

Birth to 3 Program Compliance and Results Performance Expectations and Action Items: Data Quality and Completeness

The purpose of this document is to communicate state (Wisconsin Department of Health Services, DHS) and federal (Office of Special Education Programs, OSEP) performance expectations and provide action items, practices, and strategies from which county programs can choose to address the factors and improve practices impacting compliance and results measures calculated in the annual county determination process.

Important: According to Individuals with Disabilities Education Act (IDEA) Part C Federal Regulations [34 CFR 303.700\(a\)\(3\)](#), DHS must implement enforcement actions based on each early intervention services (EIS) programs' status category. Consistent with the state annual determination enforcement actions, county Birth to 3 Programs in determination status categories "Needs Assistance" for two or more years, "Needs Intervention," and "Needs Substantial Intervention" **MUST** choose a minimum of one action item for continued improvement and compliance.

Strategies and action items selected are **expected to begin in the next three to six months and be implemented within six to 12 months**. A process to periodically measure progress and effectiveness of practice changes must be included. Failure to implement action items in the required timeframe will result in targeted outreach from the Part C Coordinator to county administration/leadership and additional remedial actions.

Determinations Results and Compliance Matrix: [Table 2](#)
 Results Component: [Data Quality and Completeness](#)
 Performance Expectation: [65% Useable Data](#)

Data Components	Practice Expectations
Children In the Program Less Than Six Months	<p>Child Find activities, including activities to build relationship with referral partner and address late referrals. See</p> <ul style="list-style-type: none"> • Wisconsin Birth to 3 Program Child Find Checklist • Part C Child Find Self-Assessment Best Practices List <p>Develop written policies to require use of and provide resources for effective family engagement practices. These policies should include the expectation to use family engagement practices that are individualized by family.</p> <p>Develop written policies for the continued communication attempts to families with whom the program has lost contact. This includes use of individualized approaches for missed visits including multiple and different communication methods and efforts with families. (Operations Guide 8.1.4 Coordinating Services)</p> <p>Regular review of exit reasons to determine why families are in the programs less than six months to identify opportunities for improvement.</p> <p>Develop written policies around discharging a child prior to age 3. These policies should include procedures taken prior to discharging due to:</p> <ul style="list-style-type: none"> • Loss of contact

Data Components	Practice Expectations
	<ul style="list-style-type: none"> • Individualized family service plan (IFSP) goals being met • Parent choosing to disenroll
Unfixable Errors (8s and blanks) in the Program Participation System (PPS)	<p>Rating of all children at entry and exit with a rating of 1 through 7 regardless of age, duration in program and exit reason. (Discontinue use of 8s)</p> <p>Regular review of child outcomes data to identified blank, errors and impossible combinations.</p>

Data Quality and Completeness

Data and Information Analysis

- Pull **Referral Report** to determine:
 - Age at initial contact date (determine children referred after 2 years 6 months)
 - Referral source
 - Close date and close reason
 - Exit reasons for all families who were enrolled less than six months
- Review and compare results in **Program Review Protocol**.
- Review and compare Indicator 4 – **Family Experience Survey** and county satisfaction survey results.
- Analyze other sources of data the county program uses.

Action Items: (based on identified factors) - Choose minimum of 1 for each factor identified.

A. Referrals after 2 years 6 months.

Child Find

1. Team members will read [the Birth to 3 Operations Guide](#), Chapter 3, and become familiar with public awareness and comprehensive child find requirements.
2. Program will access and distribute [Birth to 3 Program: First 1,000 Days Wisconsin Child Find Campaign](#) materials for families and professionals to community and referral partners minimum of annually.
3. Complete one or more child find activities from the Comprehensive Child Find Checklist.
4. Develop outreach and materials for doctors and referral sources encouraging early referrals.
5. Conduct child find activities at birth centers, NICUs, hospitals and clinics.
6. Conduct child find activities in the community settings where families of young children are.
7. Hold an in-person or virtual event for and with referrals sources.
8. Use of social media to broaden reach of families and referral sources.
9. As a team complete the [Part C Child Find Funnel Chart Tool](#) to:
 - Identify the percentage of children referred who proceed through the program from referral to exit;
 - Identify specific steps where unexpected numbers of children/families do not proceed to the next step in the process; and
 - Provide data that may help identify strategies to improve the degree to which infants and toddlers who need services receive them; and implement practice changes based on results.

B. Families who chose to discontinue services.

Family Engagement

1. Assess practices for engaging families during home visits to determine the need to make practices changes.
2. Assess practices for meeting the individualized needs of families being served (cultural, etc.).

3. Implement procedures for Service Coordination services that include regular follow up with families to support understanding of the program, how they can participate and to inquire about level of satisfaction.
4. Developing materials for families to better prepare them for how sessions will look with their provider.
5. Develop talking points for staff to use to engage and communicate with families to encourage continued enrollment.
6. Make efforts to talk to families who chose to discontinue services to learn why they are no longer interested. And develop process for tracking and reviewing trends.
7. Talk to families about their rights and options to resolve disagreements: negotiation, mediation, and due process hearings.
8. Team will read and complete [modules](#) for [CORE: Guided Conversations with Parent on Raising Young Children with Disabilities](#)

Enrollment/Disenrollment Practices

9. The service coordinator will discuss providing service coordination only when a child has met their IFSP goals and if a family requests to disenroll to monitor development.
10. Develop a process when a family requests to disenroll to support the family in understanding their rights, the role of the program (benefits, etc.) and options for the family going forward, including staying in the program and monitoring their child's development.

C. Unfixable Errors

Practices and Operations

1. Discontinue to use of 8s/NA.
2. Rate all children at entry and exit regardless of length in the program.
3. Assess and develop a standardized data entry practices and process for reviewing data.

D. Tracking and Monitoring

1. Develop and document process for review of the Indicator 3 report to find missing ratings and 8s on a regular basis and specific interval.
2. Develop and document process for standardized data entry practices and schedule for reviewing of data.