

WV Part C

FFY2013 State Performance Plan / Annual Performance Report

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.

West Virginia Part C**GENERAL SUPERVISION**

In West Virginia, the lead agency for implementation of the State's early intervention system under Part C of the Individuals with Disabilities Education Act (IDEA) is the West Virginia Department of Health and Human Resources (WVDHHR). The Part C system is administered through the Bureau for Public Health, Office of Maternal, Child and Family Health, and WV Birth to Three (WVBTT).

In collaboration with the West Virginia Early Intervention Interagency Coordinating Council (ICC), WV Birth to Three (WVBTT) has adopted a Mission statement and Key Principles. The Mission and Key Principles statements were adapted from the national work done around Key Principles and Quality Practices and are posted on the WV Birth to Three website.

Multiple workgroups are using the mission and quality practices documents for guidance as they review and complete infrastructure analysis of WVBTT procedures and written materials to assure alignment with the quality practices. The ICC has been working over the past year to develop quality materials that demonstrate partnerships with families beginning at referral and introduce the intended outcomes of Part C.

WVBTT has statute, policy and procedure and technical assistance documents that identify the requirements of Part C of IDEA and how the requirements are to be assured. These requirements are integrated into the statewide structure and monitoring system. WV Birth to Three seeks input from a variety of stakeholders and makes adjustments to the procedures for implementation as needed.

WVBTT has close collaborative relationships with other early childhood programs including Home Visitation, preschool special education/619, HeadStart/Early HeadStart, and Child Care to assure effective components of the overall system structure including child find, service delivery and program evaluation. West Virginia's early childhood programs have collaborated to establish broad outcomes for all children and families. WVBTT will continue to collaborate with partners as measurements for these outcomes are developed.

WVBTT has multiple collaborative relationships with other programs within the Office of Maternal, Child and Family Health that result in early identification of children in need of early intervention services. These collaborations include the recently established WV Help Me Grow, providing parents of all children birth to age five with linkages to resources and the opportunity for standardized developmental screening. WVBTT also works closely with Home Visitation programs statewide, where developmental screening and referral is an important benchmark. West Virginia has a unique newborn screening program for all births which includes a component to identify newborns who may be at risk of developmental delay. Other collaboration occurs with Newborn Hearing Screening and the Health Check (EPSDT) program.

WVBTT administers a comprehensive general supervision system that includes onsite monitoring reviews, practitioner self-assessments, procedural safeguards including a state complaint process, annual grant applications and enrollment agreements, and an integrated data system that meets Federal data reporting requirements and provides ongoing program evaluation data at the state and regional level.

The system structure includes eight Regional Administrative Units (RAUs) with geographic areas of responsibility. All RAUs sign an agreement with the lead agency, with assurances to abide by all policies and procedures. The RAUs have child specific responsibilities that include: accepting and facilitating referrals for all potentially eligible infants and toddlers in their region; establishing the electronic and hard copy educational record; maintaining the confidentiality of the child records; and preparing the family for and facilitating the initial evaluation/assessment process, initial eligibility determination, and initial development

of the Individualized Family Service Plan (IFSP). The RAUs also have interagency responsibilities that include: child find; collaboration with other community partners for effective implementation of the Part C system; and, linking families to resources including maintaining a central directory of resources. Each RAU receives funding to support a full time Parent Partner in order to promote specific outreach to families and connection with other family support and advocacy groups.

WV Birth to Three utilizes a Central Finance Office (CFO) structure as a component of the general supervision system. The CFO coordinates the enrollment of qualified service coordinators and direct service practitioners. Only those individuals who meet the lead agency's initial and ongoing personnel standards, training and other credential requirements, are enrolled in the WV Birth to Three System. All Interim Service Coordinators employed through the RAUs, as well as Ongoing Service Coordinators and Direct Service Practitioners, must be enrolled and credentialed through the Central Finance Office process. The enrollment agreements provide options to dis-enroll any individual who does not provide services within required policies and procedures.

The CFO structure includes a statewide data system that integrates provider enrollment, child records, service authorizations and payment for services provided. When individuals are selected by families to provide identified services, the data system generates 'authorizations' that reflect the specific IFSP service commitments. Enrolled service coordinators and practitioners submit billing claims directly to the CFO after providing the service as identified on the IFSP.

The CFO processes claims and sends a file to the lead agency for processing of payment to local service providers. The CFO also sends a monthly Explanation of Benefit (EOB) to each family. This feature was added as a commitment to family centered services and the importance of parent/professional partnerships. Families report maintaining copies of their service activity notes for later comparison with EOBs. EOBs demonstrate a partnership with families and provide additional information for them to judge whether or not services are meeting their needs.

The integrated data system provides an important infrastructure to support the implementation, monitoring and evaluation of the early intervention system. WVDHHR has made a substantial investment and commitment to modernize the current statewide data system. With input and feedback from broad stakeholder groups the system is being modernized to meet ongoing program needs. The data system enhancements scheduled to be completed by the fall of 2015 will increase reporting functions at the local and regional level, provide real time access to information at the state level, assign a unique child identification number, and promote increased communication among IFSP team members. The system will also provide for entry of the child outcomes measurement ratings in each child's electronic record.

The overall components of the general supervision system provide multiple ways to assure effective implementation of the early intervention system including identification of potential noncompliance. When noncompliance is identified, the CQI Coordinator issues findings and corrective action requirements for the respective service coordinator, service practitioner, or RAU. Regional Birth to Three state staff is available to provide technical assistance as appropriate, in accordance with the plans of correction, for the involved individual/agency. The CQI Coordinator monitors the status of corrective plans to assure that documentation of correction is received within the requested timeline, and to assure that noncompliance has been corrected. If documentation is not provided as requested, the involved party receives another notification from the CQI Coordinator.

If corrective actions are not completed as required, the State Office initiates next steps, implementing sanctions as appropriate. Sanctions may include disenrollment from the Birth to Three System if the individual/agency is not able to achieve correction of noncompliance within the required timeline, which in all cases is no more than one year from the time of identification.

WV BTT also coordinates internally with the Division of Research and Evaluation in the Office of Maternal, Child and Family Health to conduct periodic onsite reviews and desk audits of RAU and service provider functions.

The WVBTT state office works closely with the Bureau for Public Health and Department of Health and Human Resources to identify funding strategies that support the effective provision of early intervention services for all eligible infants and toddlers.

Other system components are described in more detail under the Personnel/Workforce and Training/TA sections.

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.

TECHNICAL ASSISTANCE

WV Birth to Three provides a coordinated system of technical assistance to support early intervention practitioners, service coordinators and Regional Administrative Units (RAUs). State personnel include four regional Technical Assistance (TA) Specialists who each support two of the eight RAU regions. The TA Specialists reach out to each newly enrolled service providers with introduction and information on how to access ongoing technical assistance support. TA Specialists maintain a listserv for their geographic regions and provide important updates to all enrolled providers. In addition, TA Specialists meet regularly with the RAUs to provide support and identify recruitment and technical assistance needs within the region.

Other processes in place to deliver high quality technical assistance include Communities of Practice (CoP) designed specifically for the various disciplines of professionals in WVBTT. These CoP are scheduled on the state training calendar and open to all enrolled professionals in the discipline. CoP members identify their unique needs and design strategies to effectively address those needs.

WVBTT uses other strategies to help professionals stay in touch with the latest information including statewide email broadcasts and posted Tips of the Week.

Technical assistance is always offered to professionals as a component of any correction action.

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.

PROFESSIONAL DEVELOPMENT

WV Birth to Three (WVBTT) implements a Coordinated System of Professional Development (CSPD) for Part C that includes personnel standards and competencies, recruitment and retention, and ongoing professional development strategies. WVBTT coordinates professional development activities for Part C professionals with other early childhood, state and community partners as well as higher education pre-service and in-service programs.

WVBTT recruits and enrolls professionals who meet the state's highest standard for each discipline. Professional credentials are reviewed by the CFO to assure that all enrolled professionals meet the initial and annual re-enrollment requirements, including educational status, licensing and required training. Only those professionals who meet the requirements and sign agreements with WVBTT to follow all requirements of Part C of IDEA are enrolled and made available to provide services for children and families. Newly enrolled professionals are contacted by state Technical Assistance Specialists and offered the opportunity to be matched with an experienced provider.

WVBTT offers over 15 webinar training modules, on an on-going basis, to assist newly enrolling and seasoned professionals in understanding key components in the provision of high quality early intervention services such as: Beginning the Partnership with Families, Creating Participation Based IFSP Outcomes, Keys to Coaching, Making Home Visiting Meaningful, Child Outcomes, Assistive Technology, and Transition.

WVBTT also offers webinar training in the areas of child welfare, early literacy, autism and teaming. In 2014-2015, WV Birth to Three has offered a monthly webinar series on pertinent topics related to supporting toddlers on the Autism Spectrum. The Autism Spectrum webinars have been presented by local, state and national presenters on topics including feeding, sleep and toileting, co-occurring conditions, and optimistic parenting.

To better serve the needs of professionals enrolled in the WV Birth to Three System, WVBTT has revised training evaluation forms to measure how the participants feel they will benefit from the information, if they feel they will enhance or change their practice and to identify what other trainings might be of interest. This data will be used to design additional training or technical assistance opportunities. One area of need identified has been assistive technology and a workgroup has been formed to begin work in this area.

WVBTT state personnel are members of interagency professional development committees that are addressing the integration of professional development activities across early childhood programs. With input from stakeholders across all early childhood programs, the professional development committee of the Early Childhood Advisory Council has revised West Virginia's Core Knowledge and Competencies for Early Childhood Professionals to address the needs of all early childhood programs. The Part C Coordinator served as Co-Chair of this committee. The work is in final review and is expected to be released by summer of 2015. The committee's future work will include the development of online career lattice and planning resources.

In addition, the CSPD Coordinator for WVBTT facilitates the Pyramid Model State Leadership team, whose mission is to enhance the capacity of early childhood professionals to support the social emotional and literacy development of young children. The group works on cross sector activities to promote social emotional development.

WVBTT also facilitates collaborative groups that focus on identifying the needs of professionals serving children with specific diagnoses. These include the state Leadership Team for Autism and the state level Community of Practice interagency group identifying and addressing the needs of children from birth to school age who are deaf or have a hearing loss. Stakeholders in these groups include parents, higher education, local service providers and state agency representatives. Decisions around policy, guidance and training are affected by input from the groups.

WVBTT state personnel are members of other state level collaborative groups designed to promote the knowledge, skills and competencies of professionals serving young children, including the Association for Positive Behavior Support and the Early Childhood Infant Mental Health Association.

WVBTT has established relationships with Institutions of Higher Education, with faculty presentations on topical content as well as collaborative events such as the annual Camp Gizmo. Camp Gizmo provides a unique opportunity for professionals, parents and students to come together to problem solve effective solutions for young children who need accommodations and assistive technology in order to effectively participate in home, school and community settings. Three of the major universities in the state are now making Camp Gizmo a summer learning opportunity for pre-service students. Students have the opportunity to handle a variety of assistive technology that they otherwise would probably not be able to access, they work on an interdisciplinary basis with other professionals in order to understand the needs of children and families.

West Virginia's professional development system also includes the unique collaboration among Part C, 619, Child Care and Head Start to identify and fund coordinated professional development opportunities through the Early Childhood Training Connections and Resources (ECTCR). Through this collaboration, WV BTT will have access to Blackboard and Blackboard Collaborate to design and host on-line courses and webinar training. Members of the WVBTT state staff will be trained as course designers in the spring of 2015.

In 2014, WVBTT offered an on-line course, Universal Practices for Promoting the Social Emotional

Development of Infants and Toddlers. WVBTT was able to collaborate with Concord University to offer 6 CEUs for the completion of the course. This partnership may open new opportunities for collaboration with other institutions of higher education for additional online courses.

Stakeholder Involvement:

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

STAKEHOLDER INVOLVEMENT

The West Virginia Early Intervention Interagency Coordinating Council (WVEIICC) served as the primary stakeholder group for development of the FFY2013 Annual Performance Report. The WVEIICC is established under WV Code Chapter 16-5K. The Council meets every other month, with membership that meets IDEA requirements, including parents, service providers, and representatives of various state agencies. West Virginia has broad stakeholder representation within the council including the following:

- Parents
- Early Intervention Service Providers – Service Coordinators and Direct Service Providers
- Representatives of Regional Administrative Units – System Point of Entry
- Head Start Collaboration Office and Local Head Start
- Preschool 619 Coordinator and Local Education Agency Preschool Teacher
- State Agencies including Title V, Medicaid, Child Welfare, Child Care, and WV CHIP
- Advocacy Agencies including Developmental Disabilities Council (DDC), WV Advocates (WVA), WV Parent Training and Information (WVPTI)
- Family Resource Networks (FRN)
- Parent Educator Resource Centers (PERC)

The lead agency provides updates to the WVEIICC at each meeting and seeks ongoing input throughout the year as improvement strategies are identified and implemented. Improvement activities are coordinated throughout the year with other interagency and intra-agency partners including the Newborn Hearing Screening Advisory Council, the Early Childhood Advisory Council, the Special Education Advisory Council, the WV Home Visitation Stakeholder Group, Community of Practice for Children who are Deaf or Hard of Hearing; and multiple discipline specific Communities of Practice within the WVBTT system. The lead agency staff also shared information with, and obtained feedback from the eight Regional Administrative Units (RAUs) throughout the year.

The WVEIICC assisted in establishing 2013-2018 targets for all Indicators of the SPP/APR. This process was started during the summer retreat of 2014 with an overview and understanding of the draft information regarding requirements for the new SPP/APR process. Additional data review and target discussions occurred during the September and November, 2014 meetings and the January, 2015 meeting in order to establish agreement on targets for the 2013-2018 period. The broad representation on West Virginia's council helps to assure varied input and perspectives, all important in reaching agreement on the targets.

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.

REPORTING TO THE PUBLIC

A full copy of West Virginia's Part C State Performance Plan (SPP), APR, and local performance data for FFY 2012 are posted on the WV Birth to Three website. In addition to the website posting, members of the

WVEIICC (including advocacy groups and other interagency partners), and RAU representatives assist the lead agency with distribution of information through appropriate printed media such as listservs, organizational newsletters, Parent Newsletters of the Regional Administrative Units (RAUs), and the interagency-published Early Childhood Provider Quarterly magazine. WV Birth to Three (WVBTT) will continue to report to the public regarding: a) the State's progress and/or slippage in meeting the measurable and rigorous targets of the State Performance Plan; and b) the performance of each region related to the outcome indicators and targets. Public reporting of state and local data is posted on the WVBTT website at <http://www.wvdhhr.org/birth23/lawandregs.asp>.

OSEP Response

In Indicator 7, the State clarified that it identified, in FFY 2011, the one remaining of noncompliance based on both FFY 2010 and FFY 2011 data, and that it has verified the correction of that noncompliance.

Required Actions

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	96.30%	99.00%	97.00%	95.09%	98.00%	98.47%	98.10%	98.00%

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	2,925	305

Explanation of Alternate Data

The data source was changed to reflect the selected period of time for which data was gathered and analyzed.

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
228	305	98.00%	100%	99.02%

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)

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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).

Gathering the data for this indicator required using both the statewide data system and record review. Data was gathered for all of the 305 children with new IFSPs or new services across all eight regions of the state, for the month of May, 2014. WV Birth to Three state staff then gathered additional information in order to determine the time period between parental consent/authorization for service and the first date of service delivery. Analysis also included documentation from the children's records regarding the reason that any service was not delivered in a timely fashion.

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

The May, 2014 time period was selected near the end of the reporting period for easier access to onsite records for verification. The period was also determined to be representative for the number of new IFSPs during any similar period of the year. This is also the same time period used for this Indicator in the past three APRs.

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

WV Birth to Three includes talking points in all core training modules to emphasize the importance of timely delivery of service. The Service Coordination Outcome page of the IFSP includes a list of service coordination activities which the service coordinator reviews with the family at each IFSP meeting/review. One of those listed activities is: "Coordinate and monitor (helping the family to evaluate) the timely delivery of service." Timely service was included in the Tips of the Week posted on the website. In addition WV Birth to Three reimburses for services on a fee-for-service, face-to-face service delivery basis, which reinforces the timely delivery of service.

Most of the state qualifies as rural and sparsely populated, contributing to the challenge of assuring that families are able to receive each service in a timely fashion. Personnel shortages are also an issue. When sufficient numbers of personnel are not available in the rural areas, practitioners are driving longer distances and attempting to work families into already busy schedules. Shortage of these specialty disciplines is a statewide issue, experienced also by other early childhood, health, and disability groups.

WV Birth to Three has been able in some areas to recruit retiring county school personnel, including specialty disciplines, who are interested in continuing their connections with children and families by enrolling to provide early intervention services. The WV Birth to Three System structure allows for them to enroll and provide services on a part-time basis. Their availability, especially in the most rural areas of West Virginia, helps to address potential personnel shortages.

The WVBTT State Office will continue to randomly select practitioners, along with children from their respective caseloads who have newly authorized services, for self-assessment of timely service delivery. Each practitioner responds with documentation to support whether or not the newly authorized services were implemented in a timely fashion. If services are not provided timely, findings are issued and further documentation gathered to assure correction. This process will continue in order to emphasize the importance of providing services in a timely fashion. These self-assessments are not reported with the results for the measurement for Indicator 1 because the process looks at individual children on caseloads, not all services for the particular child.

Training will continue to emphasize the importance of having Interim Service Coordinators (ISCs) and Ongoing Service Coordinators (OSCs) facilitate a conversation during each IFSP meeting/review about the requirement to provide timely services. The ISC or OSC will document the conversation on the Teaming Activity note. This conversation and documentation will help assure that service providers and families are aware and understand the importance of the requirement to provide timely service. In addition, WV Birth to Three has revised procedures to require that if a family selects a practitioner to provide the IFSP service who is not present at the meeting, the ISC or OSC is to confirm the practitioner's availability within two working days, and document such in the child's record. If unable to confirm availability within 48 hours, the ISC or

OSC will work with the family to make another selection of service provider.

In order to have sufficient numbers of professionals to assure timely service, WV Birth to Three will continue recruitment strategies, especially for disciplines with identified shortages. Recruiting strategies include: exhibiting and recruiting at job fairs of several universities across the state; purchasing of ads in professional organization newsletters; contacting hospitals, home health agencies, and private therapy clinics; attending conferences and other venues; and informing currently enrolled practitioners and payee agencies of areas of shortages.

To remind enrolled practitioners of the importance of providing services in a timely manner, WVBTT will continue to send statewide email notifications, post Tips of the Week on the website, and provide face-to-face technical assistance.

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
5	5	0	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

Five findings related to timely service were identified during the FFY 2012 period. The CQI Coordinator issued findings to five professionals and subsequently verified that each finding was corrected based on review of documentation and that services were provided in accordance with requirements for all children in a subsequent period of time. The CQI Coordinator was able to cross reference submitted documentations with claims information and record review to verify correction prior to closing findings.

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

The CQI Coordinator issued findings to five professionals and subsequently verified that each finding was corrected based on review of documentation and that services were provided in accordance with requirements for all children in a subsequent period of time. The CQI Coordinator was able to cross reference submitted documentations with claims information and record review to verify correction prior to closing findings.

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

The State reported that it used data from a State database to report on this indicator. The State further

reported that it did not use data for the full reporting period (July 1, 2013-June 30, 2014), and the State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

Because the State reported less than 100% compliance for FFY 2013, the State must report on the status of correction of noncompliance identified in FFY 2013 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2014 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2013 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2014 APR, the State must describe the specific actions that were taken to verify the correction.

Required Actions

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 ≥		99.39%	99.40%	99.41%	99.43%	99.50%	99.50%	99.50%
Data	99.58%	99.90%	99.99%	100%	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 ≥	99.39%	99.39%	99.39%	99.39%	99.39%	99.39%

Targets: Description of Stakeholder Input

The West Virginia Early Intervention Interagency Coordinating Council (WVEIICC) served as the primary stakeholder group for development of the FFY2013 Annual Performance Report. The WVEIICC is established under WV Code Chapter 16-5K. The Council meets every other month, with membership that meets IDEA requirements, including parents, service providers, and representatives of various state agencies. West Virginia has broad stakeholder representation within the council including the following:

- Parents
- Early Intervention Service Providers – Service Coordinators and Direct Service Providers
- Representatives of Regional Administrative Units – System Point of Entry
- Head Start Collaboration Office and Local Head Start
- Preschool 619 Coordinator and Local Education Agency Preschool Teacher
- State Agencies including Title V, Medicaid, Child Welfare, Child Care, and WV CHIP
- Advocacy Agencies including Developmental Disabilities Council (DDC), WV Advocates (WVA), WV Parent Training and Information (WVPTI)
- Family Resource Networks (FRN)
- Parent Educator Resource Centers (PERC)

The lead agency provides updates to the WVEIICC at each meeting and seeks ongoing input throughout the year as improvement strategies are identified and implemented. Improvement activities are coordinated throughout the year with other interagency and intra-agency partners including the Newborn Hearing Screening Advisory Council, the Early Childhood Advisory Council, the Special Education Advisory Council, the WV Home Visitation Stakeholder Group, Community of Practice for Children who are Deaf or Hard of Hearing; and multiple discipline specific Communities of Practice within the WVBTT system. The lead agency staff also shared information with, and obtained feedback from the eight Regional Administrative Units (RAUs) throughout the year.

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	2,924	
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	2,925	

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
2,924	2,925	100%	99.39%	99.97%

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Not applicable

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

Required Actions

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)

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A1	2012	Target ≥					71.00%	66.20%	66.20%	
		Data				71.00%	66.20%	59.20%	54.80%	61.70%
A2	2012	Target ≥					77.50%	75.80%	75.80%	
		Data				77.50%	75.80%	67.70%	64.80%	64.20%
B1	2012	Target ≥					78.70%	75.90%	75.90%	
		Data				78.70%	75.90%	72.20%	62.60%	70.90%
B2	2012	Target ≥					70.00%	65.60%	65.60%	
		Data				70.00%	65.60%	56.40%	49.80%	47.80%
C1	2012	Target ≥					82.30%	80.30%	80.30%	
		Data				82.30%	80.30%	75.00%	70.30%	71.00%
C2	2012	Target ≥					80.20%	76.40%	76.40%	
		Data				80.20%	76.40%	65.80%	63.30%	62.80%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A1 ≥	61.70%	61.80%	61.90%	62.00%	62.10%	62.20%
Target A2 ≥	64.20%	64.30%	64.40%	65.00%	65.00%	65.10%
Target B1 ≥	70.90%	71.00%	71.10%	71.20%	71.30%	72.00%
Target B2 ≥	47.80%	48.00%	48.10%	48.20%	48.50%	49.00%
Target C1 ≥	70.40%	70.60%	70.80%	71.00%	71.20%	72.00%
Target C2 ≥	62.80%	62.90%	63.10%	63.10%	63.20%	63.50%

Targets: Description of Stakeholder Input

The West Virginia Early Intervention Interagency Coordinating Council (WVEIICC) served as the primary stakeholder group for development of the FFY2013 Annual Performance Report. The WVEIICC is established under WV Code Chapter 16-5K. The Council meets every other month, with membership that meets IDEA requirements, including parents, service providers, and representatives of various state agencies. West Virginia has broad stakeholder representation within the council including the following:

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- Head Start Collaboration Office and Local Head Start
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- State Agencies including Title V, Medicaid, Child Welfare, Child Care, and WV CHIP
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- Family Resource Networks (FRN)
- Parent Educator Resource Centers (PERC)

The lead agency provides updates to the WVEIICC at each meeting and seeks ongoing input throughout the year as improvement strategies are identified and implemented. Improvement activities are coordinated throughout the year with other interagency and intra-agency partners including the Newborn Hearing Screening Advisory Council, the Early Childhood Advisory Council, the Special Education Advisory Council, the WV Home Visitation Stakeholder Group, Community of Practice for Children who are Deaf or Hard of Hearing; and multiple discipline specific Communities of Practice within the WVBTT system. The lead agency staff also shared information with, and obtained feedback from the eight Regional Administrative Units (RAUs) throughout the year.

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	1,271
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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)? Yes

Since you answered "Yes," provide the numbers of all eligible children but exclude at-risk infants and toddlers (i.e., include just those infants and toddlers experiencing developmental delay (or "developmentally delayed children") or having a diagnosed physical or mental condition that has a high probability of resulting in developmental delay (or "children with diagnosed conditions"). Complete the FFY 2013 Data (At Risk Infants and Toddlers) page for this indicator.

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

	Number of Children
a. Infants and toddlers who did not improve functioning	3
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	262
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	143
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	318
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	524

	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 $(c+d)/(a+b+c+d)$.	461	726	61.70%	61.70%	63.50%
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 $(d+e)/(a+b+c+d+e)$.	842	1,250	64.20%	64.20%	67.36%

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

	Number of
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	Children
a. Infants and toddlers who did not improve functioning	1
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	281
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	297
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	511
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	160

	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 $(c+d)/(a+b+c+d)$.	808	1,090	70.90%	70.90%	74.13%
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 $(d+e)/(a+b+c+d+e)$.	671	1,250	47.80%	47.80%	53.68%

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children
a. Infants and toddlers who did not improve functioning	0
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	232
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	194
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	546
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	278

	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 $(c+d)/(a+b+c+d)$.	740	972	71.00%	70.40%	76.13%
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 $(d+e)/(a+b+c+d+e)$.	824	1,250	62.80%	62.80%	65.92%

Was sampling used? No

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

☒ Provide additional information about this indicator (optional)

A total of 2,769 children exited the WVBTT system during FFY 2013, as documented in the 618 exit report.

In considering the total number of children for whom WVBTT should have had completed Child Outcome measurements, West Virginia started with the total number of exiters and accounted for children in that

group for whom exit data would not be available.

Eight hundred ninety one (891) of the 2,769 children received less than six months of service (either entering less than 6 months before their third birthday, or otherwise exiting the system before completing six months of service) and therefore could not be counted in the Child Outcomes ratings. In addition, of the 768 children who were in the 'Not Receiving Services' section of the 618 report, 183 were in the group of children who received at least six months of service but for whom families were not available to complete the exit ratings. WVBTB policy and guidance requires team members to participate in the ratings. Family members are included in the rating decisions as they are critical members of the team and bring unique information regarding the child's functional participation across multiple settings.

There were a total of 1,695 children $[2,769 - (891) - (183)]$ during the FFY 2013 period for whom WVBTB should have had complete entry and exit Child Outcomes rating data. WVBTB had complete data for 1,271 total children (1271 all children, 1250 excluding at-risk only).

Following is a descriptive of the process for gathering and reporting child outcome measurement data. WV Birth to Three utilized the ECO Child Outcomes Summary Form (COSF) for gathering and reporting child outcome data for the period. In accordance with the instructions and guidance provided by ECO, 'functioning comparable to same age peers' is defined as a child whose functional behavior was rated as a 6 or 7 on the scale.

The outcome measurement system gathers entry data for all children at entry into the WV Birth to Three System. This is typically done by the IFSP team and parents at the initial IFSP meeting. WV Birth to Three procedures require the process to be facilitated by a Developmental Specialist who has completed the COSF training. Exit data is gathered for children who have an initial measurement, and receive services for a minimum of six months. The exit rating is done at a review near the child's exit from WV Birth to Three, with policy recommendation that the measurement occur within 120 days of the child's exit. In addition to these measurement points required by OSEP, WV Birth to Three integrates the COSF rating into each annual IFSP meeting in order to inform the family and other team members of the child's functional abilities across settings and to assist in designing appropriate IFSP outcomes, supports and services. The COSF is completed at the initial, annual and exit IFSP meetings, with participation of all team members including the parents. Feedback from IFSP teams indicates that involving parents in completion of the COSF has resulted in parents showing increased desire to understand their children's behaviors, and to know how to make a difference in their children's development.

Copies of each child's COSF are sent to the State office, where the forms are received by WV Birth to Three, date stamped at entry, and forwarded to another Division within the Office of Maternal, Child and Family Health for data entry. The WV Birth to Three Epidemiologist/Data Coordinator provides training for the data entry staff. Data from the forms is entered into the analytic database designed by ECO. The ECO database provides an approved format and formulas for analysis of individual child progress, as well as analysis of data for all children in the aggregate, in accordance with the OSEP measurement requirements for the three child outcome indicators. The COSF data is also linked with the WV Birth to Three SPOE database for further analysis.

WVBTB has been successful in identifying infants under the age of one who are in need of services. Analysis of the Indicator 3 data indicates that when infants are rated at age 3 months or younger, children with some established conditions are rated near their same age peers unless they are experiencing another health related diagnosis. Even with established conditions that will result in delay in the future, the impact of those conditions may not be readily evident at this very young age. These children also tend to be the children who continue to receive services for a longer period of time. Using the ECO calculator, the difference between their entry and exit ratings may not reflect that they 'substantially increased' their rate of growth due to a combination of the age at which they entered the system and the level of immediate impact their condition had at that early age. ECO has provided some guidance to states suggesting that entry measurements for children who enter near their birth date could be done a few months later. WV Birth to Three continued procedures to require the COSF measurement during the initial IFSP process both to assure that the measurement was done, and to use the rating conversation as guidance in developing IFSP outcomes.

Using another date/period for the initial rating increases the complexity of tracking to assure that the rating has been completed. WVBTT will continue in-depth analysis of the child outcome measurement process with stakeholders as a component of the State Systems Improvement Plan.

Ongoing improvement activities will continue to focus on: 1) understanding and addressing data quality issues; and 2) providing universal and targeted professional development to promote the use of evidence based practices to promote better outcomes for children and families.

West Virginia will continue to address these priorities through the new State Systems Improvement Planning process, making use of resources available through national technical assistance centers including but not limited to ECTA, IDC, DaSy, and the Regional Resource Centers (RRCs). WVBTT has used materials from these centers to develop and revise professional development and rating strategies. Use of ECO's self-assessment tool, "Scale for Assuring State Implementation of a Child Outcomes Measurement System" reinforces the need to resolve issues around data quality in order to effectively use child outcome data to target program improvement strategies.

The focus on data quality issues includes modernizing and updating the current integrated data system which will assist with real time tracking of entry and exit child outcome measurements. WVBTT started using the current integrated data system in 2004, based on a system originally designed a few years prior. The child record portion of the system, System Point of Entry (SPOE), is a distributed database with entries completed by each of the Regional Administrative Units (RAUs) combined into one Super SPOE for state level access. This system provides a unique ID for each child while receiving services in an RAU region. The unique ID does not remain with a child when exiting or re-entering a region, or transferring across regions. This structure has served critical functions for the WVBTT system, but requires intensive time and labor to sort, match and analyze data at the state level to assure valid, reliable reporting. This is especially so for analysis of Indicator 3 data. Fortunately, the WVDHHR has committed necessary finances to modernize the WVBTT central finance office functions including moving SPOE to a web based platform. This modernization is in process and anticipated to be completed by the fall of 2015. The modernization will allow the assignment of a permanent, unique ID for each child at initial referral to WVBTT. It will also provide easier access to accurate and reliable data at all levels of the system.

COSF measurements are not currently tracked in the SPOE data system, due to the issues described above. COSF ratings are entered into and tracked in a separate database at the state office, and entered into the ECO Child Outcomes calculator. The data in this system must be matched to Super SPOE for any additional analysis. When originally designed, this system was intended to be a short term solution until the WVBTT SPOE system was updated to include necessary improvements including capture of the COSF rating data. However, with the delay of SPOE modernization, the supplemental database is the only method of tracking and preparing COSF data for reporting. The financial investment to add COSF ratings to the new web based data system will significantly improve the state's ability to track and assure that timely ratings are occurring for all children.

Multiple professional development efforts will continue to address teams' understanding of functional behavior and COSF rating methodology.

Actions required in FFY 2012 response table

In the FFY 2013 APR, the State must report progress data and actual target data for FFY 2013, and the required outcome data for at-risk children.

Responses to actions required in FFY 2012 response table

As noted previously, it is not statistically valid for West Virginia to report separately for the small number of children who exited during the period and were eligible only under the At-Risk section of the developmental delay criteria. Therefore West Virginia has selected the option in the measurement table to report on all children in this section, inclusive of those who were eligible under At-Risk only. It is unclear as to why there was a table reference to reporting on At-Risk children separately.

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

Required Actions

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	2013	Target ≥				76.00%	77.00%	77.00%	77.00%	77.50%
		Data	97.16%	76.00%	82.20%	82.40%	86.20%	82.50%	79.10%	81.46%
B	2013	Target ≥				74.00%	74.00%	75.00%	75.00%	75.00%
		Data	96.14%	73.00%	79.70%	79.60%	83.90%	79.30%	76.60%	79.90%
C	2013	Target ≥				86.00%	87.00%	87.00%	87.00%	87.00%
		Data	96.71%	84.00%	88.50%	89.20%	93.50%	90.20%	88.70%	87.73%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A ≥	97.16%	97.16%	97.16%	97.16%	97.16%	97.20%
Target B ≥	96.14%	96.14%	96.14%	96.14%	96.20%	96.20%
Target C ≥	96.71%	96.71%	96.71%	96.71%	96.75%	96.80%

Targets: Description of Stakeholder Input

The West Virginia Early Intervention Interagency Coordinating Council (WVEIICC) served as the primary stakeholder group for development of the FFY2013 Annual Performance Report. The WVEIICC is established under WV Code Chapter 16-5K. The Council meets every other month, with membership that meets IDEA requirements, including parents, service providers, and representatives of various state agencies. West Virginia has broad stakeholder representation within the council including the following:

- Parents
- Early Intervention Service Providers – Service Coordinators and Direct Service Providers
- Representatives of Regional Administrative Units – System Point of Entry
- Head Start Collaboration Office and Local Head Start
- Preschool 619 Coordinator and Local Education Agency Preschool Teacher
- State Agencies including Title V, Medicaid, Child Welfare, Child Care, and WV CHIP
- Advocacy Agencies including Developmental Disabilities Council (DDC), WV Advocates (WVA), WV Parent Training and Information (WVPTI)
- Family Resource Networks (FRN)
- Parent Educator Resource Centers (PERC)

The lead agency provides updates to the WVEIICC at each meeting and seeks ongoing input throughout the

year. The council discussed the measurement procedures that WVBTT has used in past years for Indicator 4. WVBTT has historically used the NCSEAM survey with recommended analysis methodology. This was a very stringent analysis which required that only 'strong' or 'very strong' agreement was counted as a positive. The RASCH analysis methodology also provided a rating for each item on the survey scale, thus providing good input regarding where improvement strategies could be focused. Council discussion lead to the decision that while the item and overall scale rating is useful for program improvement, the more stringent agreement standard has not been as useful. Discussion included consideration of how other early childhood programs in West Virginia report family satisfaction or outcome data - and whether families and the general public would really understand the more stringent requirement when comparing BTT results to those of programs that may use agreement as a positive response.

The council decided that when typical families, general public, or legislatures compare data from various programs they are likely to look at the numbers and not consider if one program's measurements were more stringent than another. For that reason, with recommendation from the ICC, WVBTT will use a measurement practice of 'agree', 'strongly agree' and 'very strongly agree' as a positive response for all future reporting. The program will continue to utilize the item and scale ratings to assist with identifying appropriate improvement strategies

FFY 2013 SPP/APR Data

Number of respondent families participating in Part C	365
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	342
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	352
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	324
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	337
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	323
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	334

	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	81.46%	97.16%	97.16%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	79.90%	96.14%	96.14%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	87.73%	96.71%	96.71%

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

WV Birth to Three uses the National Center on Special Education Accountability and Monitoring (NCSEAM), Impact on Family Scale (IFS), to gather input from families for this Indicator. The NCSEAM survey has undergone rigorous validity and reliability testing. It also provides comparability when consistent measurement and analysis processes are used. WV Birth to Three mailed surveys to the families of all

children who received services for six months or longer, near or soon after each child's exit from the WV Birth to Three System at age three. Surveys were mailed with stamped return envelopes. Returned forms were date stamped and forwarded to another division of the Office of Maternal, Child and Family Health for data entry.

An external contractor conducted a Rasch measurement analysis of the WV Birth to Three family survey results. The distribution of survey respondents by ethnic group was determined to be representative of WV Birth to Three children exiting during the period.

Analysis also confirmed that the response rate of approximately 30% did not negatively impact the validity of the family survey data. WV Birth to Three received 365 valid survey returns for the FFY 2013 period.

Survey responses were analyzed in order to obtain a response for each of the Indicator 4 family outcome measurements. The following chart represents the percentages of families who were in agreement with a measurement of 4.0 or above (families who responded as in agreement, strongly in agreement, or very strongly in agreement with the survey items determined by the NCSEAM stakeholders as the threshold items for each of the Indicator 4 measurements).

The survey responses were representative of the general race/ethnicity frequency across the broader WVBTT population. The survey responses were also compared to child's age at first referral and race/ethnicity, with neither variable showing statistically significant association with the survey measures.

Child's Race/Ethnicity for Survey Responses

		Frequency	Percent	Percent Valid
Valid	White	330	88.5	90.7
	Black or African-American	10	2.7	2.7
	Hispanic or Latino	9	2.4	2.5
	Asian or Pacific Islander	4	1.1	1.1
	American Indian or Alaskan Native	2	0.5	0.5
	Multi-racial	9	2.4	2.5
	Total	364	97.6	100
Missing	System	9	2.4	
Total		373	100	

Was sampling used? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No



Yes, the data accurately represent the demographics of the State



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



Provide additional information about this indicator (optional)

WVBTT distributes both scales of the NCSEAM survey to families including the Impact on Families Scale for responding on Indicator 4 measurements, and the Family Centered Services Scale to provide additional information about families' perception of the services they received.

WVBTT uses these survey results in multiple ways including:

- 1) To report on the three national measurements under Indicator 4
- 2) To better understand if there is significant variance in responses by region or other family characteristics
- 3) Understanding how families perceive their early intervention services and service providers in order to identify areas for improvement
- 4) Using the mean measures of each of the two scales to help focus improvement strategies
- 5) Reporting to the public in a way that allows comparison to other Early Childhood Programs in West

Virginia as well as other state Part C systems

WVBTT requests analysis of survey data in a way that provides detailed information beyond that which is required for federal reporting. Survey results will be used for system improvement work during the year. The NCSEAM analysis provides a mean score for each survey and can be compared to the calibration for each survey item to identify where improvement activities could be focused for the most impact across all items. The ICC and local provider groups will also be provided with varying methods of viewing results for each item on the two scales including how positive responses may vary according to different agreement thresholds. Viewing responses to each item of the scale may help those not as familiar with statistical analysis to think about responses and potential improvement strategies.

With both the positive response threshold used for FFY 2013 reporting and the more stringent threshold that has been used in past years, WVBTT's family survey responses continue to reflect high levels of family agreement with positive outcomes. The measurements are high enough that it is difficult to show statistically significant change from year to year. This is an additional reason for analyzing the survey results in many different ways in order to find areas for continued improvement for families.

WVBTT also uses the NCSEAM Family Centered Services (FCS) Scale, which provides additional information about how families perceive the early intervention services. Results from this scale are used to guide program improvement. Attachments include information about the results of that survey. Interestingly, there is a very high response rate to the item "I was given choices concerning my family's services and supports." This item is known to be highly predictive measure of parents having a measure that qualifies as a 'yes' for accountability purposes.

Actions required in FFY 2012 response table

None

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

OSEP Response

The State revised its baseline and OSEP accepts that revision.

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets



Required Actions

Indicator 5: Child Find (Birth to One)*Monitoring Priority: Effective General Supervision Part C / Child Find***Results indicator: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.**

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

Historical Data*Baseline Data: 2012*

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		1.96%	1.99%		2.01%	2.01%	2.01%	2.01%
Data	2.42%	2.45%	2.44%		1.83%	2.02%	1.79%	1.98%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline**FFY 2013 - FFY 2018 Targets**

FFY	2013	2014	2015	2016	2017	2018
Target ≥	1.98%	1.98%	1.98%	1.99%	1.99%	2.00%

Targets: Description of Stakeholder Input

The West Virginia Early Intervention Interagency Coordinating Council (WVEIICC) served as the primary stakeholder group for development of the FFY2013 Annual Performance Report and for identification of 2013 -2018 targets for Indicator 5. West Virginia's ICC has broad stakeholder representation including the following:

- Parents
- Early Intervention Service Providers – Service Coordinators and Direct Service Providers
- Representatives of Regional Administrative Units – System Point of Entry
- Head Start Collaboration Office and Local Head Start
- Preschool 619 Coordinator and Local Education Agency Preschool Teacher
- State Agencies including Title V, Medicaid, Child Welfare, Child Care, and WV CHIP
- Advocacy Agencies including Developmental Disabilities Council (DDC), WV Advocates (WVA), WV Parent Training and Information (WVPTI)
- Family Resource Networks (FRN)
- Parent Educator Resource Centers (PERC)

Each year since the revision of West Virginia's eligibility criteria in 2009, there has been consideration as to whether it would be appropriate to revise the target for Indicator 5. In preparation for the FFY 2013 APR, the WVBT State Office reviewed historical data with the ICC stakeholder group and with the consensus of the ICC, will use FFY 2012 data as the new baseline data for this indicator. West Virginia's child count for under age one was impacted significantly for a period by the 2009 definition change.

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	480	null

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

Source	Date	Description	Data	Overwrite Data
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	20,317	null

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
480	20,317	1.98%	1.98%	2.36%

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

West Virginia's birth to 1 percentage served, of 2.36%, compares to the national average of 1.11%. Only three states reported a higher percentage served for this indicator.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Not applicable

OSEP Response

The State revised its baseline and OSEP accepts that revision.

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.



Required Actions

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: 2011*

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		3.32%	3.40%	3.45%	3.51%	3.60%	3.60%	3.60%
Data	4.28%	4.41%	4.79%	4.24%	3.87%	3.95%	4.09%	4.42%

Key:  Gray – Data Prior to Baseline  Yellow – Baseline**FFY 2013 - FFY 2018 Targets**

FFY	2013	2014	2015	2016	2017	2018
Target ≥	4.09%	4.09%	4.09%	4.09%	4.09%	4.10%

Targets: Description of Stakeholder Input

The West Virginia Early Intervention Interagency Coordinating Council (WVEIICC) served as the primary stakeholder group for development of the FFY2013 Annual Performance Report and for identification of 2013 -2018 targets for Indicator 6. West Virginia's ICC has broad stakeholder representation including the following:

- Parents
- Early Intervention Service Providers – Service Coordinators and Direct Service Providers
- Representatives of Regional Administrative Units – System Point of Entry
- Head Start Collaboration Office and Local Head Start
- Preschool 619 Coordinator and Local Education Agency Preschool Teacher
- State Agencies including Title V, Medicaid, Child Welfare, Child Care, and WV CHIP
- Advocacy Agencies including Developmental Disabilities Council (DDC), WV Advocates (WVA), WV Parent Training and Information (WVPTI)
- Family Resource Networks (FRN)
- Parent Educator Resource Centers (PERC)

Each year since the revision of West Virginia's eligibility criteria in 2009, there has been consideration as to whether it would be appropriate to revise the target for Indicator 6. After careful review, the Council supported the decision to use the targets as noted above, using the FFY 2011 child count as the baseline, which reflects a significant increase over the previous targets. West Virginia's child count was impacted for a period by the 2009 definition change. However, the state is now experiencing a significant rise in child count again. The Council and Lead Agency recognize the potential difficulty of supporting a statewide system with continued growth and complex child needs as well as limited options for revenue growth.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment	9/24/2014	Number of infants and toddlers birth to 3 with IFSPs	2,925	

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

Source	Date	Description	Data	Overwrite Data
Data Groups				
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	61,405	

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
2,925	61,405	4.42%	4.09%	4.76%

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

West Virginia's percentage served birth to 3, of 4.76% compares to the national average of 2.82%. Only five other states reported a higher percentage served for this indicator.

While national data is not available for comparison, it is important to recognize that a total of five thousand six hundred and seventy seven (5,677) children received IFSP services through WV Birth to Three during the twelve (12) month period. This is equivalent to approximately 9.6 % of the population in this age group for the period.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Not Applicable

OSEP Response

The State revised its baseline and OSEP accepts that revision.
The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

Required Actions

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	93.00%	97.00%	97.00%	97.00%	98.00%	97.00%	97.00%	97.40%

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
565	810	97.40%	100%	99.01%

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)

237

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).

WVBTT used a combination of state database and record review for this Indicator. Data for the Indicator was selected for all children with initial IFSPs during the third quarter of the reporting period. Data was initially calculated from the state database for all initial IFSPs, with additional follow up and documentation review to confirm late reasons. This quarter was representative of other quarters during the full reporting period.

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

The selected third quarter was representative of other quarters during the full reporting period in regards to the number of referrals and IFSPs. Data was calculated from the statewide database for all initial IFSP meetings across all eight regions of the state.



Provide additional information about this indicator (optional)

WV Birth to Three is committed to assuring that all eligible children and families have access to evaluation and initial IFSP meetings within 45 days of referral. State office personnel will continue to make onsite visits to each RAU on a monthly basis, to review current status of activities and offer technical assistance to assist the RAUs to identify any potential reasons for delays in getting initial IFSP meetings held within 45 days. All RAUs are required to submit quarterly reports that identify the strategies they are using to assure timelines, and strategies that are being added in order to assure that all children have initial IFSP meetings within 45 days.

Statewide emails and other direct technical assistance will be continued, targeted to practitioners who complete evaluations/assessments in order to emphasize the importance of assuring that children and families have their initial IFSP meeting within 45 days of referral. WV Birth to Three is committed to assuring, to the maximum extent possible, that expertise needed to address child/family concerns is included in the initial evaluation/assessment process, recognizing that this may affect timelines. The WVBTT State Office will continue to conduct targeted recruiting efforts to assist RAUs in assuring timely initial evaluation and IFSP meetings as they deal with challenges related to increasing numbers of referrals and challenges of rural sparsely populated areas.

Actions required in FFY 2012 response table

None

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

Not Applicable

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
1	1	0	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

A finding of non-compliance was previously issued for one RAU during FFY 2011 (based on review of FFY 2010 data). This same RAU had not fully corrected the non-compliance during FFY 2011, so another finding was issued to the same RAU. The WVBTT state office was able to confirm that the RAU corrected this non-compliance consistent with the requirements of OSEP Memo 09-02, and achieved 100% compliance during FFY 2013. The WVBTT State Office used the statewide database to document correction and compliance.

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

The WVBTT State Office was able to confirm correction of non-compliance consistent with OSEP Memo 09-02, including that every child who did not receive a timely initial IFSP meeting, did receive their initial

meetings through review of data in the statewide data system.

Explanation of Alternate Data

The state did not issue findings of noncompliance in FFY 2010. Findings of noncompliance were issued in FFY 2011 based on FFY 2010 data. This is a correction to the data as listed in the OSEP Response Table.

FFY 2011 Findings of Noncompliance Verified as Corrected

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

The one RAU that received a finding of non-compliance during the FFY 2011 was the same RAU that had non-compliance during the FFY 2012 period. Therefore the response is the same as above.

The WVBTT state office was able to confirm, through the statewide data system, that the Regional Administrative Unit (RAU) with previous findings of non-compliance in FFY 2011 and FFY 2012 had achieved 100% compliance with meeting the 45 day timeline during the FFY 2013 period, consistent with OSEP Memo 09-02.

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

The one RAU that had non-compliance during the FFY 2011 period was the same RAU that had non-compliance during the FFY 2010 period (finding was issued in FFY 2011). Therefore the response is the same. The previous non-compliance under this Indicator was based on one RAU not meeting the 45 day timeline for children during the FFY2011 and FFY 2012 periods. The WVBTT State Office confirmed that the children in question did receive their initial IFSP meetings and further verified correction by assuring that all children during the future period received their initial IFSP meeting within the 45 day timeline requirements.

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2013-June 30, 2014), and the State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

Because the State reported less than 100% compliance for FFY 2013, the State must report on the status of correction of noncompliance identified in FFY 2013 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2014 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2013 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2014 APR, the State must describe the specific actions that were taken to verify the correction.

Required Actions

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	95.00%	97.00%	99.00%	100%	100%	99.00%	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

Explanation of Alternate Data

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

-  Yes
-  No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
95	95	100%	100%	100%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of children exiting Part C who have an IFSP with transition steps and services)	0
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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 was reviewed for all eight regions/programs for the month of May, 2014. Based on the lead agency's analysis of child exits across all eight regions, 100% of children who exited during the representative time frame reviewed had 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. Data was gathered through a combination of using the supplemental data base and record review for each of the 95 children who exited at age three during the month of May, 2014.

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

All children who transitioned at age three during the month of May, 2014 were included in the data analysis. The time period was consistent with the period selected for analysis in the previous FFY 2012 period. The number of three year olds transitioning in the period selected for FFY 2013 was higher than the number selected for the same period for the FFY 2013 APR. The number of children was also representative of other months of the FFY 2013 period.



Provide additional information about this indicator (optional)

The lead agency continues to provide WV Birth to Three service coordinators and local early childhood transition teams with training and technical assistance related to the transition requirements. A Transition training is required for service coordinators and open to other interested individuals. The training was revised and includes examples to walk participants through resources and activities.

Enrollment requirements for service coordinators include completion of transition training prior to enrollment. Transition items are included in the service coordinator competency test which service coordinators must pass prior to enrollment.

Regional TA Specialists attend 'Orientation to WV BTT' sessions in order to meet potential service coordinators and direct service practitioners prior to enrollment. TA Specialists then follow up through phone calls and cards to make a personal connection with newly enrolled service coordinators and providers. This personal touch results in more service coordinators reaching out to ask questions and seek assistance from TA Specialists.

WV Birth to Three coordinates with the WV Department of Education and other early childhood partners and routinely provides clarifications to support smooth transitions at the local level. Regional Administrative Units (RAUs) update transition procedures annually and the procedures are posted on the WV Birth to Three website to assist service coordinators. WV Birth to Three will continue to work collaboratively with early childhood partners to identify any potential systemic issues around transition and to assure that supports and activities of the Part C system are promoting positive transition outcomes for children and families.

Actions required in FFY 2012 response table

None

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

Not Applicable

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	null	null	0

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

The State reported that it used data from a State database to report on this indicator. The State further reported that it did not use data for the full reporting period (July 1, 2013-June 30, 2014), and the State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

Required Actions

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	100%	100%	100%	100%	100%	100%	100%	98.00%

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

Explanation of Alternate 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
798	815	98.00%	100%	97.91%

Number of parents who opted out (this number will be subtracted from the number of toddlers with disabilities exiting Part C who were potentially eligible for Part B when calculating the FFY 2013 Data)

0

Describe the method used to collect these data

For the FFY 2013 period, there were 815 children who exited as potentially eligible for Part B. Notification was sent to the LEA and SEA for 798, or 98% of the children at least 90 days prior to their third birthday. Notification for 17 children was sent to the SEA and LEA less than 90 days before their third birthday. The 17 late notifications occurred for children who became eligible for WVBTT between 120 and 90 days before their third birthday, which adds to the difficulty of making a timely notification. While most notifications are sent from the WVBTT state office, there is not sufficient time to transmit data from the local to state level and allow for timely notification when children enter WVBTT close to the 90 day timeline. Therefore, an online system was developed in collaboration with the WV Department of Education, to allow the Regional Administrative Units to send the notifications for each child whose initial IFSP is close to the 90 day timeline. When Interim Service Coordinators enter the notice into the WV Department of Education website application, the notification is sent simultaneously to the SEA and the respective LEA. This online system is used to track timely notifications during this timeframe of 120 -90 days prior to the child's third birthday. Late reasons included a few notifications that were missed due to difficulty in making an internet connection following the homebased IFSP meeting. Other delays occurred when Interim Service Coordinators invited Part B LEA representatives to the initial Part C IFSP meeting in order to meet the 90 day transition conference timeline but did not enter the notification to the SEA, through the WV Department of Education website, in a timely fashion.

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**

Although not in full compliance in FFY 2012, West Virginia did not issue findings of noncompliance because the State was able to verify that correction consistent with OSEP Memo 09-02 occurred prior to issuing any 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
0	null	null	0

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

Because the State reported less than 100% compliance for FFY 2013, the State must report on the status of correction of noncompliance identified in FFY 2013 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2014 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2013 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the

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

EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2014 APR, the State must describe the specific actions that were taken to verify the correction.

Required Actions

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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	97.00%	98.00%	99.00%	95.07%	96.10%	98.30%	98.96%	98.00%

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
709	815	98.00%	100%	99.26%

Number of toddlers for whom the parent did not provide approval for the transition conference (this number will be subtracted from the number of toddlers with disabilities exiting Part C who were potentially eligible for Part B when calculating the FFY 2013 Data)	2
Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B)	98

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).

Reported data is for the full reporting year.

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

The reporting process for 8C supports the child and family transition process, and assures access to accurate data necessary to evaluate performance on the measurements of this Indicator. Service coordinators complete and submit the WVBTT Transfer/Transition form to the RAU when the child exits the Birth to Three System. The Transfer/Transition form includes information regarding the transition conference, including the parties invited to the meeting, and those who attended. After entering the transition conference date and exit reasons in the WV Birth to Three integrated database, the RAU forwards the form to the State office, where the forms are available for monitoring review in order to identify potential systemic issues.

The analysis for Indicator 8C included review of the supplemental database to confirm that all potentially eligible children during the reporting period had timely transition conferences. Reasons for late conferences were verified through documentation.

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

The lead agency continues to provide WV Birth to Three service coordinators and local early childhood transition teams with training and technical assistance related to the transition requirements. A Transition training is required for service coordinators and open to other interested individuals. The training was revised and includes examples to walk participants through resources and activities.

Enrollment requirements for service coordinators include completion of transition training prior to enrollment. Transition items are included in the service coordinator competency test which service coordinators must pass prior to enrollment.

Regional TA Specialists attend 'Orientation to WV BTT' sessions in order to meet potential service coordinators and direct service practitioners prior to enrollment. TA Specialists then follow up through phone calls and cards to make a personal connection with newly enrolled service coordinators and providers. This personal touch results in more service coordinators reaching out to ask questions and seek assistance from TA Specialists.

WV Birth to Three coordinates with the WV Department of Education and other early childhood partners and routinely provides clarifications to support smooth transitions at the local level. Regional Administrative Units (RAUs) update transition procedures annually and the procedures are posted on the WV Birth to Three website to assist service coordinators. WV Birth to Three will continue to work collaboratively with early childhood partners to identify any potential systemic issues around transition and to assure that supports and activities of the Part C system are promoting positive transition outcomes for children and families.

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
11	11	null	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

The WVBTT CQI Coordinator issued findings to 11 different service coordinators for late transition conferences. Correction was confirmed through review of completed documentation. Each service coordinator was required to submit documentation that demonstrated timely transition conferences for a selected group of children for a designated time period. The non-compliance was closed only after verification that timely transition requirements were being met for all children.

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

For each case of non-compliance, the CQI Coordinator confirmed that families had an opportunity for a transition conference. In addition, each service coordinator was required to submit documentation that demonstrated timely transition conferences for a selected group of children for a designated time period.

OSEP Response

The State provided targets for FFYs 2013 through 2018 for this indicator, and OSEP accepts those targets.

Because the State reported less than 100% compliance for FFY 2013, the State must report on the status of correction of noncompliance identified in FFY 2013 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2014 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2013 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2014 APR, the State must describe the specific actions that were taken to verify the correction.

Required Actions

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	null	null
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	null	null

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
null	null			

Actions required in FFY 2012 response table

Responses to actions required in FFY 2012 response table

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OSEP Response

This indicator is not applicable for the State.

Required Actions



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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	n	null
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	n	null
EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/5/2014	2.1 Mediations held	n	null

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

Responses to actions required in FFY 2012 response table

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OSEP Response

The State reported that no mediations were conducted during the reporting period. The State is not required to provide targets until any year in which ten or more mediations are held.

Required Actions

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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	

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target					

Description of Measure

Targets: Description of Stakeholder Input

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.

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.

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

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

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

Description

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.

Theory of Action

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

Submitted Theory of Action: No Theory of Action Submitted



Provide a description of the provided graphic illustration (optional)

OSEP Response

Required Actions

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: Designated by the Lead Agency Director to certify

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: Pamela Roush

Title: Director, WV Birth to Three

Email: pam.s.roush@wv.gov

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