices to review records to identify compliance and noncompliance, address concerns, and support SCs and service providers to improve the quality of services to families of children with delays or disabilities. QTAs work with their assigned EIS programs to develop strategies and activities for Corrective Action Plans (CAPs) and Improvement Plans (IPs). QTAs ensure that CAPs and IPs are implemented with fidelity and assist with documenting evidence of change in practices.

State staff ensure the QTAs receive quality professional development and offer supervision and guidance on EI best practices through video-conferences on a bimonthly basis. The QTAs are connected with national professional associations and technical assistance centers, regularly participating in webinars and Professional Learning Communities (PLCs) to enhance their knowledge of evidence-based practices for young children. QTAs also participant in quarterly State Interagency Coordinating Council (SICC) meetings and are actively involved as stakeholders in the State Systemic Improvement Plan (SSIP) process.

Professional Development System:

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

The State staff provides annual trainings to EI staff and providers on updates regarding IDEA requirements. The State staff provided regional trainings in October 2014 to update EI staff and providers on Early Intervention's revised Procedures. The State staff also disseminated a Needs Assessment survey to District staff to gather input on training needs. The State staff have analyzed the survey results and have determined the top three training needs for each PHD. The State staff are in the process of developing training modules to meet the specific needs identified and will provide ongoing, evidence-based training on the Part C requirements, indicators, and best practices.

The MS First Steps EIP is in the process of developing online training modules by adapting existing resources from the Texas EI Program, the OSEP-funded IRIS Center, and the National Dissemination Center for Children with Disabilities (NICHCY), located on the Center for Parent Informaion and Resources (CPIR) website. Using an online training format will enable the State to disseminate critical evidence-based content to service providers in a timely manner and allow them repeated access to content which can be viewed at convenient times and locations. These online training modules will be supplemented with real-time online or face-to-face training and integrated assessments to provide high-quality learning experiences through regional PLCs. The variety of training approaches and topics to be offered will enable State staff to individualize training to meeting the needs of diverse providers, provide targeted technical assistance at the local level, and streamline processes for providers to access high-quality professional development. This new approach to professional development will ensure service providers have the knowledge and skills to provide services effectively to improve results for infants and toddlers with disabilities and their families.

The MS First Steps EIP anticipate rolling out our high-quality training modules for EI staff and providers beginning Summer 2015. This new training approach will be evaluated through feedback from trainees as well as evidence of improved practices identified during general supervision (e.g., desk audits) activities.

Stakeholder Involvement:

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

The APR targets were developed by a collaborative team of the State's lead agency staff and the State Interagency Coordinating Council (SICC) members including service providers, Head Start representative, Dept. of Ed representative, parents, Institute of Higher Learning (IHL) representative, University staff, Medicaid representatives, parent advocacy groups, and other community leaders. The MS EIP staff meets with its SICC on a quarterly basis. The last meeting was held on November 14, 2014. The team reviewed its historical targets and data over the last several years, compared the the State's data and targets with the National targets, discussed pros and cons of the system, and strategized on realistic goals/targets for the State over the next six- year grant cycle. Following are the targets that were set for the Result Indicators based on research of the State's population, goals, and assessment needs.

- Indicator 2 - Natural Environment: target to remain at 95%
- Indicator 3 - Child Outcomes: Summary Statement 1 (Outcomes A - C) target to remain at 85%. Summary Statement 2 (Outcomes A - C) target set at 63%.
- Indicator 4 - Family Survey: Target set at 92%.
- Indicator 5 & 6 - Data was not available to present to stakeholders during the November 14th meeting; therefore, State staff set targets based on realistic goals and the population of the state. These targets will be presented during the next SICC meeting on February 13, 2015 and may be revised based upon input from the stakeholders.

Reporting to the Public:

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

The MS EIP FFY 2012 APR and 2012 SPP were published on the MS State Department of Health's website (http://msdh.ms.gov/msdhsite/static/41,0,74,63.html), along with seven additional years of reports, to be accessible by the public upon its completion, submission, and approval from OSEP. The performance of each local EIS program (i.e., the nine PHDs) disaggregated for comparison relative to the State targets is also included in the reports published online. The website also provides information (i.e., phone and email contact information) to submit comments about the APR and SPP reports. The FFY 2012 SPP was reviewed and revised to include improvement activities/strategies, required by OSEP, for the last reporting cycle of the five year APR grant period.

Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	76.00%	77.00%	76.00%	78.00%	76.00%	87.00%	95.00%	96.00%

Key: Gray – Data Prior to Baseline   Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	2,033	2,151

Explanation of Alternate Data

The number submitted in the "Overwrite Data" column is based on cumluative data collected over the APR reporting period of July 1, 2013 through June 30, 2014. The pre-populated "Data" total (i.e., 2033 of infants and toddlers with IFSPs) is based on the December 1, 2013 Child Count data.

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,852	2151	96.00%	100%	94.19%

Explanation of Slippage

MS First Steps EIP has made significant progress toward the target of 100% over the past three years; however, the MS First Steps EIP has not met the target of 100%. In addition, there was slippage from the FFY2012 performance (i.e., 96%) in the FFY 2013 performance (i.e., 94.19%). Several changes in FFY 2013 contributed to this slippage, including the loss of service providers in PHDs, particularly in the more rural areas of the State, recent changes to the Medicaid managed care systems, and reimbursement processes, and increased out-of-pocket health care costs for privately insured families. Due to the limited number of service providers who serve in areas with low population density, these providers often have full caseloads and are unable to serve additional children within 30 days.

State level staff and Quality Technical Assistants have assisted District staff with developing improvement activities to implement over the next reporting cycle to increase their abilities to meet the 30-day timeline. In addition, reports available in the Child Registry system can be used by PHD supervisors to monitor their staff and to ensure services can be provided for children in a timely manner.

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of infants and toddlers with IFSPs who receive their early intervention services on their IFSPs in a timely manner)	174

What is the source of the data provided for this indicator?
○ State monitoring
◉ State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

Data is based on a full reporting period from July 1, 2013 through June 30, 2014.

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Data is captured in the Child Registry and accurately reflect data that was pulled and analyzed for infants and toddlers with IFSPs for the full reporting period.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
6	6		0

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

MS verified correction of non-compliance through additional (1) data audits (i.e, data verified in the Child Registry), (2) record reviews, and (3)focused monitoring visits. The State's Data Manager provided the Early Intervention System (EIS) programs in Public Health Districts (PHDs) and Quality Technical Assistants (QTAs) with specific data (i.e., random pull of cases - mininum of 10% per District) to verify compliance of additional cases that were not initially sited for non-compliance. Approximately 5 cases per Service Coordinator were reviewed by QTAs for compliance. There were some systematic issues identified and addressed. Additional focused monitoring was conducted to verify correction of non-compliance.

These PHDs are currently in compliance with correctly implementing the 30-day timeline requirements for provision of

services based on the review of updated data subsequently collected through onsite monitoring and the Child Registry. State staff and Quality Technical Assistants completed verification of correction in the PHDs on the dates listed below:

- PHD I on March 13, 2014
- PHD II on April 15, 2014,
- PHD III on March 25, 2014
- PHD IV on March 21, 2014,
- PHD V on February 18, 2014,
- PHD VI on March 4, 2014
- PHD VII on March 11, 2014
- PHD IX on February 25, 2014

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

The State's Data Manager identified non-compliance of EIS programs by conducting a data audit on all cases in the Child Registry. Specific cases were identified by a unique number and sent to the QTAs and local staff to address the issue and provide a justification on why services started after the 30 day timeline.

The State verified that each EIS program/PHD corrected each individual case of noncompliance (although services were late) by reviewing and ensuring that a "start date of services" was entered in the Child Registry and ensured that services started by reviewing proper documentation of each individual paper record of initial start date of services, provider's name and contact information, and documentation of progress notes (if available).

Indicator 2: Services in Natural Environments

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		94.00%	95.00%	96.00%	97.00%	98.00%	98.00%	95.00%
Data	97.00%	97.00%	97.00%	91.00%	97.00%	97.00%	95.00%	94.00%

Key: Gray – Data Prior to Baseline   Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

The EIP met with its SICC members on November 14, 2014 and set targets for the Natural Environment. Targets were set at 95% for the next 5 years. These targets are based on historical data and the State's capacity to serve children in the Natural Environment.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	1,918	
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	2,033	

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,918	2,033	94.00%	95.00%	94.34%

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

None

Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Results indicator: Percent of infants and toddlers with IFSPs who demonstrate improved:

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

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

Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A1	2013	Target ≥					76.00%	78.00%	78.00%	78.00%
		Data				76.00%	87.00%	90.00%	83.00%	88.00%
A2	2013	Target ≥					66.00%	68.00%	68.00%	68.00%
		Data				66.00%	70.00%	64.00%	65.00%	64.00%
B1	2013	Target ≥					82.00%	84.00%	84.00%	84.00%
		Data				82.00%	86.00%	88.00%	82.00%	86.00%
B2	2013	Target ≥					68.00%	70.00%	70.00%	70.00%
		Data				68.00%	69.00%	63.00%	66.00%	64.00%
C1	2013	Target ≥					84.00%	86.00%	86.00%	86.00%
		Data				84.00%	88.00%	89.00%	82.00%	86.00%
C2	2013	Target ≥					73.00%	75.00%	75.00%	75.00%
		Data				73.00%	72.00%	69.00%	65.00%	63.00%

Key: ☐ Gray – Data Prior to Baseline   ☐ Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A1 ≥	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%
Target A2 ≥	63.00%	63.00%	63.00%	63.50%	64.00%	64.00%
Target B1 ≥	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%
Target B2 ≥	63.00%	63.00%	63.00%	64.00%	64.50%	65.00%
Target C1 ≥	85.00%	85.00%	85.00%	85.00%	85.00%	85.00%
Target C2 ≥	63.00%	63.00%	63.00%	63.50%	64.00%	64.00%

Targets: Description of Stakeholder Input

The MS First Steps EIP met with its SICC members on November 14, 2014 and set targets. Targets for Summary Statement 1 for Outcomes A - C were set at 85% and Summary Statement 2 for Outcomes A - C were adjusted to 63%. These targets are based on the number of children that exited the program and were not meeting age expectation, the population of children with medical conditions that have a high probability of slowly progressing, target data of other states, and setting ambitious but realistic targets for the percentage of children who should exist Part C meeting age expectations according to the stakeholders.

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	1,162

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

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

	Number of Children
a. Infants and toddlers who did not improve functioning	10
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	112
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	291
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	384
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	365

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	675	797	88.00%	85.00%	84.69%
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	749	1,162	64.00%	63.00%	64.46%

Explanation of A1 Slippage

During the past four years, the MS First Steps EIP has focused on improving data quality. Initially, high variability was noticed among the PHDs with results that may have underestimated as well as overestimated child performance. Subsequently, providers have received additional training focusing on understanding typical child development and the use of the decision tree process for providing ratings for children. As service providers have increased their knowledge of the rating process, the quality of the data has improved and become more stable; however, due to the wider variability of ratings collected at entry, up to three years prior, compared to the more realistic and stable ratings collected at exit, the ability to accurately interpret the slippage/no slippage on results indicators is hampered. With improved data quality, the MS First Steps EIP will gain more confidence in the interpretations of areas of slippage/no slippage and will be able to implement improvement strategies to address underlying concerns.

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

	Number of Children
a. Infants and toddlers who did not improve functioning	9
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	115
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	310
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	350
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	378

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	660	784	86.00%	85.00%	84.18%

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	728	1,162	64.00%	63.00%	62.65%

Explanation of B1 Slippage

During the past four years, the MS First Steps EIP has focused on improving data quality. Initially, high variability was noticed among the PHDs with results that may have underestimated as well as overestimated child performance. Subsequently, providers have received additional training focusing on understanding typical child development and the use of the decision tree process for providing ratings for children. As service providers have increased their knowledge of the rating process, the quality of the data has improved and become more stable; however, due to the wider variability of ratings collected at entry, up to three years prior, compared to the more realistic and stable ratings collected at exit, the ability to accurately interpret the slippage/no slippage on results indicators is hampered. With improved data quality, the MS First Steps EIP will gain more confidence in the interpretations of areas of slippage/no slippage and will be able to implement improvement strategies to address underlying concerns.

Explanation of B2 Slippage

During the past four years, the MS First Steps EIP has focused on improving data quality. Initially, high variability was noticed among the PHDs with results that may have underestimated as well as overestimated child performance. Subsequently, providers have received additional training focusing on understanding typical child development and the use of the decision tree process for providing ratings for children. As service providers have increased their knowledge of the rating process, the quality of the data has improved and become more stable; however, due to the wider variability of ratings collected at entry, up to three years prior, compared to the more realistic and stable ratings collected at exit, the ability to accurately interpret the slippage/no slippage on results indicators is hampered. With improved data quality, the MS First Steps EIP will gain more confidence in the interpretations of areas of slippage/no slippage and will be able to implement improvement strategies to address underlying concerns.

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children
a. Infants and toddlers who did not improve functioning	10
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	124
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	315
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	402
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	311

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program (c+d)/(a+b+c+d).	717	851	86.00%	85.00%	84.25%
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program (d+e)/(a+b+c+d+e).	713	1,162	63.00%	63.00%	61.36%

Explanation of C1 Slippage

During the past four years, the MS First Steps EIP has focused on improving data quality. Initially, high variability was noticed among the PHDs with results that may have underestimated as well as overestimated child performance. Subsequently, providers have received additional training focusing on understanding typical child development and the use of the decision tree process for providing ratings for children. As service providers have increased their knowledge of the rating process, the quality of the data has improved and become more stable; however, due to the wider variability of ratings collected at entry, up to three years prior, compared to the more realistic and stable ratings collected at exit, the ability to accurately interpret the slippage/no slippage on results indicators is hampered. With improved data quality, the MS First Steps EIP will gain more confidence in the interpretations of areas of slippage/no slippage and will be able to implement improvement strategies to address underlying concerns.

Explanation of C2 Slippage

During the past four years, the MS First Steps EIP has focused on improving data quality. Initially, high variability was noticed among the PHDs with results that may have underestimated as well as overestimated child performance. Subsequently, providers have received additional training focusing on understanding typical child development and the use of the decision tree process for providing ratings for children. As service providers have increased their knowledge of the rating process, the quality of the data has improved and become more stable; however, due to the wider variability of ratings collected at entry, up to three years prior, compared to the more realistic and stable ratings collected at exit, the ability to accurately interpret the slippage/no slippage on results indicators is hampered. With improved data quality, the MS First Steps EIP will gain more confidence in the interpretations of areas of slippage/no slippage and will be able to implement improvement strategies to address underlying concerns.

Was sampling used?   No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)?   Yes

Actions required in FFY 2012 response table

The State must report progress data and actual target data for FFY 2013 in the FFY 2013 APR.

Responses to actions required in FFY 2012 response table

Progress data and actual target data for FFY 2013 are reported in the FFY 2013 APR as requested by OSEP.

Indicator 4: Family Involvement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A	2006	Target ≥				89.00%	92.00%	95.00%	95.00%	95.00%
		Data		84.00%	84.00%	81.00%	83.00%	85.00%	92.00%	93.00%
B	2006	Target ≥				89.00%	92.00%	95.00%	95.00%	95.00%
		Data		87.00%	87.00%	84.00%	86.00%	88.00%	92.00%	96.00%
C	2006	Target ≥				90.00%	92.00%	95.00%	95.00%	95.00%
		Data		88.00%	88.00%	85.00%	89.00%	85.00%	89.00%	94.00%

Key: ☐ Gray – Data Prior to Baseline   ☐ Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A ≥	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%
Target B ≥	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%
Target C ≥	92.00%	92.00%	92.00%	92.00%	92.00%	92.00%

Targets: Description of Stakeholder Input

The MS First Steps EIP met with its SICC members on November 14, 2014 and targets were set for Family Involvement. Targets were set at 92% over the next 5 years based on historical performance and an understanding of the change implemented in how this indicator was rated. Targets were adjusted to account for improved parental understanding of their family rights and procedural safeguards, allowing families to understand and to provide ratings with increased accuracy on the family survey. In addition, the targets reflect the new methodology used to calculate these ratings. (For more information on the methodology use, see the comments under the FFY 2013 data.) The MS First Steps EIP also changed the process for calculating each of the indicators based on guidance from the ECO Center. Previous results used a representative item for each outcome; the FFY2013 data are based upon an average across all items loading on each outcome. This change formula caused percentages to be slightly higher than expected. The State is now utilizing the correct methodolgy to calculate the results and expect more accurate ratings on the family survey.

FFY 2013 SPP/APR Data

Number of respondent families participating in Part C	2,034
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	661
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	749

B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	672
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	749
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	661
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	749

	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	93.00%	92.00%	88.25%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	96.00%	92.00%	89.72%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	94.00%	92.00%	88.25%

Explanation of A Slippage

In FFY 2013, the MS First Steps EIP changed the process for calculating each of the indicators based on guidance in the *Frequently Asked Questions about the Family Outcomes Survey - Revised Version* (March 2014) from the ECO Center. Previous results used a representative item for each outcome (i.e., results were based on the item with the highest rating); the FFY2013 data are based upon an average across all items loading on each outcome. This change makes comparison between the years difficult but was made to reflect the data provided to the program through the family survey more completely and accurately.

Explanation of B Slippage

In FFY 2013, the MS First Steps EIP changed the process for calculating each of the indicators based on guidance in the *Frequently Asked Questions about the Family Outcomes Survey - Revised Version* (March 2014) from the ECO Center. Previous results used a representative item for each outcome (i.e., results were based on the item with the highest rating); the FFY2013 data are based upon an average across all items loading on each outcome. This change makes comparison between the years difficult but was made to reflect the data provided to the program through the family survey more completely and accurately.

Explanation of C Slippage

In FFY 2013, the MS First Steps EIP changed the process for calculating each of the indicators based on guidance in the *Frequently Asked Questions about the Family Outcomes Survey - Revised Version* (March 2014) from the ECO Center. Previous results used a representative item for each outcome (i.e., results were based on the item with the highest rating); the FFY2013 data are based upon an average across all items loading on each outcome. This change makes comparison between the years difficult but was made to reflect the data provided to the program through the family survey more completely and accurately.

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

Surveys are hand-delivered to all families who participate in the MS First Steps EIP with a return envelope with pre-paid postage. The survey has an accompanying letter with contact information for assistance in completing the survey, including the state parent resource center, translation services, and tribal contacts. Three months after the distribution of the family surveys, Service Coordinators make

follow-up contacts with families to encourage them to return their survey. The state office monitors the response rate and reports to District Coordinators if their district is underrepresented in the responses gathered. Surveys are collected over a six-month time frame to ensure ample time for participation.

In FFY2013, a total of 749 responses were collected yielding a response rate of 37% of families in the MS First Steps EIP. Analyses were conducted to determine the representativeness of the responses. When disaggregated by race, the respondent groups were not statistically different from the population of families in the MS First Steps EIP with the exception of the white race, which was overrepresented in the responses received (see *Table 1*). When disaggregated by geographic location according to the public health districts (PHD), the respondent groups were not statistically different from the population of families for PHD 3, 6, and 9. PHD 1and 7 were overrepresented in the responses received, and PHD 2, 4, 5, and 8 were underrepresented in the responses received (see *Table 2*).

Table 1: Responses Disaggregated by Race

Race	# of EI Families	# of EI Families who Returned Survey	% of EI Families who Returned Survey by Race	% of Total Responses by Race	% of EI Population by Race	Mississippi Population by Race
American Indian or Alaskan	10	2	20%	0.3%	0.5%	0.6%
Asian	24	6	25%	0.8%	1.2%	1.0%
Black or African American	960	330	34%	44.1%	47.2%	37.4%
Hispanic or Latino	44	15	34%	2.0%	2.2%	2.9%
Two or More Races	29	9	31%	1.2%	1.4%	1.1%
White	967	387	40%	51.7%	47.5%	57.5%
Total	**2,034**	**749**	**37%**	**100%**	**100%**	**100%**

Table 2: Responses Disaggregated by Geographic Location (according to Public Health Districts)

District	# of EI Families	# of Families that Returned Survey	% Returned Survey	Proportion Representative of Responses	% of EI Population
PHD 1	259	162	63%	21.6%	12.7%
PHD 2	196	54	28%	7.2%	9.6%

PHD 3	167	54	32%	7.2%	8.2%
PHD 4	203	53	26%	7%	10%
PHD 5	335	83	25%	11%	16.5
PHD 6	147	52	35%	6.9%	7.2%
PHD 7	190	108	57%	14.4%	9.3%
PHD 8	232	54	23%	7.2%	11.4%
PHD 9	305	129	42%	17.2%	15%
State	**2,034**	**749**	**37%**	**100%**	**100%**

Was sampling used?   No

Was a collection tool used?   No

☑ **Provide additional information about this indicator (optional)**

The state office will be working with the Public Health Districts (PHD) to ensure they have sufficient representation in the FFY2014 Family Survey. The state staff will be monitoring not only representtiveness for geographic location but also for Service Coordinators to ensure that systematic errors are not present in our data collection process. In addition, state staff will work with PHD staff to encourage minority participation to prevent any slippage in representation in the survey responses.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		0.55%	0.60%	0.65%	0.70%	0.75%	0.75%	0.75%
Data	0.53%	0.50%	0.49%	0.66%	0.74%	0.86%	0.57%	0.53%

Key: ☐ Gray – Data Prior to Baseline   ☐ Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	0.60%	0.61%	0.62%	0.63%	0.64%	0.65%

Targets: Description of Stakeholder Input

Indicator 5 data was not available to present to stakeholders during the November 14th meeting; therefore, State staff adjusted targets to reflect the change made to the eligibility criteria in 2011 (i.e., changed from 25% delay in one or more area to a 33% delay in one area and 25% delay in two or more areas). These targets were presented to the SICC at the meeting held on February 13, 2015. Based on the input provided by the stakeholders, these targets were accepted.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers birth to 1 with IFSPs	248	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	12/16/2014	Population of infants and toddlers birth to 1	38,913	

FFY 2013 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
248	38,913	0.53%	0.60%	0.64%

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

N/A

Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		1.53%	1.68%	1.78%	1.88%	1.98%	1.98%	1.98%
Data	1.36%	1.21%	1.34%	1.56%	1.66%	1.88%	1.74%	1.65%

Key: Gray – Data Prior to Baseline   Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	1.70%	1.72%	1.74%	1.76%	1.78%	1.80%

Targets: Description of Stakeholder Input

Indicator 6 data were not available to present to stakeholders during the November 14th meeting; therefore, State staff adjusted targets to reflect the change made to the eligibility criteria in 2011 (i.e., changed from 25% delay in one or more area to a 33% delay in one area and 25% delay in two or more areas). These targets were presented to the SICC at the meeting held on February 13, 2015. Based on the input provided by the stakeholders, these targets were accepted.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers birth to 3 with IFSPs	2,033	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	12/16/2014	Population of infants and toddlers birth to 3	117,730	

FFY 2013 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
2,033	117,730	1.65%	1.70%	1.73%

Actions required in FFY 2012 response table

None

FFY 2013 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

Responses to actions required in FFY 2012 response table

N/A

Indicator 7: 45-day timeline

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	88.00%	88.00%	93.00%	87.00%	92.00%	94.00%	96.00%	97.00%

Key: Gray – Data Prior to Baseline   Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,454	1,915	97.00%	100%	96.81%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline)	400

What is the source of the data provided for this indicator?
⊙ **State monitoring**
⦿ **State database**

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2013 - June 30, 2014

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Data accurately reflects the data for infants and toddlers with IFSPs in the reporting period from July 1, 2013 - June 30, 2014..

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

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Correction of Findings of Noncompliance Identified in FFY 2012

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

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

MS verified correction of non-compliance through additional (1) data audits (i.e, data verified in the Child Registry), (2) record reviews, and (3) focused monitoring visits. The State's Data Manager provided the Early Intervention System (EIS) programs in Public Health Districts (PHDs) and Quality Technical Assistants (QTAs) with specific data (i.e., random pull of cases - mininum of 10% per District) to verify compliance of additional cases that were not initially sited for non-compliance. Approximately 5 cases per Service Coordinator were reviewed by QTAs for compliance. There were some systematic issues identified and addressed. Additional focused monitoring was conducted to verify correction of non-compliance. These PHDs are now in compliance wtih correctly implementing the 45-day timeline requirements of development of an IFSP based on the review of updated data subsequently collected through onsite monitoring and the Child Registry.

State staff and QTAs completed verification of correction in the PHDs on the dates listed below:

- PHD II on February 26, 2014
- PHD III on February 24, 2014
- PHD IV on February 10, 2014
- PHD V on February 25, 2014
- PHD VI on October 1, 2014
- PHD IX on February 18, 2014

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

The State's Data Manager identified non-compliance of EIS programs by conducting a data audit on all cases in the Child Registry. Specific cases were identified by a unique number and sent to the QTAs and local staff to address the issue and provide a justification on why IFSPs were developed after the 45 day-timeline.

The State verified that each EIS program/PHD corrected each individual case of noncompliance (although the IFSP development was late) by reviewing and ensuring that an IFSP date was entered in the Child Registry and by reviewing the actual paper record of an IFSP to verify that the IFSP was being implemented.

Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	83.00%	90.00%	100%	87.00%	100%	100%	100%	100%

Key: Gray – Data Prior to Baseline   Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

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

◉ Yes
◉ No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,089	1,165	100%	100%	98.20%

Explanation of Slippage

Based upon a data review, it was determined that data were not entered in the Child Registry regarding transition steps and services for some children by 33 months of age or were entered incorrectly. After reviewing the results with each PHD, the State identified data entry errors and/or a failure to enter data for approximately 25% of these cases. The remaining instances of missing the timeline resulted from scheduling the Transition Conference after the 33 month deadline due to poor communication with the Local Education Agencies (LEAs).

The State staff and QTAs are providing one-on-one training to address data entry issues. In addition, the State staff and QTAs are providing intensive training in each PHD with all associated LEAs on transition requirements and timelines, including the timeline for developing steps and services in the Transition Plan. During these transition trainings, each PHD and LEA are creating individualized communication plans to ensure timely transition conferences and transition planning meetings. These efforts should ensure future compliance with the development of steps and services as well as timely and accurate data entry.

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

⊙ State monitoring

◉ State database

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

July 1, 2013 - June 30, 2014

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Data accurately reflect data for infants and toddlers with IFSPs for the reporting period of July 1. 2013 - June 30, 2015.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

N/A

Correction of Findings of Noncompliance Identified in FFY 2012

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

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

MS verified correction of non-compliance through additional (1)d ata audits (i.e, data verified in the Child Registry), (2) record reviews, and (3)focused monitoring visits. The State's Data Manager provided the Early Intervention System (EIS) programs in Public Health Districts (PHDs) and Quality Technical Assistants (QTAs) with specific data (i.e., random pull of cases - mininum of 10% per District) to verify compliance of additional cases that were not initially sited for non-compliance. Approximately 5 cases per Service Coordinator were reviewed by QTAs for compliance. There were some systematic issues identified and addressed. Additional focused monitoring was conducted to verify correction of non-compliance. These PHDs are now in compliance wtih correctly implementing transition steps and services based on the review of updated data subsequently collected through onsite monitoring and the Child Registry.

State staff and QTAs completed verification of correction in PHDs on the dates listed below:

- PHD VII on March 17, 2014
- PHD VIII on March 21, 2014

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

The State's Data Manager identified non-compliance of EIS programs by conducting a data audit on all cases in the Child Registry. Specific cases were identified by a unique number and sent to the QTAs and local staff to address the issue and provide a justification on why transition steps and services were late.

The State verified that each EIS program/PHD corrected each individual case of noncompliance (although services were late) by reviewing and ensuring that a date was entered in the Child Registry for transition steps and services and by reviewing the IFSP (paper record) for implementation dates of transition steps and services.

Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A. Developed an IFSP with transition steps and services at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday;

B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the toddler resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and

C. Conducted the transition conference held with the approval of the family at least 90 days, and at the discretion of all parties, not more than nine months, prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services.

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	66.00%	91.00%	98.00%	96.00%	98.00%	100%	100%	100%

Key: ⬜ Gray – Data Prior to Baseline   🟨 Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

Data include notification to both the SEA and LEA

🔘 Yes
⚪ No

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,163	1,165	100%	100%	99.83%

Explanation of Slippage

A data review was conducted which resulted in identifying two instances where notifications were not sent to the LEA of a child who is potentially eligibile for Part B by the child's 27 month of age. After reviewing the results with each PHD, the State identified Service Coordinators who failed to meet the notification timeline.

The State staff and QTAs are providing intensive training in each PHD with all associated LEAs on transition requirements and timelines, including the timeline for noitification of the LEA. During these transition trainings, each PHD and LEA are creating individualized communication plans to ensure timely noitifications and transition conferences. These efforts should

ensure future compliance with the noitification of the LEA.

Describe the method used to collect these data

Data was collected in the State's Child Registry. The State's Data Manager analyzed the data entered by the Service Coordinators.

Do you have a written opt-out policy? No

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

N/A

Correction of Findings of Noncompliance Identified in FFY 2012

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

Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	45.00%	79.00%	68.00%	73.00%	79.00%	98.00%	100%	99.00%

Key: ☐ Gray – Data Prior to Baseline ☐ Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%	100%

FFY 2013 SPP/APR Data

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

◉ Yes
◯ No

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
971	1,165	99.00%	100%	94.42%

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

◯ State monitoring
◉ State database that includes data for the entire reporting year

Provide the time period in which the data were collected (e.g., September through December, fourth quarter, selection from the full reporting period).

FFY 2013 Part C State Performance Plan (SPP)/Annual Performance Report (APR)

July 1, 2013 - June 30, 2014

Describe how the data accurately reflect data for infants and toddlers with IFSPs for the full reporting period.

Data accurately reflect data for infants and toddlers with IFSPs for the reporting period of July 1, 2013 - June 30, 2014.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table, not including correction of findings

N/A

Correction of Findings of Noncompliance Identified in FFY 2012

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

FFY 2012 Findings of Noncompliance Verified as Corrected

Describe how the State verified that each LEA with noncompliance is correctly implementing the regulatory requirements

MS verified correction of non-compliance through additional (1) data audits (i.e, data verified in the Child Registry), (2) record reviews, and (3) focused monitoring visits. The State's Data Manager provided the Early Intervention System (EIS) programs in Public Health Districts (PHDs) and Quality Technical Assistants (QTAs) with specific data (i.e., random pull of cases - mininum of 10% per District) to verify compliance of additional cases that were not initially sited for non-compliance. Approximately 5 cases per Service Coordinator were reviewed by QTAs for compliance. There were some systematic issues identified and addressed. Additional focused monitoring was conducted to verify correction of non-compliance. These PHDs are now in compliance wtih correctly implementing transition conferences based on the review of updated data subsequently collected through onsite monitoring and the Child Registry.

State staff and QTAs completed verification of correction in PHDs on the following dates listed below:

- PHD II on April 22, 2014
- PHD IV on March 11, 2014
- PHD IX on April 1, 2014

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

The State's Data Manager identified non-compliance of EIS programs by conducting a data audit on all cases in the Child Registry. Specific cases were identified by a unique number and sent to the QTAs and local staff to address the issue and provide a justification on why transition conferences were late or not conducted.

The State verified that each EIS program/PHD corrected each individual case of noncompliance (although services were late) by reviewing and ensuring that a transition conference date was entered in the Child Registry and by reviewing the actual paper record for documentation that a transition conference was conducted.

Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Historical Data

Baseline Data:

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

Key: ☐ Gray – Data Prior to Baseline   ☐ Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥						

Targets: Description of Stakeholder Input

Prepopulated Data

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

FFY 2013 SPP/APR Data

3.1 Number of resolution sessions	3.1(a) Number resolution sessions resolved through settlement agreements	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Indicator 10: Mediation

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Historical Data

Baseline Data: 2005

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

Key: Gray – Data Prior to Baseline   Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥						

Targets: Description of Stakeholder Input

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1.a.i Mediations agreements related to due process complaints	0	
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1.b.i Mediations agreements not related to due process complaints	0	
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1 Mediations held	0	

FFY 2013 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
0	0	0			

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Indicator 11: State Systemic Improvement Plan

Monitoring Priority: General Supervision

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

Baseline Data

FFY	2013
Data	63.60%

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	63.00%	63.00%	64.00%	64.50%	65.00%

Description of Measure

See attachment

Targets: Description of Stakeholder Input

See attachment

Data Analysis

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

See attachment

Analysis of State Infrastructure to Support Improvement and Build Capacity

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

See attachment

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

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified Measurable Result(s) for Infants and Toddlers with Disabilities and their Families must be clearly based on the Data and State Infrastructure Analyses and must be a child- or family-level outcome in contrast to a process outcome. The State may select a single result (e.g., increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills) or a cluster of related results (e.g., increase the percentage reported under child outcome B under Indicator 3 of the SPP/APR (knowledge and skills) and increase the percentage trend reported for families under Indicator 4 (helping their child develop and learn)).

Statement

See attachment

Description

See attachment

Selection of Coherent Improvement Strategies

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

See attachment

Theory of Action

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

Submitted Theory of Action: [Indicator 11 Theory of Action Graphic](#)

☑ **Provide a description of the provided graphic illustration (optional)**

Description of Illustration

See attachment

Certify and Submit your SPP/APR

I certify that I am the Director of the State's Lead Agency under Part C of the IDEA, or his or her designee, and that the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report is accurate.

Selected: Lead Agency Director

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part C State Performance Plan/Annual Performance Report.

Name: Stacy Callender

Title: Director

Email: stacy.callender@msdh.ms.gov

Phone: 601-576-7816