

Part C, Individuals with Disabilities Education Improvement Act State Performance Plan (SPP) 2005-2012

Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

Wisconsin Department of Health Services Part C, Individuals with Disabilities Education Improvement Act State Performance Plan 2005-2012

Overview of Early Intervention in Wisconsin

Wisconsin's early intervention program for infants and toddlers, the Birth to 3 Program, is based on an over 30-year history of commitment to serving families with young children within the State. Wisconsin began its partnership with federal programs for early intervention with a planning grant in 1986. One of the planning activities was the formation of an Early Childhood Planning Committee, established by the Department of Public Instruction (DPI), to plan early intervention services for very young children with disabilities and their families. The committee included representatives from the Department of Health and Family Services (DHS), school districts, county agencies, public health, child care, and Head Start.

Wisconsin designated the DHS as the lead agency for early intervention in 1988 and developed the Governor appointed Interagency Coordinating Council (ICC) to advise the DHS following the creation of Part H in PL 99-437. The ICC remains the core advisory group to DHS related to the Birth to 3 Program. The ICC has adopted a set of "Guiding Principles" that provide a foundation of values for the Birth to 3 Program.

The Guiding Principles are as follows:

Children's optimal development depends on their being viewed first as children and second as children with a problem or disability. All children have the same basic needs for acceptance, affection, nurturing, and security. The system should encourage the integration of children with disabilities with children who do not have disabilities. The developmental, social, emotional, and physical needs of all children must be considered in the delivery of any service. We must always ask ourselves, are we considering the whole child or just one facet of the child?

Children's greatest resource is their family. Children are best served within the context of family. Young children's needs are closely tied to the needs of their family. Both must be met to adequately serve the child. The nurturing, love, and commitment of a family cannot be replaced by any array of services. The best way to support children and meet their needs is to support and build upon the individual strengths of their family. The Individualized Family Service Plan (IFSP) focuses on how the system can support the "whole" family, its cultural values, strengths, and needs.

Parents are partners in any activity that serves their children. Parents or primary caregivers have a unique understanding of their children's needs. They are the primary teachers of their children. They have the special bond of kinship and commitment that no professional will ever have. They must be given the opportunity and encouragement to be a part of the decision-making process and empowered so that they are a partner in the services developed for their child.

Just as children are best supported within the context of family, the family is supported within the context of the community. Families depend on the positive relationships they make through the formal and informal networks in the community. Community resources should be open and able to respond to all families. Successful

supportive services value the integrity of the family, its unique needs, and cultural heritage, and provide a link to traditional community resources.

Professionals are most effective when they can work as a team member with parents and others. This requires flexibility and openness, joint training experiences, shared views of infant and family development, and commitment to team cooperation. The abilities of a variety of individuals, both paid and volunteer, to teach, assist, and develop relationships which help families must be recognized and promoted.

Collaboration is the best way to provide comprehensive services. No single agency is able to provide all services to all children and families. Cooperation and shared responsibility are necessary components of a service system that is able to meet the varied needs of children and families. Just as agencies must establish partnerships at the local level, the state must assume a role as a partner with local communities to enhance our mutual ability to serve young children with disabling conditions and their families.

Early intervention enhances the development of children. Early intervention is appropriate for children and families. It is often cost efficient and effective for society and the taxpayer. The goals of early intervention are to enhance the capacity of families to meet the special needs of their child, maximize the potential for independent living, and reduce costs to our society.

The State established administrative rules for the Birth to 3 Program (DHS Ch. 90, Wis. Adm. Code) effective October 1, 1991. Wisconsin operates its early intervention system, along with most other social and human service programs, through a county-based delivery system. DHS ch. 90 rules require that each Wisconsin County implement the Birth to 3 Program according to all federal and state criteria. These rules, which are updated and revised as necessary, are comprehensive and provide the requirements for operation of the Birth to 3 Program at the state and county level.

In 2004, a Birth to 3 Program Workgroup was convened at the direction of DHS Secretary Helene Nelson to review the status of the Program on many key programmatic and best practice topics. Secretary Nelson charged the Workgroup with making recommendations on several areas related to early intervention services for infants and toddlers, including:

- federal, state and local funding,
- fiscal and contract management,
- a review of the parental fee system,
- eligibility requirements and the impact of potential changes,
- intervention approaches especially those emphasizing parent involvement,
- a review of natural environments,
- addressing new federal programmatic requirements, and
- state administration and oversight of the program.

The Workgroup included representation from a variety of early intervention partners including county program administrators, ICC members, training providers, and family advocacy representatives.

In addition to direct ICC representation on this group, the full ICC received regular updates from the Birth to 3 Workgroup, discussed recommendations, and provided feedback to the Workgroup. This input has served as a critical resource in setting the future direction for the program.

The Wisconsin Birth to 3 Program makes use of several other ongoing sources of input for program operations. These sources include the information from workgroups that are formed to address specific issues such as the Individual Family Service Plan (IFSP) Workgroup, the Birth to 3 Program Guidelines Workgroup, the Eligibility Workgroup, the Autism Committee, and the Fiscal Workgroup. Regional Meetings, frequent teleconferences, and state-sponsored training are other sources of information about current concerns and best practices at the local program level.

In Wisconsin, while the Part C Birth to 3 Program is administered through the DHS, other key early childhood programs are administered by other state agencies. The Department of Public Instruction (DPI) implements Part B of the Individuals with Disabilities Education Improvement Act (IDEA), the federal child care subsidy is administered through the Department of Workforce Development (DWD), Head Start is administered at the local level, and child care licensing is in a separate division of the DHS. In order to assure collaboration and inclusive practices, an interagency, inter-program workgroup, the Wisconsin Early Childhood Collaborating Partners (WECCP) was formed in 1993. The mission of WECCP is to achieve: "A blended system of high quality, comprehensive early childhood care, and education, for every child and family who wants it." This mission is endorsed by state-level departments, early childhood associations and advocacy groups, and local programs including Head Start, child care, and Birth to 3 Programs.

The DHS provides ongoing training, technical assistance, and monitoring of county agencies to ensure that the Birth to 3 Program is operating statewide according to all required criteria and in concert with its partners. Training and technical assistance for the Birth to 3 Program is a collaborative effort between the DHS and two DHS contracted providers: The Wisconsin Birth to 3 Personnel Development Project (WPDP) and the Regional Enhancement Support (RESource) Technical Assistance and Monitoring Project.

Training and technical assistance activities begin with the recruitment and preparation of students within higher education programs. Wisconsin has a long history of working with higher education faculty to improve the capacity of personnel preparation programs to prepare their graduates for employment in Birth to 3 Programs. More recently, this ongoing work of the WPDP has been augmented through partnerships with Wisconsin's State Improvement Grant for Special Education early childhood (birth to 6) higher education initiatives. Additionally, an ICC subcommittee on personnel development has provided ongoing input.

Training for local program administrators and direct service staff is also a continuous, critical component of the technical assistance and training continuum. Wisconsin has developed a high quality systematic approach to ongoing professional development and technical assistance. The system is driven by current evidence-based research, documented best practices, OSEP requirements, and needs documented by Wisconsin's Birth to 3 workforce. Needs information related to professional development is gathered from a variety of sources including, but not limited to: regional forums, evaluation surveys, program review monitoring interviews and focus questions, ICC workgroup discussions, and Program in Partnership Plans (PIPPs) developed by RESource staff with each county. Training priorities are identified through the above process to meet the needs of local administrators and providers and ensure their competence in carrying out all components of Wisconsin's Birth to 3 Program.

A new regional training model has been implemented to maximize distance education formats and to reach early intervention staff throughout the state, including those in inner-city Milwaukee, remote rural areas, and Indian Reservations. In this model, new information, or topical information for which a consistent message or specialist's knowledge is needed, is broadcast through regional video conference sites throughout the state. Integrated into the presentations are off-line regional discussions designed to promote conversations among

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participants and to provide an opportunity to explore strategies on integrating information into current practice.

The implementation of all training and technical assistance activities is supported through the ongoing program review and technical assistance provided by regional RESource staff to local County Birth to 3 Programs. The RESource project has the additional responsibility of working in partnership with the DHS Birth to 3 Program staff to monitor and provide specific technical assistance to counties with identified program deficiencies. A full description of the Birth to 3 Program Review process is found in the Monitoring Priority relating to General Supervision of the Part C Program (Indicator 9). The goal of the Program Review process is to continuously improve the early intervention system so that children and families can achieve the best possible outcomes.

Diverse stakeholders in Wisconsin's early intervention system have provided input relating to outcomes for children and families, including the State Performance Plan. In 2002, the ICC adopted a set of Birth to 3 Program Outcomes and developed corresponding indicators to measure the progress related to the Outcomes. Data related to each indicator was used to prepare their Annual Report which was the first such report organized by desired program outcomes. The Annual Report included recommendations to the Department. Each year, the DHS provides data to the ICC on the status of these outcomes. The ICC makes recommendations to the Department regarding strategies for improvement to be implemented during the following year. These outcomes align with the indicators developed under the 2004 reauthorization of IDEA. The process of the ICC advising the DHS on salient priorities and recommendations, followed frequently by DHS implementation, demonstrates Wisconsin's ongoing practice of securing and acting on stakeholder input for improvement of the Birth to 3 Program. The following chart shows Birth to 3 Program Outcomes and corresponding indicators used by the ICC.

Birth to 3 Program Outcomes

Outcomes	ICC Selected Indicators
Infants and toddlers with developmental delays are identified and evaluated for early in intervention services.	 Number of referrals for screening or evaluation. Percent of referrals determined to be eligible for services. Referral sources include medical, community agencies, parents, and others. Percent of newborns receiving hearing screening.
Families receive individualized supports and services needed to enhance their child's development.	 Extent to which parents report they are effective partners in the Birth to 3 Program (parents select service delivery options, goals, service providers, etc.). Extent to which parents report they receive supports and information needed to nurture their child. Family's sense of their ability to participate in everyday community activities such as: child care, employment, and family social networks. Families are satisfied with their services.
Eligible children and families receive their early intervention services in natural environments.	 Services are provided most frequently in homes and community settings that include children with a variety of abilities; Families indicate services are provided in environments of their choice. Children are engaged in typical settings and activities.

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Outcomes	ICC Selected Indicators
Families receive early intervention	 Providers have required licensure and/or certification.
services from trained and	 Community partners define interventionists as
qualified providers.	competent.
	 Families define service providers/coordinators as
	competent.
	 Providers participate in on-going training experiences
	related to Birth to 3 Program services.
Transition planning results in	 Special education services and settings after age 3.
supports and services that meet	 Number of agreements between local Birth to 3
the needs of families by each	
	Programs and schools.
child's third birthday.	 Satisfaction of families with transition.
	 Satisfaction of receiving programs with transition.
	 Satisfaction of Birth to 3 Programs with transition.
The State Lead Agency effectively	 Public policies support efficient/non-duplication of
supports and supervises the	services.
implementation of the early	 Funding resources are adequate to match
intervention system.	requirements.
intervention by otern.	•
	 Reporting systems document program outcomes.
	 Public awareness and information systems are
	utilized.
	 Complaints, requests for mediation and hearings are
	responded to in a timely manner.

Additionally, the ICC convened initially in November 2005 to provide specific input into areas of the SPP where stakeholder input, to date, had been insufficient. Since this initial meeting, the ICC continuously provides input through its workgroups and routine meetings that is essential in the development of resources, programming, and collaboration in the Wisconsin Birth to 3 Program. The ICC reviews the SPP indicators, the Birth to 3 Program outcomes, and other areas of ongoing interest to the Council. In November 2005 the ICC agreed to divide the combined areas of interest into six categories: monitoring, child find, settings, services, transition, and personnel. The ICC's diverse membership connects with a variety of workgroups and committees. Members of the ICC recommend as well as review recommendations for all SPP indicators in its existing workgroups. Additional members are added to workgroups, where necessary, to assure adequate representation of various Birth to 3 Program stakeholders.

SPP indicators are incorporated into the ICC Annual Report. In order to meet requirements for reporting to the public, data from the Annual Report was reported by county as well as statewide. The Annual Report is made available via the internet as well as in paper format to provide alternate methods to distribute the information to the public.

In order effectively utilize county advisory committees, the ICC requests specific input from these committees, incorporate the input into Council discussions, and utilize this input to set upcoming goals, recommendations for research, and improvement strategies. As part of this cyclical process, the local advisory committees serve as a primary mode for determining how local data was shared with the public in their respective communities.

Since 2003, DHS has partnered with other stakeholders from early childhood care and education programs to create a framework for an accountability system for Wisconsin's early childhood programs. The Wisconsin Model Early Learning Standards (WMELS) Steering Committee is comprised of members from the DPI, the DWD, the Head Start Collaboration

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Project, Wisconsin Early Childhood Association, Wisconsin Infant Mental Health Initiative, Children's Trust Fund, WPDP, and the Birth to 3 Program. The activities and products of the WMELS Committee are further described under Infant and Toddler Outcomes (Indicator 3).

Ongoing collaboration also exists between the Part C, Birth to 3 Program and Part B, Section 619, Early Childhood Program through the Inter-Department Early Childhood Workgroup, which is comprised of key staff from DHS, DPI, and training and technical assistance providers. The group has cross-membership with the ICC and a parent member. In response to IDEA reauthorization, the workgroup has actively implemented a work plan to address mutual or interrelated program enhancements. Further detail on many of these stakeholder activities is available in sections below. Much of the development of the SPP has occurred through input from above referenced stakeholder groups.

Each SPP indicator below includes an Overview of the Issue /Description of the System or Process to ensure that activities from all stakeholders, as well as the DHS and its contractors, are captured across the Monitoring Priorities. Indicator 1 contains a review of the State Performance Plan development, which is referenced in all subsequent Indicators.

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Monitoring Priorities

Monitoring Priority: Early Intervention Services In Natural Environments

<u>Indicator 1:</u> Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner. (20 USC 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

Overview of Issue/Description of System or Process:

Wisconsin's Birth to 3 Program is authorized under Ch. HFS 90, Wisconsin Administrative Code. HFS 90 includes professional requirements for members of evaluation teams and providers of early intervention services. It also sets standards for types and numbers of professionals required for assessment, IFSP development, and service delivery.

The Wisconsin Department of Health Services (DHS) contracts with the State's 72 counties to implement the Birth to 3 Program. DHS provides program oversight in the forms of technical assistance, training, monitoring and program review and input into program improvement.

The Birth to 3 Program uses a program review process including an On-Site review of each county program over a 4-year cycle. Wisconsin is currently restarting in FFY2010 Stakeholder input after the first cycle of reviews resulted in considerable modification to the process and there is significant interest in developing thoughtful revisions to Performance and Compliance Indicator Targets as well as elements of the General Supervision System. The second cycle of reviews included parent, provider, and community partners' surveys. There is an increased focus on gathering information from interviews with community stakeholders, including parents, providers, and community partners. A compliance component of the review process involves the review of policies and procedures to assure adherence to HFS 90 standards. In addition, it includes random selected record reviews where current and past service records are scrutinized to assure that federal and state policies were followed when providing services to children and families.

A family survey is distributed to all families currently receiving services and all families who have exited the program within the past three months. Between 2002 and 2004, 89 percent of parents responded positively to the statement: "I was satisfied with how long it took for services to start."

During the program review, caseload size is one of the areas discussed with county program managers. The DHS has used the data collected for the OSEP *Number and Type of Personnel Table* correlated with the number of children served by county to determine caseload size. This allows for comparison between counties. Caseload size is often a contributing factor when timeliness of services is an issue.

Input into the indicator of timely receipt of service was solicited from the ICC as described in the preceding overview. The ICC recommended the following definition for timely services: "The

IFSP must identify resources, supports, and services for each outcome established. At least one service, in addition to service coordination, must start within 30 days of the initial IFSP meeting."

Note: In March 2006 the DHS was notified by OSEP that this definition was inconsistent with Part C regulations. With further input from the ICC, the amended definition of timely services is: "The IFSP must identify resources, supports, and services for each outcome established. All services on the IFSP must start within 30 days of the IFSP start date." This includes services on initial IFSPs as wells as services added on subsequent IFSPs.

The Human Services Reporting System (HSRS) is the former DHS statewide mainframe data collection system. (HSRS was replaced with PPS in November 2008) The IFSP date and the projected start date for each service are data elements reported on HSRS. To improve the accuracy of all data reported on HSRS, a statewide teleconference was held in August 2005 as a means to clarify the definition of each of the reporting fields. The interactive session with Birth to 3 coordinators resulted in the clarification of requirements for the use of this reporting system. The result was greater consistency in reporting the required data elements in the future.

The HSRS system enabled DHS to track larger system issues by analyzing patterns and delays in projected services start dates within each county. Individual file review is the only reliable way to determine if services are, in fact, delivered timely, as the file contains the reasons for any variation in start dates of services. For example, families may choose to have services start at staggered times to best serve the individual needs of the child, or the file may show that a service was planned to start on a certain date, but was delayed due to a change in the child or family's availability. File review will occur during the annual county Self-Assessment process and periodic On-Site monitoring visits by State and RESource staff.

Counties used data from their HSRS summary report and other internal processes for completing the annual Self-Assessment process. The Self-Assessment process includes a report to DHS. Data in this report is further clarified with a telephone call or On-Site visit from the RESource staff as well as DHS staff, if warranted. If these actions do not clarify data, then a targeted review was conducted to resolve Findings of Non-Compliance and develop any indicated compliance plans. The RESource staff worked with the county to develop a plan to correct any issues of noncompliance, and technical assistance was provided as described in the plan. RESource will track progress toward correction of noncompliance in their database. A report was provided quarterly to DHS. More detail on the Self-Assessment and monitoring process is provided in response to SPP Indicator 9.

Baseline Data for FFY 2005 (2005-2006):

Baseline Data for FFY 2005		
Children eligible as of June 30, 2006		
	Number of Children with Services	%
Starting 1-30 days after IFSP	326	85.79
Starting 31 days or more after IFSP	54	14.21
Totals	380	100

Due to the adaptation of Wisconsin's definition of timely services, as referenced above, the data for FFY 2005 establishes the Baseline Data for this indicator. An On-Site HSRS Record Review was initiated consisting of 400 records for children eligible as of June 30, 2006. These records were selected through a stratified and random sampling process. The sample was stratified to ensure that it included children from Birth to one year of age, one to two years of age, and two Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

to three years of age. Twenty records were eliminated from the sample, because the children had been determined not eligible for early intervention services. The following results relate to the remaining 380 children within this sample. Each of the files of the 380 children in the record review were evaluated based upon written documentation that each service on a child's IFSP met the definition of timely services. This included both initial and subsequent IFSPs.

Of the 13.76 services that did not meet the timely definition, 54 services were delayed due to programmatic reasons. If a county agency did not have documentation of the exact date of the service beginning, they were included in this reason code. Therefore, in some of these instances, services may have started in a timely manner. This accounts for 37 percent of services that were not timely. Twenty-six services were delayed due to child and family circumstances, accounting for 18 percent of services that were delayed. The remaining services started as planned, but the planned date for initiation was greater than 30 days from the outset. For example, physical therapy was added at the development of the IFSP but the early intervention team, including the family, determined that the service should be initiated in 3 months time. The most common reason for this decision was the family's desire to phase in needed supports and services. This occurred in 67 out of the 147 delayed services or 46 percent of the time.

The FFY2009 data supports the continuing target and indicates ongoing progress toward the target.

FFY	Measurable and Rigorous Target
2009 (2009-2010)	100%
Results	98.73%

Actual Target Data for FFY 2009:

Children with IFSPs	Number of Children with Services	%
1. Received timely services	12327	98.73%
2. System Delays in delivery of services over 30 days	159	1.28%
Total of 1 & 2	12486	100%

Table C1 Data Source: Wisconsin Program Participation System (PPS) data system July 1, 2009-June 30, 2010

Percent of Timely Service Provision

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

Year 1, during the period of 7/06 to 12/06 a random sample of open service plans was selected by DHS for file review in counties. If the file review indicates that services are not starting timely in some counties, a plan with specific strategies for improvement was implemented and monitored by RESource staff. For counties in which the file review documents that services are delivered timely, additional file review will occur in connection with the county's next On-Site monitoring visit.

Year 2, RESource will report quarterly to DHS regarding compliance, improvement plans, and continuing issues. Where warranted, the Department will directly intervene to assure compliance. DHS will analyze Findings of Non-Compliance from the Year 1 random sample, gather input into potential modifications to the definition of timely service from the ICC workgroup, other stakeholders, and the ICC as a whole and determine whether to continue or modify the definition of timely services, justifications for delays, and best practices.

Year 3, Wisconsin will adopt the final definition of timely service, determine whether certain counties or sub-groups are not meeting expectations, solicit stakeholder input into activities to improve timeliness, and provide targeted technical assistance through RESource. RESource is to collect detail on best practices such as recruitment of staff in areas where there may be deficits including rural areas, or staff with experience in service provision for children with low incidence disabilities. Training of service providers related to these indicators was held. In addition, the following improvement strategies are added to this revised SPP:

- Training and Technical Assistance: More targeted technical assistance is provided as State and local systems are examining current practices and strategies for improvement. Two of Wisconsin's biggest counties are receiving additional technical assistance and monitoring, with the Birth to 3 Program Supervisor providing direct oversight and support to each of these counties. County administrative staff has met with the State Birth to 3 Team to examine more precise ways to provide monitoring oversight to the agencies that are contracted by those counties to provide birth to three services. Wisconsin's largest county was linking contracts with provider agencies to performance on the indicators. As a part of this, provider agencies within this county provided monthly data analysis to examine their progress or slippage on this Indicator. The county as a whole will then provide a data analysis on progress or slippage to the DHS. DHS's Technical Assistance and Monitoring partner, RESource, worked with each provider agency within this county to develop a Program in Partnership Plan (PIPP) identifying strategies to correct any non-compliance issues to allow progression towards the required target of 100 percent.
- County Self-Assessment and Ongoing Monitoring: In addition to the actual On-Site review performed in each county on a four year cycle, Wisconsin is improving system administration and monitoring to provide counties more opportunity to self-monitor in addition to their On-Site review by the Wisconsin Birth to 3 Team. This includes the new Self-Assessment process piloted in FFY 2006 (2006-07) and implemented statewide in FFY 2007 (2007-08). Each county completes an annual Self-Assessment, a report to the State for review that serves as an opportunity to discuss potential risk of not meeting the target as well as technical assistance or other measures that can support the programs progress. As part of the Self-Assessment, each county program reviews and reports on their process to ensure timely delivery of services identified on any IFSP. A comprehensive file review of 10 percent of the children in each county identifies which services were not delivered in a timely manner, and documents the specific reason. If the reason identifies a system or staffing issue, further evaluation of the necessary policy

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and system changes is required. When a Self-Assessment indicates ongoing issues with compliance necessitating more state over-sight, an additional focused monitoring visit was scheduled

Years 4 through 8, RESource continued technical assistance, as needed.

A slight increase in year 2 and year 3 due to improved accuracy in reporting, early technical assistance and increased emphasis on this indicator is expected. In years 4 and 5, significant improvements were made based on procedural changes in those agencies with previous compliance issues and from the impact of concentrated training and technical assistance. In addition the state has assigned the state staff regionally; providing for additional support to counties by staff who understand the unique qualities of the region.

A 'Federal Indicator Report' was developed through the data mart ability in Wisconsin's Program Participation System (PPS) to collect data on Indicator 1 in a timely and accurate manner without a lot of manpower to determine the compliance level, noncompliance level and errors that contribute to the compliance. This report was used to determine data for the 2010-2011 APR. In the future, Wisconsin will be updating the data mart ability to provide County Birth to 3 Programs more opportunities to self-monitor their compliance with Indicator 1.

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Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 2.

Monitoring Priority: Early Intervention Services In Natural Environments

<u>Indicator 2:</u> Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings. (Source: Part C APR populated templates – SPP/APR calendar)

Measurement:

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

Overview of Issue/Description of System or Process:

Wisconsin continues to increase the number of children receiving services in the home or programs for typically developing children. These are commonly referred to as natural environments. DHS revised and disseminated a document on natural environments in 2003 stressing the benefits of incorporating intervention services into the child and family's daily routines. DHS training and technical assistance efforts are moving providers beyond the idea of the natural environment as a location and toward involving the parents or child care providers in continuation of the strategies for enhancing the child's development.

Wisconsin's ICC Annual Report is based upon these components: outcomes as identified by the ICC as critical to the quality of services; data supporting the DHS rate of success with the outcomes; and recommendations to the DHS from the ICC on ways to improve outcome results. In 2004, the ICC recognized the importance of community programs and services welcoming young children with delays and their families. The ICC recommended that families should have settings other than the home as options for receiving Birth to 3 Program services. The ICC recommended that local Birth to 3 Programs should increase participation in community capacity-building activities so that community programs and services can accommodate young children with developmental delays.

The Birth to 3 Workgroup also addressed this issue. The Workgroup recommends that DHS continue to try to influence pre-service curricula to address key elements of the Birth to 3 Program such as natural environments, family-directed and activity-based interventions, promoting the parents' primary role in their child's development, and a professional's role as a consultant versus a direct service provider.

Verification that children are receiving services in natural environments, as appropriate, is collected and analyzed through the reporting and monitoring systems. County Birth to 3 Programs are required to report, using HSRS, the primary location of service delivery for all children served. Counties are also able to report up to two other settings where the child receives services. These data are analyzed annually, reported in the Annual Performance Report and federal data reporting, and discussed with the ICC. Corrective action plans, based on a strong technical assistance model utilizing RESource, is implemented in specific counties, as needed.

In addition, the County Birth to 3 Program On-Site review process includes paper parent surveys of all current and recent program participants, telephone interviews of at least six families, and in-person interviews of at least three families. The information collected from these contacts with families is used to verify data as reported by the county on HSRS, to secure input into the family's perspective of how options for service settings were discussed and to determine how decisions for their child were made.

During the review process, reviews of randomly selected records are verified for assurance that procedures were followed by the county to protect family's rights and that the county documented the decision process related to service settings.

Baseline Data for FFY 2004 (2004-2005):

The baseline for this indicator is 95.18 percent, as discussed in detail below.

Discussion of Baseline Data:

The Birth to 3 Program has been collecting data about the location of services on HSRS for several years. In November of 2008 the PPS system became the central data collection point replacing HSRS. The counties are instructed to provide the primary location of services. They may also enter a secondary location. This data has been reported annually as part of the federally required child count data. Based on the OSEP reporting requirements, the data has been based on all children currently receiving services as of December 1 each year. On December 1, 2004, 5,756 children were receiving services. Of that total, 5,521 children were reported as receiving early intervention services primarily in the home or in programs for typically developing children. This comprises 95.92 percent of children receiving services in natural environments, as reported in the APR submitted in May 2005.

Since the reporting period for this indicator in the SPP is July 1, 2004 through June 30, 2005, the baseline is established on the primary service location for all children served during that time period (instead of a point in time count). The total annual count for that period is 11,386. Of that total, 10,837 children were reported as receiving early intervention services primarily in the home or in programs for typically developing children. This demonstrates that 95.18 percent of all children are receiving services in natural environments. It must be noted that Wisconsin collects county data on a calendar year basis and can only assure complete data in February of the subsequent year. Since the annual count described above is 128 less than our annual count for calendar year 2004. Site visit data serves as verification of the accuracy of PPS data compared to the IFSP team's intent and the implementation plan.

Based on analysis of prior years' data and input from the ICC, natural environments are utilized in most of Wisconsin's 72 counties for service delivery to the extent practical, while also respecting individual circumstances. Milwaukee County was the only County Birth to 3 Program that is under 90 percent in providing services in natural environments. The annual count data for Milwaukee County for July 1, 2004 through June 30, 2005 showed 83 percent of children served in natural environments. There has been consistent improvement in the number of children receiving services in natural environments over the last five years. Milwaukee County has implemented unique procedures for justifying why services are not provided in natural environments. While there are justifications in the IFSP for not receiving services in natural environments for all children, there are concerns about whether all factors are considered when alternate settings are justified. The Wisconsin Birth to 3 Program and RESource staff continued their work with Milwaukee County and its providers. Since Milwaukee is the largest urban county in the state its performance has significant impact on the states performance overall.

Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

In FFY 2006, the majority of counties provided services to children in a natural environment more than 95 percent of the time. Wisconsin's 2006 targeted and projected percentage of children receiving services in the natural environment was 96.34 percent. Further analysis of the data revealed that Milwaukee County provided services in a natural environment 81 percent, of the time, demonstrating slippage from 2004/2005. Milwaukee County is the largest county in Wisconsin comprising approximately 20 percent of the Part C enrollment. Again, since Milwaukee County serves our highest population of children in the Birth to Three system, the ICC, Wisconsin's key stakeholder group, analyzed the data and the impact of Milwaukee County on statewide performance on this indicator for the FFY 2006. This analysis resulted in the decision to change the targets to allow the time it will take to impact a systems change of such magnitude. The state worked with Milwaukee to meet annual targets that demonstrate progress toward the natural environment target of 96 percent. The state will support the county in including performance measures in contracts with providers as a means of increasing the number of services provided in natural environment. The DHS implemented changes the rigorous and measurable targets in the chart below.

FFY2009 demonstrate continuous progress on this indicator:

FFY	Measurable and Rigorous Target
2009 (2009-2010)	96.20%
Results	95.80%

FFY	Revised Measurable and Rigorous Target	Original Targets
2005 (2005-2006)		95.68%
2006 (2006-2007)		96.34%
2007 (2007-2008)	96%	96.70%
2008 (2008-2009)	96%	97%
2009 (2009-2010)	96.20%	97.20%
2010 (2010-2011)	96.30%	97.30%
2011 (2011-2012)	96.30%	97.30%
2012 (2012-2013	96.30%	97.30%

Improvement Activities/Timelines/Resources:

Year 1, Wisconsin updated the Natural Environments Policy Bulletin to reflect the IDEA 2004 changes expanded the information on the process counties use to determine outcomes and natural environments for each child. DHS and RESource provided training after the revised bulletin was released. Training emphasized the parent's role in carrying through with strategies designed to promote their child's development and the need to develop and utilize community-based settings. Providing services in natural environments has been an ongoing concern in Milwaukee County and was again a priority raised in the 2005 State Program Review as well as subsequent reviews. The activities identified in their yearly PIPP include revising IFSP guidelines to clarify issues of justification; IFSPs developed by contracted providers continue to be reviewed by the county, and the county developed process for improved agency reporting of program outcomes. Direct training and technical assistance is ongoing provided to those agencies found to be providing services outside of the child's natural environment with improper justification. Milwaukee County's contract bidding process will require that each agency follow an improvement plan designed to ensure services in natural environments.

Year 2 and 3, DHS further analyzed reasons why an individual county's specific data may be outside of the expected range. The ICC workgroup will develop guidance related to justifications for exceptions to providing service in natural environments, as well as guidance and goals for local programs for service delivery in the home and other natural settings within the community. Best practices for increasing natural environment alternatives to the home was shared through training and technical assistance, as needed. In addition, targeted assistance to Milwaukee includes:

- Regular Milwaukee Area Directors' Meetings are held to facilitate understanding and compliance with Natural Environments, as well as scheduled meetings with Service Coordinators and Birth to Three Supervisors. This included an examination to barriers to providing natural environments with an emphasis on agency and community level changes that would support individualized approaches to natural environments.
- 2. IFSP are reviewed by County Birth to 3 staff including all justifications for services out of natural environments and the plan for how services was moved back into the natural environments.
- 3. Training and TA are provided to those Milwaukee agencies, identified during program review, to be providing services outside of the child's natural environments with improper justification.
- 4. A system of ongoing monitoring was developed which includes a template for ongoing reporting from agencies that can be submitted electronically. Data was compiled and utilized for ongoing monitoring of contract agencies.
- 5. IFSP guidelines were revised to reflect the new state IFSP with justification for services out of natural environments.
- 6. County contract management monitors natural environments compliance through ongoing agency reporting 2x year and through annual reporting process.
- Natural environments compliance and philosophy are identified in contract application reviews and language has been added to contracts to ensure agencies are providing services in natural environments.
- 8. Monthly analysis of data and reporting on progress or slippage around this indicator is required.

Year 4, DHS collected data and analyzed the impact of training and technical assistance based on the ICC recommendations. The ICC Birth to 3 Guidelines workgroup reviewed the Findings of Non-Compliance, reevaluated their recommendations, and provides further guidance. Milwaukee County has received targeted assistance on this Indicator. Milwaukee County completes a Self-Assessment and participates in an On-Site visit from state staff yearly. In addition, the targeted and focused improvement activities are conducted in Milwaukee County, as described in the FFY 2006 APR on page 11.

Years 5 and 8, additional technical assistance continued to be made available. Results for Year 7 and 8 are expected to show that over 97 percent of services were provided in natural environments with corresponding positive indicators from family surveys to indicate children are included in community settings. Improvement in the percentage of children served in natural environments was attained primarily in Milwaukee County and counties with provider agencies where the need for improvement is determined.

Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

A 'Federal Indicator Report' was developed through the Data Mart ability in Wisconsin's Program Participation System (PPS) to collect data on Indicator 2 in a timely, accurate and efficient manner to determine the compliance level, noncompliance level and errors that contribute to the compliance. This report was used to determine data for the 2010-2011 APR. In the future, Wisconsin will be updating the data mart ability to provide County Birth to 3 Programs more opportunities to self-monitor their compliance with Indicator 2.

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development:

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

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

- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs

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

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

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

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

Percent = # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and toddlers reported in progress

category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

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

Measurement for Summary Statement 2:

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

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 3.

Overview of the State Performance Plan Development:

Wisconsin will used the OSEP child outcomes indicators for both Part C and Part B, section 619 of IDEA as a resource to enhance State-level collaboration and to ensure a consistent knowledge-base across all programs that serve children from birth to age six years especially in the area of ongoing assessment and data-based decision-making.

Wisconsin's Birth to 3 Program is built upon a process of strong team decision-making, with assessment and IFSPs resulting in a plan of services to achieve outcomes prioritized by the family. This process of utilizing information from multiple sources and environments was used to design family-guided services and to further strengthen the early intervention process by creating systems to support both local and state decision-making based on progress toward OSEP outcomes. It is imperative to integrate and enhance the current process rather than create a new system. DHS is committed to supporting assessments and decision-making strategies for reporting on child outcomes that enhance, rather than detract from, the intervention and planning processes. The goal is three-fold: (1) to prevent an increased burden on local programs (2) to achieve quality services for children and families, and (3) to increase the capacity for data-based decisions. Achieving these goals is challenging since programs that serve young children are administered by a variety of departments and operate under differing sets of federal and state guidelines.

Wisconsin has worked for over ten years to create a coordinated system of services for all young children. One of these efforts included development of the Wisconsin Model Early Learning Standards (WMELS). Although the original standards were designed for the age three to six population, the interagency team that developed the standards included professionals with expertise related to children from birth to three years of age. Currently, the standards have been revised to incorporate the standards for children ages birth to six and are being promoted as the foundation for the WI Birth to 3 Program and Early Childhood Special Education Program collaborative child outcomes accountability system. These standards are also being used by other community partners including Head Start and child care. The WMELS team is committed to:

- 1. Providing training statewide on the current and revised standards:
- 2. Promoting alignment of WMELS with early childhood curriculum and assessment tools; and
- 3. Providing structure for accountability focus areas that are aligned with IDEA and general education.

Description of Child Outcome Reporting System and Processes:

In June 2005 key staff from the Birth to 3 Program and DPI Early Childhood, including two members of the ICC, attended a working meeting sponsored by the North Central Regional Resource Center (NCRRC). This group participated in a planning session facilitated by staff from the National Early Childhood Technical Assistance Center (NECTAC). The result of the meeting was a proposal to develop a cross-department, collaborative approach to designing and implementing a birth to six child outcomes system in Wisconsin.

In August 2005, the group reconvened with upper-level management support from DHS and DPI to further develop a plan that outlined our processes, steps, timeline, partners, and external resources. The result of this meeting was the inception of the IDEA Outcomes Steering Committee. In addition to strong representation from Birth to 3 Program and Early Childhood state staff, the committee also included local providers, ICC members, Birth to 3 Program technical assistance contractors, parents and representatives from Head Start and child care. Also in August 2005, the Wisconsin members of the team attended the OSEP Summer Institute. Members gathered information, networked with colleagues and made further contact with national technical assistance resources.

In October 2005, a day-long information and planning meeting was facilitated by NECTAC for the IDEA Outcomes Steering Committee. The meeting resulted in discussion of the criteria used to choose data sources, an explanation of the new rating tool being developed to support teams in reviewing existing data, determining the status of a child's progress, and a review of possible outcome and assessment tools.

On November 10, 2005, the Wisconsin Early Childhood Collaborating Partners (WECCP) sponsored a videoconference designed to facilitate statewide participation through a number of sites across the state. Participants included Birth to 3 Program staff, early childhood special education, preschool, Head Start, child care, family resource centers, and other early childhood professionals. The goal was to develop guiding principles of assessment and accountability systems including best practices for children, qualifications of staff, support for local efforts, processes for different settings, and community partnerships. Dr. Sam Meisels, an expert in early childhood assessment and accountability, provided a framework for participants by discussing strategies for gathering assessment information. He presented examples of appropriate use of information and issues to avoid. Following this presentation, participants at each site then discussed the principles they wanted to see utilized as part of the accountability framework as it continues to be developed. The following principles were compiled from the top principles submitted from each of the sites:

Top Principles of Assessment

- Parents are the most important, primary caregivers and should be collaboratively involved in their children's education and development. They must be supported and encouraged to be partners in this process.
- Success is measured using a valid evidence-based method incorporating observations of growth and development, considering individual learning styles and differences, and utilizing all the environments (home, culture, community) in which the child lives and learns. Strength-based functional assessment in natural environments utilizing natural supports and everyday relationships are important. Developmental expectations must be culturally, linguistically, and developmentally-appropriate, as well as research-based.

- Assessment is on-going, continuous, and linked to a fixed timeline. Holistic approaches to assessment (all life areas) using multiple sources over time should be used since there is no single way to demonstrate accountability. Assessments will bring about benefits for children, programs, and families. They will not add undue burden to families, providers, or local and state administrators.
- Consistent accountability system measures within local communities that distinguish between program standards and child outcomes are needed.
- Quality of staff knowledge, skills, and efficacy of implementation with emphasis of continual staff development is important.
- Adequate and equitable resources are needed to meet the intent of these Guiding Principles and to enable all children to participate equally in a range of services to meet their unique needs.

The DHS/DPI IDEA Outcome Steering Committee had also been considering the systemic implementation of collection and analysis of child outcome data. With decreasing financial resources and increasing requirements for reporting, the team was motivated to develop a response to the General Supervision Enhancement Grant (GSEG) request for proposal. A proposal for an early childhood project was submitted in October 2005 that resulted in the development of the PPS described in the FFY 2007 APR. The PPS included a component for the Birth to 3 Program to report data on the OSEP Child Outcomes Indicators. The approach builds upon the work of Milwaukee County and the University of Wisconsin-Milwaukee in developing a technology-based system to support tracking program information. Through resources of the GSEG, Wisconsin proposes to expand this system to collect and aggregate outcomes data.

On December 5, 2005, the IDEA Outcomes Steering Committee participated in a day-long meeting facilitated by Mary McLean a national expert on state-wide accountability systems. The meeting included a historical perspective, IDEA requirements for accountability systems, assessment tools and strategies currently utilized in Wisconsin for children ages birth to six years, and recommend pilot strategies and sites for reporting child outcomes.

In February 2006, DPI and DHS partnered to train staff in the selected pilot sites in using the rating scale developed by the Early Childhood Outcomes (ECO) Center. This training prepared participants for utilizing this tool to gather data on families that entered the program in the first quarter of 2006. The initial use of this tool was based on the current information that programs have on children. We learned from this experience ways to enhance the process through utilization of additional assessment tools or processes.

In May 2006, Cooperative Education Service Agency (CESA) 1 sponsored a statewide conference on assessment, outcomes, and accountability. The planning committee included staff from DPI and DHS, as well as practitioners. This conference was designed for programs serving children between birth and six years of age. Participants included program coordinators, providers, teachers, and state staff. The purpose of the conference was to provide an overview of multiple assessment processes and guidelines for choosing and using an assessment tool.

In April 2007, a training of trainers was sponsored in collaboration with DPI and CESA Early Childhood Program Support Teachers to train technical assistance staff to support counties to collect child outcomes on all children entering the Birth to 3 Program beginning July 1st, 2007. A standard curriculum and supporting materials were developed for and disseminated at these meetings. Since this event, these trainers have been providing training to local programs (birth to 3 and LEAs), using and refining the original set of materials.

In July 2007, WI DPI funded a Child Outcomes Coordinator with discretionary grant funds. While this position has primary responsibilities for LEA training and technical assistance, time is also allocated to support the Early Childhood Program Support Teachers as well as RESource staff in developing the Birth to 6 Child Outcomes System. This includes the facilitation of monthly Indicator calls that started in the fall of 2008 to provide ongoing support for Child Outcomes and other Indicators (e.g., transitions).

Throughout 2007 and 2008 the Child Outcomes Workgroup consisting of staff from WDHS (Part C) and WDPI (Part B) and the Child Outcomes coordinator met to develop common expectations and understanding of child outcomes requirements and to assure a "Birth to Six" perspective. Collaboration was demonstrated by the development of an electronic data reporting system (PPS), development and period review of a question/answer document, data analysis, state access of OSEP technical assistance, and training and technical assistance, available at the websites referenced above. Throughout the spring 2008, five regional technical assistance trainings provided by the state Outcomes Coordinator were offered. These trainings were open to both Part B and Part C providers.

Also available throughout the year were "Data Discussion" teleconferences three of which dealt specifically with Child Outcomes. Those discussions were held on February of 2008, "Indicator Walkthrough," November 2008, "On-Going Assessment" and December 2008, "Determining Child Outcomes."

During the summer of 2008 the Wisconsin Birth to 3 Program in collaboration with the Wisconsin Department of Public Instruction began the roll out a new data collection system known as the Program Participation System (PPS), a web based system intended to replace the older non web-based application Human Service Reporting System (HSRS). Several aspects of this new data collection system are significant improvements over HSRS, including anytime accessibility to a County's data for both the State B-3 team and each County service provider. PPS allows counties to enter their own Child Outcome "entry" and "exit" ratings and "sources of information." PPS also increases the State B-3's overall data accuracy by not allowing a child to be exited or closed from a County without proper child outcome information being entered into PPS. Finally, the PPS data system allows each Birth to 3 Program to share, with parent permission, child outcome exit status ratings with their respective LEA.

Wisconsin Birth to 3 and the Wisconsin Department of Public Instruction continue to work collaboratively to enhance the Birth to Six Child Outcomes system through two Outcomes related committees including Birth to 6 Cross Departmental and the Child Outcomes Workgroup, both of which continue to meet on a bi-monthly basis to review existing materials, recommend assessments and determine roles and responsibilities among committee members and across departments. During 2009 the Early Child Outcomes workgroup initiated two projects designed to first, improve the efficiency of the Child Outcomes reporting process by reducing a program's paperwork burden while not jeopardizing the accuracy of the reporting. and second, designed a Self-Assessment process to support and encourage programs to analyze and improve their Child Outcomes practices. The first initiative aimed at reducing the paperwork burden involved integrating the Child Outcomes Summary Form (COSF) into the IFSP. This IFSP allows for a more fluid and seamless process of gathering both Child Outcomes information and developing an IFSP. Previously, programs identified the Child Outcomes process as disconnected from IFSP development and created additional and duplicative paperwork requirements. However, programs still have the option to continue to use the COSF. The Child Outcomes workgroup also revised portions of the COSF to make it more user friendly (Second initiative, developing a Child Outcomes Fidelity Self-Assessment, continues to evolve, change, and improve as Wisconsin receives feedback from Child Outcomes workgroup committee members and TA staff. The Child Outcomes Fidelity

Assessment is voluntary, however there are discussions within the Program Self-Assessment committee on whether to require this process during a program On-Site year.

Baseline Data:

Baseline data for FFY 2008 are presented in the tables below. These data were derived from children exiting Birth to Three between June 30, 2008 and July 1, 2009.

The sources of information used to help obtain accurate Child Outcome ratings for each child included a variety of instruments which are listed below. In addition to any formal assessments other sources of information used to obtain accurate and reliable data including parent interview; observation in a variety of settings and/or environments including community, childcare; review of medical records, information from previous B-3 county records, foster parent input, and professional judgment.

In addition, the following instruments were reported:

Battelle Developmental Inventory Second Edition; Hawaii Early Learning Profile; Brigance Inventory of Early Development II; Greenspan Social-Emotional Scale; Early Learning Accomplishment Profile; Rosetti Infant Toddler Language Scale; Ages and Stages Developmental Screener; Preschool Language Scale 3 & 4; Peabody Developmental Motor Scales; Goldman-Fristoe Test of Articulation; Bayley Scales of Infant Toddler Development; Early Intervention Developmental Profile; Assessment, Evaluation and Programming System (AEPS); Rhode Island Test of Language Structure; Alberta Infant Motor Scale; Emergent Language Test; Receptive Expressive Emergent Language Scale-3; Winn Dunn Sensory Profile; Ages and Stages SE Questionnaire; Birth to Three Assessment and Intervention System-2; Brief Infant Toddler Social Emotional Assessment; Vineland Adaptive Behavioral Scale; The New Portage Guide Birth to Six; Degangi Infant-Toddler Symptom Checklist; Carolina Curriculum; M-Chat; Mullen Scale of Early Learning; Infant Toddler Sensory Profile; TABS Scale: Early Language Milestones: Beckman Oral Motor Evaluation: Developmental Assessment of Young Children; Coulee Children's Center Fine Motor and Feeding Checklists; Ready, Set, Grow; Infant Developmental Screen Scale; Carolina Developmental Profile; CDHH Normal Speech Development Checklist; WPS; Penfield Developmental Scales and Developmental Profile II; Auditory Skills Checklist; Ling 6 Sound Test; Toddler Sensory Motor Checklist; Infant Toddler Developmental Assessment; High Scope Preschool Child Observation Record for Infants and Toddlers; Developmental Pre-Feeding Checklist; Pediatric Early Developmental Inventory; and the WeeFIM.

OSEP Category Totals

Outcome 1	Number	Percentage
a: Children who did not improve functioning	27	1%
b: Children who improved functioning but not sufficient to move nearer		
to functioning comparable to same age peers	394	13%
c: Children who improved functioning to a level nearer to same-aged		
peers but did not reach it	363	12%
d: Children who improved functioning to reach a level comparable to		
same-aged peers	729	24%
e: Children who maintained functioning at a level comparable to same-		
aged peers	1501	50%
total	3014	100%

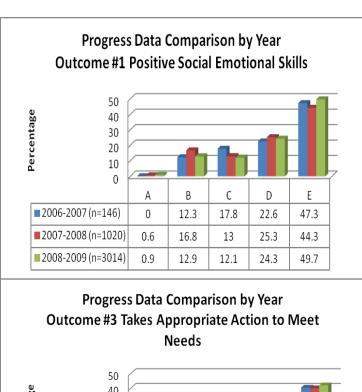
State of Wisconsin

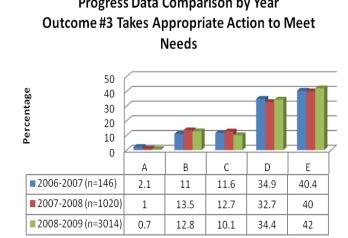
Outcome 2	Number	Percentage
a: Children who did not improve functioning	19	1%
b: Children who improved functioning but not sufficient to move nearer		
to functioning comparable to same age peers	506	17%
c: Children who improved functioning to a level nearer to same-aged		
peers but did not reach it	711	24%
d: Children who improved functioning to reach a level comparable to		
same-aged peers	1170	39%
e: Children who maintained functioning at a level comparable to same-		
aged peers	608	20%
total	3014	100%

Outcome 3	Number	Percentage
a: Children who did not improve functioning	20	1%
b: Children who improved functioning but not sufficient to move nearer		
to functioning comparable to same age peers	390	13%
c: Children who improved functioning to a level nearer to same-aged		
peers but did not reach it	304	10%
d: Children who improved functioning to reach a level comparable to		
same-aged peers	1029	34%
e: Children who maintained functioning at a level comparable to same-		
aged peers	1271	42%
Total	3014	100%

Discussion of Baseline Data:

Progress data for children exiting in FFY 2009 is presented in the tables above. There will not be a full three year cohort of children until July 1, 2010. Although the data represented in this years table appears skewed slightly toward the "e" rating for Outcomes one and three (as shown in the charts below) they are, however, relatively consistent with the previous two years "e" rating; FFY 2006 Outcome one "e" totaled 47 percent compared to FFY 2007 which was 44 percent and for Outcome three both FFY 2006 and FFY 2007 totaled 40 percent for the "e" rating. WDPI reports similar results in their Child Outcomes data. With this in mind, the new data collection system known as the Program Participation System (PPS), which was designed in collaboration with WDPI, will support and encourage the accountability in both the quantity and quality of data collection and aggregation. The result of the PPS data system will improve administration & overall ease of monitoring at both the State and local level.





		Social Emotional Skills		Acquiring and Using Knowledge and Skills		Taking Appropriate Action to Meet Needs	
		Enter # of Children	% of Children	Enter # of Children	% of Children	Enter # of Children	% of Children
a.	Percent of infants and toddlers who did not improve functioning	27	0.9	19	0.6	20	0.7
b.	Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	394	13.1	506	16.8	330	12.9
C.	Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	363	12	711	23.6	304	10.1
d.	Percent of infants and toddlers who improved functioning to reach a level compared to same aged peers	729	21.2	1170	38.8	1029	34.1
e.	Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	1501	49.8	608	20.2	1271	42.2
	TOTAL	3014	100.0%	3014	100.0%	3014	100.0%
	SUMMARY STATEMENTS						
1.	Of those children who entered the program below age expectations in [outcome], the						
	percent that substantially increased their rate of growth in [outcome] by the ti	me they exited.	72.2%		78.2%		76.5%
2.	Percent of children who were functioning within age expectations in [outcome], by the time they exited.						
			74%		59%		76.3%

Another collaborative effort between the two Wisconsin departments, DHS and DPI, PPS will allow, with prior signed consent, entry and exit outcome data to be readily available to the receiving LEA (Part B) program. There is an additional effort being considered within the Childhood Outcomes work group as a way to further improve reliability of exit/entry ratings during transition from Part C to Part B and to encourage additional collaborative efforts between Birth to 3 and LEA's. Currently, the discussion is that as part of the formal transition process LEA's are encouraged to invite Birth to 3 staff to the IEP meeting. All members of the IEP meeting including family, Part B and Part C discuss the child's present level of performance and develop the goals of the IEP. During the IEP discussion the necessary information needed to complete the Child Outcomes Summary was revealed. As part of this process the use of the Early Childhood Outcomes "Decision Tree" (with numbered ratings removed) was utilized. The Information shared during the IEP process can be documented on the Child Outcomes Summary Form, including ratings, immediately following the IEP and formally recorded in the Program Participation System (PPS) data system. To further support and inform programs, both Birth to 3 and LEA's, a Child Outcome's Teleconference was held on September 10, 2009.

Also as part of Wisconsin's continued collaborative efforts, quarterly regional training and professional development for both service providers and administrative staffs are currently in the development stages. Areas of emphasis were the "validity and reliability in the team decision making process of determining child outcomes ratings," "on-going assessment" and continued training on Child Outcomes and the new PPS data collection system. Wisconsin Birth to 3 Program recommended evaluation instruments; Q&A documents and corresponding materials were continually updated and accessible through the Collaborating Partners website.

As implementation of collection of entry outcomes for all children begins on July 1, 2007, it is anticipated the progress data reported in the February 2009 APR included a much larger number of children who have both entry data and received 6 months of services prior to exiting.

Measurable and Rigorous Targets:

Target setting for the two summary statements for each of the three child outcomes was determined during the January 2010 State ICC meeting. Wisconsin State ICC has a broad representation of individuals including parents, providers, Medicaid, State Insurance, Personnel Preparation, Public Health, Department of Public Instruction (Part B), and Mental Health, McKinney-Vento Program, Child Care, Foster Care, Head Start, and other members-at-large. Following a PowerPoint presentation highlighting specific Indicator 3 topics including OSEP requirements and timelines, child progress categories, child outcomes data, summary statements, and target setting the ICC engaged in a thoughtful discussion. A key consideration was setting targets that are representative of the Birth to 3 Program mission to enhance development and improve the development trajectory of Wisconsin's young children with disabilities during the next several years of careful data analysis and continued training around validity and fidelity of processes in place to measure child outcomes.

Summary Statement Targets	Baseline for FFY 2009 (% of children)	Targets for FFY 2010 (% of children)	Targets for FFY 2011	Targets for FFY 2012
Outcome 1 Positive social-emotional skills including social relationships				
S.S.1 Of those children who entered the program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they exited the program.	72.5%	72.5%	72.6%	72.7%
S.S.2 The percent of children who were functioning within age expectations in each Outcome by the time they exited the program.	74.0%	74.0%	74.10%	74.20%

Summary Statement Targets	Baseline for FFY 2009 (% of children)	Targets for FFY 2010 (% of children)	Targets for FFY 2011	Targets for FFY 2012
Outcome 2 : Acquisition and use of knowledge and skills (including early language/communication and early literacy)				
S.S.1 Of those children who entered the program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they exited the program.	78.2%	78.2%	78.3%	78.4%
S.S.2 The percent of children who were functioning within age expectations in each Outcome by the time they exited the program.	58.9%	58.9%	59.0%	59.10%

Summary Statement Targets	Baseline for FFY 2009 (% of children)	Targets for FFY 2010 (% of children)	Targets for FFY 2011	Targets for FFY 2012
Outcome 3: Use of Appropriate behaviors to meet their needs.				
S.S.1 Of hose children who entered the program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they exited the program.	76.7%	76.7%	76.8%	76.9%
S.S. 2 The percent of children who were functioning within age expectations in each Outcome by the time they exited the program.	76.4%	76.4%	76.5%	76.6%

FFY	Measurable and Rigorous Targets and B	aseline Dat	a
2008 (2008-2009)	Summary Statements	FFY 2008 (% of children)	ACTUAL FFY2008 (% of children)
	Outcome A: Positive social-emotional skills (in relationships)	cluding so	cial
	Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program.	72.5%	72.5%
	The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.	74.0%	74.0%
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
	Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.	78.2%	78.2%
	The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	58.9%	58.9%
	Outcome C: Use of appropriate behaviors to m	eet their ne	eds
	Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program.	76.7%	76.7%
	The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	76.4%	76.4%

FFY 2008 (2008-2009)

Progress Categories for Outcome A, B and C Data

	me A: Positive social-emotional skills ding social relationships)	# of children	% of children
a.	infants and toddlers who did not improve functioning.	6	1%
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	171	17%
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	133	13%
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	258	25%
e.	infants and toddlers who maintained functioning at a level comparable to same-aged peers.	452	44%
	TOTALS	1020	100%
skills	me B: Acquisition and use of knowledge and (including early language/communication and iteracy)	# of children	% of children
a.	infants and toddlers who did not improve functioning.	4	.4%
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	182	18%
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	261	26%
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	404	40%
e.	infants and toddlers who maintained functioning at a level comparable to same-aged peers.	169	17%
	TOTALS	1020	100%
their r		# of children	% of children
	infants and toddlers who did not improve functioning.	10	1%
	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	138	14%
	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	130	13%
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged	334	33%

Part C State Performance Plan: 2005-2012 FFY 2013)

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peers.		
 e. infants and toddlers who maintained functioning at a level comparable to same-aged peers. 	408	40%
TOTALS	1020	100%

FFY	Measurable and Rigorous Targets			
2009	Summary Statements	TARGET	ACTUAL	
(2009-2010)		FFY 2009 (% of children)	FFY2009 (% of children)	
	Outcome A: Positive social-emotional skills (i relationships)			
	Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program.	72.5%	63%	
	 The percent of children who were functioning within age expectations in Outcome A by the time they exited the program. 	74.0%	67.60%	
	Outcome B: Acquisition and use of knowledge and skills (including early			
	1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.	78.2%	70.6%	
	The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	58.9%	52.2%	
	Outcome C: Use of appropriate behaviors to n	neet their ne	eds	
	 Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program. 	76.7%	72.5%	
	The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	76.4%	70.3%	

FFY 2009 (2009-2010)

Progress Categories for Outcome A, B and C Data

	me A: Positive social-emotional skills (including relationships)	# of children	% of children
	infants and toddlers who did not improve actioning	27	1%
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	394	13%
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	363	12%
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	729	24%
e.	infants and toddlers who maintained functioning at a level comparable to same-aged peers.	1501	50%
	TOTALS	3014	100%
skills	me B: Acquisition and use of knowledge and (including early language/communication and iteracy)	# of children	% of children
a.	infants and toddlers who did not improve functioning.	19	1%
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	506	17%
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	711	24%
d.	reach a level comparable to same-aged peers.	1170	39%
e.	infants and toddlers who maintained functioning at a level comparable to same-aged peers.	608	20%
	TOTALS	3014	100%
	me C: Use of appropriate behaviors to meet needs	# of children	% of children
a.	infants and toddlers who did not improve functioning.	20	1%
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	390	13%
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	304	10%
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	1029	34%
е.	infants and toddlers who maintained functioning	1271	42%

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TOTALS	3014	100%

As requested in the 2009 Part C Annual Performance Report (APR) under Instructions for Indicators/Measurement the instruments and procedures used to gather Child Outcome data are listed below. Wisconsin uses the Child Outcomes Summary Form (COSF) as part of their rating process and Wisconsin does not serve "at-risk" infants and toddlers and therefore data included in this report include only Part C eligible children. The data referenced in the Summary Statements and Progress Categories a-e were derived with the use of ECO Analytic Calculator.

The list of instruments include: Battelle Developmental Inventory Second Edition; Hawaii Early Learning Profile; Brigance Inventory of Early Development II; Greenspan Social-Emotional Scale; Early Learning Accomplishment Profile; Rosetti Infant Toddler Language Scale; Ages and Stages Developmental Screener; Preschool Language Scale 3 & 4; Peabody Developmental Motor Scales; Goldman-Fristoe Test of Articulation; Bayley Scales of Infant Toddler Development; Early Intervention Developmental Profile; Assessment, Evaluation and Programming System (AEPS); Rhode Island Test of Language Structure; Alberta Infant Motor Scale; Emergent Language Test; Receptive Expressive Emergent Language Scale-3; Winn Dunn Sensory Profile; Ages and Stages SE Questionnaire; Birth to Three Assessment and Intervention System-2; Brief Infant Toddler Social Emotional Assessment; Vineland Adaptive Behavioral Scale; The New Portage Guide Birth to Six; Degangi Infant-Toddler Symptom Checklist; Carolina Curriculum; M-Chat; Mullen Scale of Early Learning; Infant Toddler Sensory Profile; TABS Scale; Early Language Milestones; Beckman Oral Motor Evaluation; Developmental Assessment of Young Children; Coulee Children's Center Fine Motor and Feeding Checklists; Ready, Set, Grow; Infant Developmental Screen Scale; Carolina Developmental Profile: CDHH Normal Speech Development Checklist: WPS: Penfield Developmental Scales and Developmental Profile II; Auditory Skills Checklist; Ling 6 Sound Test; Toddler Sensory Motor Checklist; Infant Toddler Developmental Assessment; High Scope Preschool Child Observation Record for Infants and Toddlers; Developmental Pre-Feeding Checklist; and the Pediatric Early Developmental Inventory.

In addition to any formal assessments other sources of information were used to obtain accurate and reliable data including parent interview; observation in a variety of settings and/or environments including community and childcare; review of medical records, information from previous B-3 county records, foster parent input, and professional judgment. Also during FFY 2009 use of the Early Childhood Outcomes Center "Decision Tree" was encouraged during statewide trainings, and discussed during Birth to 3 Program Reviews and Self-Assessments.

FFY	Targets and Actual Data for Part C Children Exiting in FFY 2010 (2010-2011)						
2010 (2010-2011)	Summary Statements	TARGET FFY 2010 (% of children)	ACTUAL FFY2010 (% of children)				
	Outcome A: Positive social-emotional skills (in relationships)	including so	cial				
	Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program.	72.5%	61.8%				
	The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.	74.0%	66.5%				
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)						
	Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.	78.2%	68.0%				
	The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	58.9%	50.2%				
	Outcome C: Use of appropriate behaviors to r	neet their ne	eds				
	 Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program. 	76.7%	72.7%				
	The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	76.4%	68.0%				

FFY
2010
(2010-2011)

Progress Categories for Outcome A, B and C Data					
	me A: Positive social-emotional skills ding social relationships)	# of children	% of childre n		
a.	infants and toddlers who did not improve functioning.	23	0.5%		
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	945	21.3%		
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	520	11.7%		
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	1046	23.5%		
e.	infants and toddlers who maintained functioning at a level comparable to same-aged peers.	1913	43%		
	TOTALS	4447	100%		
skills	me B: Acquisition and use of knowledge and (including early language/communication and literacy)	# of children	% of childre n		
a.	infants and toddlers who did not improve functioning.	19	0.4%		
b.	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	1160	26.1%		
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	1035	23.3%		
d.	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	1475	33.2%		
e.	infants and toddlers who maintained functioning at a level comparable to same-aged peers.	758	17%		
	TOTALS	4447	100%		
Outco their I	me C: Use of appropriate behaviors to meet needs	# of children	% of childre n		
а	infants and toddlers who did not improve functioning.	24	0.5%		
b	infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same age peers.	774	17.4%		
C.	infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it.	625	14.1%		
d	infants and toddlers who improved functioning to reach a level comparable to same-aged peers.	1501	33.8%		

State of Wisconsin

e. infants and toddlers who maintained functioning at a level comparable to same-aged peers.	1523	34.2%
TOTALS	4447	100%

FFY	Measurable and Rigorous Targets				
2011 (2011-2012)	Summary Statements	TARGET FFY 2011 (% of children)			
	Outcome A: Positive social-emotional skills (including social	ıl relationships)			
	 Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program. 	72.6%			
	The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.				
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)				
	Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.				
	The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	59%			
	Outcome C: Use of appropriate behaviors to meet the	eir needs			
	Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program.	76.8%			
	The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	76.5%			

FFY	Measurable and Rigorous Targets					
2012 (2012-	Summary Statements	TARGET FFY 2012 (% of children)				
2013)	Outcome A: Positive social-emotional skills (including socia	l relationships)				
	Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program.	72.7%				
	The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.	74.2%				
	Outcome B: Acquisition and use of knowledge and skills (in language/communication and early literacy)0					
	Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.	78.4%				
	The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	59.1%				
	Outcome C: Use of appropriate behaviors to meet the	eir needs				
	Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program.	76.9%				
	The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	76.6%				

Data Source: Wisconsin Program Participation System (PPS) (7/1/10-6/30/11) in conjunction with the Early Childhood Outcomes Center Summary Statements calculator.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2010:

Data Analysis:

Data include children who had an active IFSP for a minimum of 6 months (181 days) and exited during the FFY 2010. Wisconsin had an additional 840 children receive Exit Child Outcomes during FFY 2010 (7/1/10-6/30/11) as compared to the previous FFY 2009. We expect these Exit Outcome numbers to begin leveling off with a full cohort of children entering and exiting. The Wisconsin PPS data mart allowed the state to identify individual missing Child Outcome data for each of the 72 Wisconsin Birth to 3 Programs and subsequently each Birth to 3 Program had an opportunity to enter or update the missing data. Each Birth to 3 Program received an error report identifying the missing Child Outcome data in addition to the "impossible combination" of Entry and Exit outcome ratings. Target setting for the two summary statements for each of the three child outcomes was set during the January 2010 State ICC meeting.

Each RESource TA support person was given their regional Child Outcome data including summary statements and progress categories. This was seen as an opportunity for Wisconsin's TA providers to familiarize themselves with the data and, when appropriate, share with their respective regions.

Slippage between the FFY 2009 and FFY 2010 Child Outcome targets influenced by more reliable and accurate data, is likely due to Wisconsin's ongoing training and technical assistance provided to Birth to 3 Programs across the state. The purpose of, and process for, rating a child as part of a program's routine process with increased fidelity, continues to improve over time. As such, more accurate data is represented in the FFY 2010 APR data despite evidence of slippage among the targets. As Birth to 3 Programs become more comfortable, more collaborative across disciplines and recognize the usefulness of Child Outcomes for state and local improvement targets will become more representative. Wisconsin anticipates a leveling of slippage in Child Outcome targets over the next FFY and suggests 2011 and FFY 2012 targets will be more representative of true baseline.

Findings of Non-Compliance: NA

Verification of Correction (either timely or subsequent): NA

Enforcement Actions Taken if Non-compliance not corrected: NA

Improvement Activities/Timelines/Resources:

Part C State Performance Plan: 2005-2012 FFY 2013)

Year 1, Wisconsin collected entry data during the months of June, July, and August 2006. All children starting Birth to 3 Program services who were less than 30 months of age between February 1, 2006 and April 30, 2006 was assessed using information from multiple sources and status information on each individual child was recorded on the ECO Center Child Outcomes Summary Form by August 31, 2006. This data was aggregated and provided in the Annual Performance Report (APR) due in February 2007. DHS collaborated with the 619 program at DPI to provide training on the use of the Child Outcomes summary form in February 2006. DHS partnered with CESA 1 to prepare training on May 6 and 7, 2006 related assessment tools, and techniques.

Year 2, Wisconsin DHS required all counties to use the Outcomes Summary Form during the time period described above as a way of getting broad baseline data introducing all counties to these concepts. Some counties had great deal more work to do to reach this standard than others. Therefore, DHS piloted the progress portion of this indicator only in those counties already using appropriate assessment tools and strategies. Beginning in August 2006, any child exiting the program in the pilot counties for whom status data was obtained, had their progress assessed. Wisconsin collected the five ECO recommended categories of progress, as data regarding children who make sufficient progress to move closer to typical development is important to track. All six counties collected entry status data on all children starting Birth to 3 Program services who are less than 30 month July 1, 2007. Progress data on the first group of children established the progress data reported in the APR due February 2008.

Year 3, based on the experience with the pilot counties regarding the integration of this process into current practices, Wisconsin made a decision to collect entry data on all children entering the Birth to 3 Program beginning July 2007 and exit data on those children, who have entry data and received 6 months of services beginning January, 2008. This data was reported in the APR due February 2009.

During the summer of 2008 the Wisconsin Birth to 3 program in collaboration with the Wisconsin Department of Public Instruction began the roll out a new data collection system known as the Program Participation System (PPS), a web based system intended to replace the older non web-based application Human Service Reporting System (HSRS). Several aspects of this new data collection system are significant improvements over HSRS, with ongoing system enhancement providing anytime accessibility to a County's data for both the State B-3 team and each County service provider. PPS allows counties to enter their own Child Outcome "entry" and "exit" ratings and "sources of information." PPS also increases the State B-3's overall data accuracy by not allowing a child to be exited or closed from a County without proper child outcome information being entered into PPS. Finally, the PPS data system allows each Birth to 3 program to share, with parent permission, child outcome exit status ratings with their respective LEA

Throughout 2007 and 2008 the Child Outcomes Workgroup consisting of staff from WDHS (Part C) and WDPI (Part B) and the Child Outcomes grant coordinator met to develop common expectations and understanding of child outcomes requirements assuring a "Birth to Six" perspective. Collaboration was demonstrated by the development of an electronic data reporting system (PPS), development and period review of a question/answer document, data analysis, state access of OSEP technical assistance, and training and technical assistance.

Wisconsin Birth to 3 and the Wisconsin Department of Public Instruction continues to work collaboratively to enhance the Birth to Six Child Outcomes system through two Outcomes related committees including <u>Birth to 6 Cross Departmental</u> and the <u>Child Outcomes Workgroup</u>, both of which continue to meet on a bi-monthly basis to review existing materials, recommend assessments and determine roles and responsibilities among committee members and across departments.

Five regional technical assistance trainings provided by the state Outcomes Coordinator were offered throughout the spring of 2008. These trainings were open to both Part B and Part C providers.

Also available throughout the year were "Data Discussion" teleconferences three of which dealt specifically with Child Outcomes. Those discussions were held on February of 2008, "Indicator Walkthrough," November 2008, "On-Going Assessment" and December 2008, "Determining Child Outcomes."

Year 4 through year 8, DHS continued to implement the collection of entry and exit data on all children in the program. In addition DHS & DPI are beginning extensive data analysis of child outcomes data to determine the variables that are impacting the state target data as well as process and procedural concerns. Beginning in FFY2010 a series of joint trainings have been offered regionally for County Birth to 3 Programs and LEA on child outcomes. There will not be a full 3 year cohort of children until July 1, 2010.

Clarify Policies and Procedures:

The DHS Birth to 3 Program continues to educate, inform, and encourage Wisconsin Birth to 3 Programs to pay particular attention to the Child Outcome process. Of interest has been the emphasis placed upon learning to incorporate the Child Outcomes process into their daily work with children and families. In other words, a more contextual approach to intervention rather than viewed as additional responsibility or removed from the overall routine of early intervention. Specifically, state staff held a "Data Discussion" during FFY 2010 providing Birth to 3 Programs additional clarification of the entry/exit process for PPS data entry and to help ensure both the quality and timeliness of reporting of Child Outcomes. Fall 2009 Regional meetings provided a number of policy and procedure updates related to Child Outcomes. A reoccurring theme over the past two reporting periods has been to view the Child Outcomes process as a part of, not separate from, a program's everyday routine and practices.

Improved Data Collection and Reporting:

A 'Federal Indicator Report' was developed through the data mart ability in Wisconsin's Program Participation System (PPS) to collect data on Indicator 3 in a timely and accurate manner without a lot of manpower to determine the compliance level, noncompliance level and errors that contribute to the compliance. This report was used to determine data for the 2010-2011 APR.

The Wisconsin DHS Birth to 3 Program monitors County Birth to 3 Programs during the On-Site process by determining the accuracy of Child Outcome data entered into PPS. Annual Self-Assessment discussions also address Child Outcomes however the conversations are centered on the process of gathering the information through team participation, use of the Decision Tree, parent input, locations of child observations, etc. Quality data collection continues to be an emphasis and focus.

Improved Systems Administration: FFY 2010 included a number of activities targeted at the state Birth to 3 leadership and County Birth to 3 Programs. The annual County Birth to 3 Program Self-Assessment in partnership with RESource is the best opportunity in Wisconsin's general supervision system to take a thorough examination of policies and practices effecting the children and families they serve. The Self-Assessment remains the one anticipated and preplanned opportunity for County Birth to 3 Programs to assess and evaluate the quality of their program, identify concerns and consider improvement strategies with the support and facilitation of RESource. Each year following the Self-Assessment, the County Birth to 3 Program and RESource develop a Program In Partnership Plan (PIPP) consisting of program improvement plans and activities.

Provision of Training and Technical Assistance:

In accordance with the OSEP response table, Wisconsin has submitted Indicator 3 data based on the required measurement table for FFY 2009 and FFY 2010.

DHS training and technical assistance efforts included training and support activities throughout FFY 2010. Most notable, was the year long emphasis placed on introducing Relationship-Based Early Intervention in Natural Environments Using Evidence-Based-Practices (EBP) to Birth to 3 Programs throughout the state. Birth to 3 Programs learned how to gather both valid and reliable information (data) within a family's usual routines.

Throughout spring of 2011 statewide trainings were rolled out in collaboration with the Department of Public Instruction (DPI) Part B Child Outcomes Coordinator. Also during this period a DHS Birth to 3 Child Outcomes "Data Discussion" conference call was provided state wide. Topics during the call included "what's behind the 5 progress categories" and defining "present level of functioning."

During fall of 2010, a Child Outcomes Parent Brochure was developed and disseminated via the Collaborating Partners website and a Child Outcomes Fidelity Self-Assessment was designed and utilized during Birth to 3 Program reviews. Finally, the 2010 Early Childhood conference was attended by several State Birth to 3 staff and members of Wisconsin's Professional Development Program (WPDP).

Collaboration and Coordination:

Ongoing collaboration continues with DPI's Part B Child Outcomes Coordinator and Birth to 3 staff. During FFY 2010 these collaborative meetings occurred approximately every other month. Agendas were developed during the period leading up to each meeting. Items often included were data analysis, upcoming training opportunities, joint training efforts in the future and discussions concerning local issues following an Early Childhood Outcomes Center Community of Practice call.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 4.

Monitoring Priority: Early Intervention Services in Natural Environments

<u>Indicator 4:</u> 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 USC 1416(a)(3)(A) and 1442)

Measurement:

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

Overview of Issue/Description of System or Process:

Wisconsin regulations for the Birth to 3 Program provide standards for procedural safeguards consistent with federal requirements for parents and children in Ch. HFS 90.12, Wisconsin Administrative Code. The DHS has prepared several informational documents for families that provide their parent and child rights, as well as information about options for resolving disputes. Materials can be found on the Wisconsin Birth to 3 Program for Families webpage.

Assurance that these standards are adhered to is verified during site review visits. Family Outcome survey data and file reviews are utilized to assure that those practices are consistently interpreted and applied. Corrective action, built upon technical assistance through RESource, is implemented when warranted.

Every component of Birth to 3 Program provider and family training incorporates family-centered practices. The Birth to 3 Program has a model IFSP and other documents available through the <u>Wisconsin Birth to 3 Program Forms and Publications webpage</u>

The Parents as Leaders Program (PALS), funded as part of WPDP since 1989, is a group of parent and other caregivers who meet together five times during a year to:

- Learn about resources;
- Learn more about leadership and advocacy roles for parents of children from birth to six years;
- Explore topics of interest to group members, such as effective communication with professionals, inclusive education, futures planning, helping children make friends, financial resources, and family rights under the Americans with Disabilities Act;
- Meet some of the key people who make the policies and run the programs that affect children with special needs and their families in Wisconsin;
- Develop leadership skills:
- Work on projects based upon each parent's choice; and
- Become part of a network of parents of young children with disabilities who are knowledgeable about education, health, and social service issues; are active in their communities; support each other; and have fun together.

PALS is co-facilitated by a parent and an early childhood professional to model strong partnerships and complementary roles and responsibilities. Over the years, many graduates of PALS have assumed leadership roles in Wisconsin's Birth to 3 Program, including employment at WPDP or county agencies, members of the ICC, and parent leaders within Birth to 3 Programs and early childhood special education (619, Part B) local programs. Over the past couple of years, the relationship between PALS and the ICC has strengthened in these ways: 1) more parent members have completed the PALS process; 2) ICC members routinely contribute content to PALS sessions; and 3) PALS co-facilitators report on the action projects of PALS members to the ICC annually.

Wisconsin is working to engage parents in the Birth to 3 Program system delivery of services. Plans are ongoing for PALS co-facilitators and graduates to orient and mentor new ICC members, for PALS participants to provide ongoing stakeholder input to the ICC and Part C Program, and develop ways for PALS alumni and ICC members to reach out to other parents. These plans strengthen the ability for early intervention parent leaders to gather information from other family members throughout the year and to represent the voices of a broad constituency of parents. Another goal is for more PALS

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alumni and other parents to participate in local community Birth to 3 Programs or early childhood councils and maintain ongoing communication with ICC members.

All of these activities increase the options for parents of children participating in early intervention to learn about their rights with Wisconsin's Birth to 3 Program. Educational outreach and coordination of activities with Wisconsin's Parent Training Initiatives (FACETS and Great Lakes Inter-tribal Council) has also increased options for parents to learn about their rights within Birth to 3. Three years ago, FACETS and the Great Lakes Intertribal Council (GLITC) became co-sponsors of Orientation to Best Practices in Birth to 3, serving two important purposes. The first purpose has been to educate FACETS staff about the Birth to 3 Program and parents' rights within early intervention. The second purpose has been to assist in recruiting families for participation in Orientation to Best Practices in the Birth to 3 Program. Partnerships have resulted in additional educational resources to families about their rights within the transition process.

In Wisconsin, the provision of Birth to 3 Program services is assigned to county government. The statewide county system covers all children and families who might be eligible for services. However, a second division of governmental authority and responsibility overlaps county boarders in Wisconsin, the tribal system. The Wisconsin Birth to 3 Program contracts with GLITC, the major Wisconsin consortium of tribal affairs and services, to provide outreach to Native American families on and off of tribal lands throughout the State.

The Birth to 3 Program makes available child find, procedural safeguards, and transition brochures in English and Spanish. Local Birth to 3 Programs are responsible to assure that information and notices are translated as needed into the languages of the parents within their area.

The Wisconsin Birth to 3 Program's July 2002 through June 2009 review process included mailed surveys developed by DHS for current and past participants of the Birth to 3 Program, early intervention providers and community partners. In addition, nine families are selected for either telephone or in-person interviews with staff from DHS. The survey's were developed by a sub-committee of the ICC, reviewed by a group of parents, and piloted by several counties prior to implementation. Survey results are shared with the ICC annually to inform them relative to the Birth to 3 Program's progress on the following outcome: Families receive individualized supports and services needed to enhance their child's development. The following indicators have been evaluated by the ICC:

ICC Outcome Indicators

Outcome	Indicator	Measurement
Families receive individualized supports and services needed to enhance their child's development.	Extent to which parents report they receive supports and information needed to nurture their child.	Parent Survey
		Parent Survey
	 Family's sense of their ability to participate in everyday community activities such as: child care, employment, and family social networks. 	Parent Survey
	 Extent to which families report that their child made progress. Families are satisfied with the quality of their services. 	

Data Collection Instrument

The Birth to 3 Workgroup, including ICC members and parents, made recommendations on implementation of the family survey. The group recommended that: the current Wisconsin survey be shortened, that DHS should consider sampling, and that surveys should be sent to families in each county on an annual basis. This background data introduced the ICC to this new federal indicator at the September 2005 meeting. The Department researched the feasibility of utilizing the family survey developed by the Early Childhood Outcomes Center (ECO). In June 2006, the DHS has amended the SPP and decided in partnership with the ICC to implement the ECO family survey. The ECO Family Survey was the primary tool for measuring family outcomes during program monitoring. Wisconsin added one open-ended question to the ECO survey during the first year. County specific data was provided to each Birth to 3 Program.

Population

The target population for this indicator consists of parents and primary caregivers of infants and toddlers who are determined eligible and who are enrolled in the Birth to 3 Program throughout the state. The sampled population included parents and primary caregivers of infants and toddlers who have a signed IFSP at the time the survey is conducted. Families who do not yet have a signed IFSP have limited experience with the program and its services and thus limited ability to provide meaningful feedback.

Collection of Baseline Data

In fall 2006, Wisconsin will use the ECO survey to conduct a statewide survey of families who meet the population as defined above. This survey provided the baseline data to be reported to OSEP in February 2007.

Collection of Data in Subsequent Years

Beginning in 2007, family survey data from a sample of Birth to 3 Program families throughout the state were obtained according to the sampling plan described in this section. The sampling methodology accounts for important characteristics of Wisconsin's Birth to 3 Program. The sampling plan also permitted state, regional, and county staff to meet the technical requirements of selecting a valid sample while minimizing administrative and workload impact. The goals of the Family Survey sampling methodology included:

- 1. Providing valid information on a sample of families participating in the state's Birth to 3 program each year. The sample shall be designed so that the families surveyed in any given year were representative of the population of families participating in Birth to 3 Program statewide.
- 2. Facilitating the efficient use of state and county resources through coordinating the Family Survey with the On-Site Birth to 3 Program Reviews. State and regional staff, on a rotating basis, conduct these reviews; a sub-set of the county administered Birth to 3 Programs are reviewed each year, so that by the end of the four-year review cycle, each county's program has been reviewed. The four-year review cycle begin again in 2011.
- 3. Providing state and county staff, from the largest programs (Milwaukee, Dane, Racine, and Waukesha), with family feedback each year.
- 4. The size of Milwaukee County's program makes conducting a census of all families infeasible. Therefore, in Milwaukee County, the survey was administered to a stratified sample of approximately 622 families (based on a confidence level of 95 percent and a confidence interval of + / 5 percent). The Birth to 3 population in Milwaukee County was stratified on the basis of race/ethnicity prior to selecting the sample. In the data analysis, Milwaukee County's data was weighted to reflect the fact that the data comes from a sample rather than a program census, as in the other counties.
- 5. Balancing the resources and workloads of the regional, state and County Birth to 3 Program staff.

Wisconsin's Birth to 3 Program has unique characteristics that must be considered and addressed in developing a sampling methodology.

1. The provision of Birth to 3 Program services is assigned to county government, thus there are 72 county managed programs in the state. County program staff have the most up-to-date information about families and children who participate in the program.

Implications for Survey Methodology – Preparing up-to-date sampling frames is done by county staff. Thus cluster sampling, selecting a sub-set of counties to administer the survey each year, is preferred in Wisconsin as only scheduled counties would need to prepare a sampling frame. This is facilitating the coordination of the family survey with the On-Site Program Review.

- DHS divides Wisconsin's counties into five administrative regions. Regionallybased state staff provide technical assistance to county programs. Regional staff participate in Program Reviews, and will assist with the family survey as well.
 - <u>Implications for Survey Methodology</u> Ideally, counties selected to administer the family survey in a given year should be distributed to some extent across administrative regions, so that the workload for regional office staff was manageable.
- 3. There is a modest relationship between program size and administrative region. The largest County Birth to 3 Programs are in the Southeastern, Southern and Northeastern Regions, while most of the smallest programs are in the more rural Northern and Western Regions.
 - <u>Implications for Survey Methodology</u> Stratifying counties by Birth to 3 Program size, before selecting counties to administer the survey, may be sufficient to ensure that the sampled counties are distributed across administrative regions.
- 4. Program sizes vary. The point-in-time program child count on 12/01/05 ranged from two children in Florence County in northern Wisconsin to 1,614 children in Milwaukee County. Milwaukee County's program served 27.3 percent of the 5,903 children enrolled in Birth to 3 statewide. The next three largest counties served 17 percent of the state total (Waukesha County-7.2 percent, Dane County-5.6 percent, and Racine County-4.2 percent). Thus on December 1, 2005, the four largest programs were serving about 44 percent of the state's Birth to 3 Program participants.
 - <u>Implications for Survey Methodology</u> A larger number of families must be sampled from the largest counties to be representative of the statewide Birth to 3 Program participant population. Thus sample sizes should be proportional to program sizes.
- 5. The racial/ethnic composition of Birth to 3 Program caseloads varies across counties.
 - African-American and Hispanic populations are proportionately higher in the state's largest counties, particularly Milwaukee, Dane, Racine, and Kenosha.
 - Milwaukee and Brown counties have larger numbers of Native American births than most Wisconsin counties, but a significant number of Native Americans also live in several small and medium-sized counties located in Western, Northern, and Northeastern Wisconsin – these include Menominee, Sawyer, Shawano and Vilas counties.
 - Finally, one-quarter of the births to Laotian/Hmong mothers in 2004 were in Milwaukee County. However, there were also a number of Laotian/Hmong births in the medium-sized counties of Marathon, Sheboygan, Brown, and La Crosse.

Implications for Survey Methodology – A sample of Birth to 3 Program families is likely to be representative of the racial/ethnic composition of the Birth to 3 Program statewide if it is based on a sampling methodology that explicitly takes program size into account, specifically, one that includes families from a balance of small, medium, and large-sized programs each year.

Sampling Methodology

A different sampling strategy was used in the four largest programs than in the remainder of the state. Using the December 1, 2005 point-in-time child count as the measure of program size, the 72 counties will first be listed in order based on the size of their Birth to 3 Program

Milwaukee, Waukesha, Dane, and Racine counties administer the four largest Birth to 3 Programs; a random sample of families from each of these counties was selected and surveyed <u>each year</u>. These programs were over-sampled to some extent, compared to other counties, as described in the section on sample sizes. Families were sampled without replacement; a family selected to receive a survey in a given year will not be surveyed in subsequent years.

The reason for including families from these counties each year are these are the largest Birth to 3 Programs in Wisconsin and these counties, particularly Milwaukee, Dane, and Racine, serve higher than average percentages of non-white families. Therefore, in order to ensure that the overall sample of families surveyed each year is representative of the entire state's racial/ethnic composition, it is important to include a sufficient number of families from these programs among those families surveyed each year.

In the remaining 68 counties, a multi-stage sampling methodology was employed. First, a sub-set of the counties was selected each year to administer the family survey. In each year of a four-year cycle which was in 2007, one-quarter (17) of the counties was chosen to administer the survey prior to their scheduled Program Review. Counties were selected without replacement across years, so that counties which administer the survey in a given year will not be selected to administer the survey in subsequent years of the four-year cycle. By the end of a four-year cycle, each of the 68 counties will have administered the family survey once.

From a list of these 68 counties ordered by program size, a systematic sample of 17 counties was selected each year to administer the family survey; after taking a random start, every fourth county was selected from the list. Taking a systematic sample of counties from a list that orders counties by Birth to 3 Program size achieves implicit stratification of counties based on program size. Each county has an equal probability of being selected in a given year.

In the counties selected to administer the survey each year, a sample of families was selected to receive the survey. In each selected county, the probability of selecting any given family into the sample was proportional to program size; families was randomly selected from a sampling frame, which lists all families active in the program.

Birth to 3 state staff was responsible for preparing the sampling frames and selecting families to be included in the sample.

The table below summarizes the main points of this two-pronged sampling methodology:

Two-Pronged Sampling Methodology

Counties	Sampling Methodology
Four largest	Each year, select a sample of families from each of these
counties:	programs:
- Milwaukee	

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- Waukesha - Dane - Racine	 proportional to program size; however, over-sample from these programs. without replacement of families across years. from a random sample of families from a frame listing all families participating in the program.
Remaining 68 counties: List these counties in order of program size.	Select one-quarter of these counties each year to administer the survey: select seventeen counties each year, without replacement of counties across years in a given cycle, each eligible county (i.e., not previously selected) has an equal probability of selection. In the selected counties, randomly select a sample of families to survey: • the number of families surveyed from each selected county is proportional to program size. • selection is made by taking a random sample of families from a frame listing all families participating in the program.

Sample Sizes

The sample will consist of parents and primary caregivers of approximately 722 children receiving Birth to 3 Program services during a calendar year. A desired sample size of 361 was determined using a sampling calculator,

http://www.raosoft.com/samplesize.html, by Raosoft, Inc. This desired sample size is based on a confidence level of 95 percent, with a confidence interval of + / - 5 percent.

In recent years, Wisconsin Birth to 3 Programs administered a family survey that is very similar to the ECO family survey, in conjunction with the county Program Reviews. Experience with that survey indicated that, on average, a response rate of approximately 50 percent is expected. Thus, in order to ensure an adequate number of completed surveys, the desired sample size of 361 was adjusted to take into account the expected response rate. The total sample size will therefore be at least 722. The following table shows the general distribution of the sample of families to be surveyed each year.

Family Distribution of Sample

County	Child Count	Statewide	Sample size based on percent served	Sample sizes based on over-sampling in four largest counties (inflate sample sizes by factor of 1.25)
Milwaukee	1,614	27.3	.273 X 722 = 197	197 X 1.25 = 246
Waukesha	425	7.2	.072 X 722 = 52	52 X 1.25 = 65
Dane	332	5.6	.056 X 722 = 41	41 X 1.25 = 51
Racine	247	4.2	.042 X 722 = 30	30 X 1.25 = 38
Sub-total, 4 largest counties				400

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Remaining 68 counties (combined)	3,285	55.6	722 - (246 + 65 + 51 + 38) = 322
Total	5,903	100.0	722

Milwaukee, Waukesha, Dane, and Racine counties will survey a sample of Birth to 3 Program families each year. The sample sizes in these counties was approximately proportional to program size, with the modification that a somewhat larger proportion of the total sample was taken from these counties than represented by their share of the statewide Birth to 3 Program population. These four counties, combined, serve about 44 percent of the state's Birth to 3 participants, but approximately 54 percent of each year's sample for the family survey was taken from these counties. Cluster sampling of counties is used in the remainder of the state. It is possible that the selection of a subset of counties to represent the statewide Birth to 3 Program may result in racial/ethnic minorities being under-represented in the sample because the racial/ethnic composition of the Birth to 3 Program caseload varies across counties. Therefore, to guard against minorities being under represented sample sizes was increased in Milwaukee, Waukesha, Dane, and Racine counties. These counties serve higher percentages of minorities than most Wisconsin counties. Thus, as the right-hand column of the table above shows, the number of families actually sampled from these four counties was 1.25 times greater than the percentage of the statewide Birth to 3 population served in each of these counties.

The remaining 68 counties will administer the survey on a rotating four-year basis using the methods described in the preceding discussion. The table on the following page indicates the counties which will administer the family survey in each year, and the sample size for each county. Approximately 322 families were surveyed from seventeen other counties in addition to the counties included in the sample each year.

The Brown County example below provides the details of calculating the sample size for each county:

The seventeen counties selected to administer the survey in Year 1, including Brown County, served a total of 903 children on 12/01/05.

Brown County served 201 children on that date, or about 22.3 percent of the seventeen-county total (201/903 X 100% = .223 X 100% = 22.3%).

The sample size from Brown County was 22.3 percent of the number of families to be surveyed in the seventeen counties, or about 72 families (.223 X 322 = 71.7).

Sample sizes for each county were calculated in the same manner, and are shown in the table on the following page.

Data Collection Procedures

The family survey was a self-administered paper survey. State staff will randomly select the families to be included in the sample from all families participating in the county's Birth to 3 Program, within a specified timeframe, who have a signed IFSP. Service coordinators or service providers will distribute surveys to selected families and will encourage families to participate in the process.

The Department worked with Wisconsin's Parent Training and Information Centers, the Native American Family Empowerment Center and the Wisconsin Family Assistance Center for Education, Training and Support (FACETS) to provide support to parents in completing the surveys. This included translation of the survey and assisting families in responding. Families who do not respond was offered assistance if needed to ensure a reasonable rate of return. Families have an opportunity to respond via a web-based tool. Families have the option of entering their responses into a secure web-based application or returning the survey, postage paid, to the DHS.

Data Analysis Procedures

Survey responses were entered into a database. Data analysis will primarily involve the web-based calculation of descriptive statistics and cross-tabulations. Because the survey was web-based most surveys should be complete. Any missing data was extrapolated through a process of imputation.

Some of the state's Birth to 3 Programs are quite small and only one or two families from a program may be surveyed in several cases. Confidentiality was maintained because data was reported only on a statewide basis; results were reported across all counties included in the sample in a given year. Results will not be reported for individual counties, and will not be reported separately for population sub-groups. Thus it will not be possible to identify a particular child or family.

Calculation of Sample Size

Region	Four	Point in Sample size = co.		Oversample:	Sample
	Largest	time	child	Calculated	size
	Counties	HSRS	count/statewide	sample x	each year
		12/01/2005	child count x	1.25	(rounded)

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			desired sample size (722)		
SE	Milwaukee	1,614	197.0	246.3	246
SE	Waukesha	425	52.0	65.0	65
S	Dane	41.0	41.0	51.3	51
SE	Racine	30.0	30.0	37.5	38
	Sub-totals:	2,618			400

Calculation of Sample Size - Year One

Statewide child count (12/01/05) = 5,903

Region	Remaining 68 Counties	Point in time HSRS 12/1/05	Year of Survey & Review	Sample size = co. child count / child count in selected cos. X number to come from selected cos. (i.e. 722 - 400 = 322)	Sample size, rounded
S	Adams	8	1	2.9	3
NE	Brown	201	1	71.7	72
S	Dodge	82	1	29.2	29
W	Dunn	55	1	19.6	20
W	Eau Claire	103	1	36.7	37
N	Forest (HSC)	21	1	7.5	8
S	Green	17	1	6.1	6
S	Juneau	18	1	6.4	6
NE	Manitowoc	141	1	50.3	50
W	Monroe	35	1	12.5	12
N	Oneida (HSC)	39	1	13.9	14
N	Sawyer	14	1	5.0	5
NE	Shawano	29	1	10.3	10
N	Taylor	12	1	4.3	4
N	Vilas (HSC)	26	1	9.3	9
SE	Walworth	92	1	32.8	33
NE	Waushara	10	1	3.6	4
	Sub-total Yr 1	903			322

Calculation of Sample Size – Year Two

Region	Remaining 68 Counties	Point in time HSRS 12/1/05	Year of Survey & Review	Sample size = co. child count / child count in selected cos. X number to come from selected cos. (i.e. 722 - 400 = 322)	Sample size, rounded
S	Grant	25	2	10.2	10
S	Iowa	11	2	4.5	4
N	Iron	4	2	1.6	2
SE	Jefferson	107	2	43.7	44

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N	Kewaunee	22	2	9.0	9
S	Lafayette	14	2	5.7	6
N	Marathon	90	2	36.8	37
NE	Marinette	40	2	16.3	16
NE	Marquette	9	2	3.7	4
NE	Menominee	13	2	5.3	5
NE	Outagamie	171	2	69.9	70
W	Pierce	19	2	7.8	8
W	Polk	32	2	13.1	13
W	Rusk	17	2	6.9	7
W	St Croix	70	2	28.6	29
SE	Washington	94	2	38.4	38
N	Wood	50	2	20.4	20
	Sub-total Yr 2	788			322

Calculation of Sample Size – Year Three

Region	Remaining 68 Counties	Point in time HSRS 12/1/05	Year of Survey & Review	Sample size = co. child count / child count in selected cos. X number to come from selected cos. (i.e. 722 - 400 = 322)	Sample size, rounded
N	Ashland	9	3	3.9	4
W	Barron	56	3	24.1	24
W	Clark	30	3	12.9	13
S	Columbia	25	3	10.7	11
S	Crawford	17	3	7.3	7
W	Douglas	42	3	18.1	18
N	Florence	2	3	0.9	1
W	La Crosse	89	3	38.3	38
N	Langlade	19	3	8.2	8
SE	Ozaukee	94	3	40.4	40
W	Pepin	10	3	4.3	4
N	Price	14	3	6.0	6
NE	Sheboygan	158	3	67.9	68
S	Vernon	21	3	9.0	9
W	Washburn	12	3	5.2	5
NE	Waupaca	46	3	19.8	20
NE	Winnebago	105	3	45.1	45
	Sub-total Yr 3	749			321

Calculation of Sample Size – Year Four

Region	Remaining 68 Counties	Point in time HSRS 12/1/05	Year of Survey and Review	Sample size = co. child count / child count in selected cos. X number to come from selected cos. (i.e., 722 - 400 = 322)	Sample size, rounded
N	Bayfield	7	4	2.7	3
W	Buffalo	11	4	4.2	4
W	Burnett	9	4	3.4	3
N	Calumet	73	4	27.8	28
W	Chippewa	92	4	35.1	35
NE	Door	24	4	9.1	9
NE	Fond du Lac	92	4	35.1	35
NE	Green Lake	13	4	5.0	5
W	Jackson	17	4	6.5	6
SE	Kenosha	171	4	65.2	65
N	Lincoln	20	4	7.6	8
NE	Oconto	34	4	13.0	13
N	Portage	42	4	16.0	16
S	Richland	16	4	6.1	6
S	Rock	142	4	54.1	54
S	Sauk	54	4	20.6	21
W	Trempealeau	28	4	10.7	11
	Sub-total Yr 4	845			322

Desired total sample size = 722, based on 95 percent confidence level and .05 margin of error

Counties Conducting the Birth to 3 Family Survey in Each Year of the Four-Year Cycle

	Year 1	Year 2	Year 3	Year 4
Southeastern Region	Walworth	Jefferson Washington	Ozaukee	Kenosha
Southern Region	Adams Dodge Green Juneau	Lafayette Iowa Grant	Columbia Crawford Vernon	Richland Rock Sauk
Northeastern Region	Brown Shawano Waushara Manitowoc	Marinette Marquette Menominee Outagamie	Sheboygan Waupaca Winnebago	Door Fond du Lac Green Lake Oconto
Northern Region	Forest Oneida Sawyer Taylor Vilas	Iron Marathon Kewaunee Wood	Ashland Florence Langlade Price	Bayfield Calumet Lincoln Portage
Western	Dunn	Pierce	Barron	Buffalo

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Region	Eau Claire Monroe	Polk Rusk St. Croix	Lacrosse Pepin	Burnett Chippewa Jackson Trempealeau
			Washburn	

Baseline Data:

The baseline results for the federal indicators are as follows:

Indicator 4A: 82.4% Indicator 4B: 89.1% Indicator 4C: 90.4%

Discussion of Baseline Data:

Baseline data was collected through a statewide survey distributed in November 2006. The ECO survey was distributed to families who had children enrolled in a County Birth to 3 Program who had a signed IFSP as of September 30, 2006. The survey was available in three languages: English, Spanish, and Hmong. Local Birth to 3 agencies assisted with the distribution of the survey in the most appropriate language for each family. Families had the option of completing the survey on-line through a secure webbased tool that utilized the child's unique Human Services Reporting Code number as the access password or by returning the survey to the state Birth to 3 Program. Families who needed assistance had the option of help from state staff who were not the actual provider of their child's services.

Approximately 4,000 surveys were distributed to families statewide, of these 1,379 surveys were returned. This represents a response rate of approximately 34 percent. A brief summary of each question and the types of response choices follows. For full detail of each question and response, readers should refer to the ECO website and background materials. The results related to the three measurement clusters appear in the table below.

Description of Questions 16, 17 and 18 with regard to Measurements A, B, and C: Questions 16, 17, and 18 of the ECO survey relate to families' report of their experience with the Birth to 3 Program in Wisconsin.

- Measurement A Question 16: To what extent has the Birth to 3 Program helped your family know and understand your rights? Responses at a five, six, or seven indicate that the Birth to 3 Program has provided good to excellent assistance to families with regard to understanding their rights. Responses at a three, two, or one indicate that the Birth to 3 Program has done few things to help parents know and understand the family's rights. A response of a four is neutrally between the two ranges specified for this question.
- Measurement B Question 17: To what extent has the Birth to 3 Program helped your family effectively communicate your child's needs? Responses at a five, six or seven indicate that Birth to 3 Program has done a good to excellent job of helping to effectively communicate their child's needs. Responses at a three, two, or one indicate that the Birth to 3 Program has done a few things, or nothing to help the family effectively communicate their child's needs. A response of a four is neutrally between the two ranges specified for this question.
- ➤ Measurement C Question 18: To what extent has the Birth to 3 Program helped your family be able to help your child develop and learn? Responses at a five, six, or

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seven indicate that the Birth to 3 Program has done a good to excellent job in helping the family to help their child to develop and learn. Responses at a three, two, or one indicate that the Birth to 3 Program has done few things or nothing to help the family to help their child grow and learn. A response of a four is neutrally between the two ranges specified for this question.

Measurement A, B and C as it relates to a Family's Experience with the Birth to 3

Program

	Question 16	Percentage Question 16	Question 17	Percentage Question 17	Question 18	Percentage Question 18
7 Excellent	550	39.90%	612	44.40%	709	51.50%
6	170	12.30%	224	16.30%	223	16.20%
5 Good	416	30.20%	391	28.40%	313	22.70%
4	115	8.40%	73	5.30%	60	4.40%
3 Offered a few things	87	6.30%	52	3.80%	51	3.70%
2	18	1.30%	10	0.70%	7	0.50%
1 Not helped us	21	1.50%	15	1.10%	14	1.00%
Total	1,377	100%	1,377	100%	1,377	100%

Measurement A Additional Data and Discussion

Questions four, five, and six of the ECO survey relate to families' report with regard to knowing their rights and advocating for their child. These data are complimentary to the question asked regarding the Birth to 3 Program experience and understanding their rights. The data for the specific Birth to 3 Program experience related to knowing and understanding rights, question sixteen, indicated that 82.4 percent of the families responded positively to this area. When combining the percentages for questions four, five, and six the result indicate families' evaluation of their skill in this area as 74.27 percent. The comparison of the results of these two question clusters indicates that families evaluated their skills in this area somewhat lower than their evaluation of the Birth to 3 Program. Details of questions four, five and six appear below and the results are summarized in the Measurement A table below.

- Question 4: A variety of programs and services may be available for your child and family. Do you know what is available for your child and family? Responses at a five, six, or seven indicate that a family is aware of most programs and services up to very aware of available programs and services. Responses of a three, two, or one indicate that a family knows of some programs and services but beginning to learn about services or has more they want to learn.
- Question 5: Parents often meet with professionals to plan services or activities. How comfortable are you participating in these meetings? Responses at a five, six, or seven indicate that the family is in a range of comfortable to very comfortable

- participating in meetings. Responses at a three, two, or one indicate that the family's comfort level is not very comfortable to very uncomfortable.
- Question 6: Families of children with special needs have rights, and there are things you can do if you are not satisfied. How well do you know your rights and what to do if you are not satisfied? Responses at a five, six, or seven indicate that the family is in a range of knowing most or all of their rights and what to do if not satisfied. Responses at a three, two, or one indicate that the family understands their basic rights and options if not satisfied to not being sure about their rights and what to do if dissatisfied.

Measurement A - ECO Survey Questions 4, 5 and 6

	Percentage Question 4	Percentage Question 5	Percentage Question 6	Percentage Average
7 Very comfortable and aware	20.70%	55.80%	27.20%	34.57%
6	9.10%	10.80%	11.00%	10.30%
5 Mostly know	35.50%	24.10%	28.60%	29.40%
4	9.10%	4.10%	6.80%	6.67%
3 Some understanding	19.10%	1.70%	14.50%	11.77%
2	1.70%	1.40%	2.60%	1.90%
1 Just beginning to understand	4.80%	2.10%	9.30%	5.40%
Total	100%	100%	100%	100%

The baseline result for Measurement A indicates that most families know and understand their rights. Wisconsin provides a variety of materials to assist families in being informed of and understanding their rights. The Department will convene a review panel of parent advisors to determine any improvements that could make these materials even more understandable. The updated materials were added to the Department's website for ease of each family's access to these materials. The Department is further analyzing baseline data. If there are any areas in the State that demonstrate evidence of performance below the statewide averages, then an individual county or provider may need to improve the clarity of information or local practices and procedures with regard to procedural safeguards. The Department will assure that these agencies receive training and technical assistance to improve their performance. Finally, the Department will develop a web cast of rights for families that can be used by local agencies and accessed directly by families.

Measurement B Additional Data and Discussion

Questions one, two and three of the ECO survey relate to families' report with regard to understanding their child's strengths, abilities, and special needs. These data are complimentary to the question asked regarding the Birth to 3 Program experience and effectively communicating their child's needs, question seventeen. The data for the specific Birth to 3 Program experience related to effective communication of their child's needs indicated that 89.1 percent of the families responded positively to this area. When

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combining the percentages for questions one, two, and three, the result indicates that families' evaluation of their skill in this area as 82.83 percent. The comparison of the results of these two question clusters indicates that families evaluated their skills in this area fairly consistently with their evaluation of the Birth to 3 Program. Details of questions one, two, and three appear below and the results are summarized in the Measurement B table below.

- Question 1: Your child is growing and learning. How well do you understand your child's development? Responses at a five, six, or seven indicate that a family has a pretty good to very good understanding of their child's development. Responses of a three, two, or one indicate that a family has a basic understanding or is just beginning to understand their child's development.
- Question 2: Some children have special health needs, a disability, or are delayed in their development. How much do you know about your child's special needs? Responses at a five, six, or seven indicate that the family has learned a lot or is very confident that they know about their child's special needs. Responses at a three, two, or one indicate that the families have learned some about their child's special needs to knowing very little about the child's special needs.
- Question 3: Professionals who work with you and your child want to know if the things they do are working. Are you able to tell if your child is making progress? Responses at a five, six, or seven indicate that the family is usually or always able to tell if their child is making progress. Responses at a three, two, or one indicate that the family is sometimes being able to see progress or not being able to tell if their child is making progress.

Measurement B - ECO Survey Questions 1, 2 and 3

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	Percentage Question 1	Percentage Question 2	Percentage Question 3	Percentage Average			
7 Learned a lot	30.40%	38.80%	47.50%	38.90%			
6	17.10%	14.70%	15.30%	15.70%			
5 Usually able	33.20%	28.40%	23.10%	28.23%			
4	5.70%	5.20%	5.10%	5.33%			
3 Learned some	10.50%	8.20%	7.10%	8.60%			
2	1.30%	0.80%	0.90%	1.00%			
1 Just beginning	1.90%	3.70%	1.10%	2.23%			
Total	100%	100%	100%	100%			

The baseline result for Measurement B indicates that the Wisconsin Birth to 3 Program has assisted most families in effectively communicating regarding their child's needs. Wisconsin providers have a long-standing history of supporting families in understanding their child's needs and valuing parents as full partners of the child's early intervention team. These results indicate that nearly all families experience this level of support from their local agency. The Department has recently updated all Individualized Family

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Service Plan (IFSP) Guidelines. These Guidelines further emphasize the families' role and provided specific and useful tools for local teams to support families in communicating their child's unique skills and needs.

The Department is further analyzing baseline data for Measurement B. If there are any areas in the State that demonstrate evidence of performance below the statewide averages, then an individual county or provider may need to improve the clarity of information or local practices with regards to communication about each child's unique needs with families. The Department will assure that these agencies receive training and technical assistance to improve their performance.

Measurement C Additional Data and Discussion

Questions seven, eight, and nine of the ECO survey relate to families' report with regard to helping their child to develop and learn. These data are complimentary to question eighteen that asks the family about their experience with the Birth to 3 Program regarding the program helping their family to help their child develop and learn. The data for the specific Birth to 3 Program experience related to helping their child to develop and learn indicated that 90.4 percent of the families responded positively to this area. When combining the percentages for questions seven, eight and nine, the result indicates that families' evaluation of their skill in this area as 79.1 percent. The comparison of the results of these two question clusters indicates that families evaluated their skills in this area somewhat lower than their evaluation of the Birth to 3 Program. Details of questions seven, eight, and nine appear below and the results are summarized in the Measurement C table below.

- Question 7: All parents help their children develop and learn, but sometimes it is hard to know what to do. How would you describe your ability to help your child develop and learn? Responses at a five, six, or seven indicate that a family is pretty sure to very sure regarding their ability to help their child develop and learn. Responses of a three, two, or one indicate that a family has a basic understanding or is just beginning to understand how to help their child develop and learn.
- Question 8: All parents try to help their children learn to behave the way they would like, but sometimes it is hard to know what to do. How would you describe your ability to help your child learn to behave the way you would like? Responses at a five, six, or seven indicate that the family is pretty sure to very sure about their ability to help their child behave. Responses at a three, two, or one indicate that the family has learned the basics about helping their child behave or needs to know a lot more about helping their child's behavior.
- Question 9: Your family has worked with professionals to develop a plan to help your child learn new skills and behaviors. How much are you able to help your child learn or practice these new skills at home or in your community? Responses at a five, six, or seven indicate that the family is often or regularly helping their child to learn and practice skills throughout the day. Responses at a three, two, or one indicate that the family is starting to help their child learn and practice skills to not yet having started to help their child to learn and practice skills throughout the day.

Measurement C - ECO Survey Questions 7, 8 and 9

	Percentage Question 7	Percentage Question 8	Percentage Question 9	Percentage Average
7 Sure of our ability	21.90%	15.20%	43.50%	26.87%

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6	22.40%	18.20%	21.30%	20.63%
5 Pretty sure of ability	33.90%	36.50%	24.40%	31.60%
4	11.20%	13.20%	4.20%	9.53%
3 Starting to help	8.30%	12.30%	5.50%	8.70%
2	0.90%	2.10%	0.40%	1.13%
1 Not yet	1.30%	2.50%	0.70%	1.50%
Total	100%	100%	100%	100%

The baseline result for Measurement C indicates that the Birth to 3 Program supported most families in their ability to help their child develop and learn. Wisconsin has Guiding Principles that emphasize the parents as the primary influence of each child's development. Specifically, all providers within Wisconsin are oriented to the following basic tenets.

- Each child's greatest resource is their family.
- Children are best served within the context of family and a young child's needs are closely tied to the needs of their family.
- The nurturing, love, and commitment of a family cannot be replaced by any array of services.
- The best way to support children and meet their needs is to support and build upon the individual strengths of their family.
- The Individualized Family Service Plan (IFSP) focuses on how the system can support the "whole" family, its cultural values, strengths, and needs.
- Parents are partners in any activity that serves their children.
- Just as children are best supported within the context of family, the family is supported within the context of the community.

The basic principles demonstrate the commitment to each family's role in understanding their child's development and supporting each family in the skills to help their child develop and learn. These results indicate that most families experience this level of support from their local agency. The updated Individualized Family Service Plan (IFSP) Guidelines also support this outcome. Given that families rated their skills in this area somewhat lower than their ratings of the Birth to 3 Program, we will seek guidance through Parent Forums hosted by the ICC to address greater support to families in this area.

The Department is further analyzing baseline data for Measurement C. If there are any areas in the State that demonstrate evidence of performance below the statewide averages, then an individual county or provider may need to improve early intervention staff skills in supporting families in their central role related to their child's development. The Department will assure that these agencies receive training and technical assistance to improve their performance.

The FFY2009 results indicate consistent progress toward the target:

FFY	Measurable and Rigorous Target		
2009	TARGETS	RESULTS	
(2009-2010)	Measurement A = 90%	Measurement A = 85%	
	Measurement B = 94%	Measurement B = 95%	
	Measurement C = 94%	Measurement C = 92%	

FFY:

The federal fiscal year baseline data is reported on is 2005.

Family Outcomes Measurable and Rigorous Target

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Measurement A = 1,002/1,194 X 100 = 82.4% Measurement B = 1,085/1,194 X 100 = 89.1% Measurement C = 1,098/1,194 X 100 = 90.4%
2006 (2006-2007)	Rigorous Target Measurement A = 83% Rigorous Target Measurement B = 90% Rigorous Target Measurement C = 91%
2007 (2007-2008)	Rigorous Target Measurement A = 85% Rigorous Target Measurement B = 91% Rigorous Target Measurement C = 92%
2008 (2008-2009)	Rigorous Target Measurement A = 88% Rigorous Target Measurement B = 93% Rigorous Target Measurement C = 93%
2009 (2009-2010)	Rigorous Target Measurement A = 90% Rigorous Target Measurement B = 94% Rigorous Target Measurement C = 94%
2010 (2010-2011)	Rigorous Target Measurement A = 90% Rigorous Target Measurement B = 94% Rigorous Target Measurement C = 94%
2011 (2011-2012)	Rigorous Target Measurement A = 90% Rigorous Target Measurement B = 94% Rigorous Target Measurement C = 94%
2012 (2012-2013	Rigorous Target Measurement A = 90% Rigorous Target Measurement B = 94% Rigorous Target Measurement C = 94%

The baseline has been changed and targets updated since the SPP was submitted in 2005 to reflect additional data collected from Milwaukee County in March/April 2007. By doing this, an additional 185 surveys are included in our baseline or another 4 percent. Including Milwaukee County surveys in our baseline incorporates data from our largest county with high populations of African-American, Hispanic, Native American, and Laotian/Hmong families. This changed baseline data is more representative of both the program sizes and the racial/ethnic composition of the Birth to 3 Program statewide with the additional surveys added. The ICC, Wisconsin's key stakeholder group, analyzed the

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data and the impact of Milwaukee County on statewide performance on this indicator, and recommended revising targets to be more reflective of the realistic timeline required for systems change and revision and dissemination of materials that assist families to better understand their rights.

In FFY 2010-2011, Wisconsin changed the distribution plan for the ECO Family Outcomes survey. Wisconsin distributed the survey via census, instead of a sampling plan. This decision was made based upon feedback from County Birth to 3 Programs regarding the process of distribution and State analysis of the family outcome survey process. County Birth to 3 Programs reported families in the sample had already moved and were hard to find, families despite encouragement were not completing the survey lowering the rate of return, and County Birth to 3 Programs would like to add additional families to the process for their information. State analysis of the family outcome survey process indicated a low return rate of surveys, non-representative responses, and low ratings for all three Indicator 4 outcomes.

In FFY 2011, Wisconsin will be reducing the number of families asked to complete the ECO Family Outcomes survey. Next year, families of children participating in the Birth to 3 Program for less than six months will not participate in the completion of the ECO Family Outcome survey. Twenty-five percent (638 of 2575) of the respondents in FFY 2010 had participated in the Birth to 3 Program for less than six months at the time of completing the survey. Many of the families responded in the "comments" boxes Wisconsin added to the survey that they were not in the program long enough to answer the questions.

Improvement Activities/Timelines/Resources:

January 2008 - FACETS and GLITC were given lists of names via the Department with which to follow up. These lists were of families from the sample who have not completed the survey. This will improve sample returns during the next survey distribution and in the future.

Resources: FACETS, GLITC, NCRRC

2008 – DHS convened a review panel of parent advisors to determine any improvements that could make written materials about rights even more understandable. Resources: ICC, FACETS, DPI

2008-2009 – DHS updated materials to reflect the improvements suggested by the review panel of parent advisors.

2008-2009 – DHS developed a web cast of rights for families that can be used by local agencies and accessed directly by families. Resources: Department IT.

2008-2009 – DHS coordinated input from the ICC by incorporating family survey results into the current ICC outcomes, indicators, measurements, and recommendation process as described in the Overview of the State Performance Plan Development.

2008 – DHS provided a Teleconference to county programs on communicating with parents in an ongoing manner to help them understand their child's needs and how to share that information with others working with their child and family. Resources: Teleconference system and schedule, Department IT, speaker on communicating with parents.

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2009-2010 – DHS provided a Teleconference to county programs on transition that focuses on supporting counties in educating parents on how to share information about their child's disability with future providers such as the school district. Resources: Teleconference system and schedule, DPI, Department IT, parent advisors.

Ongoing – DHS is seeking guidance through Parent Forums hosted by the ICC to address greater support to families in the area of helping them be able to help their child develop and learn. Resources: Department representative, ICC representative, county request, facilitator.

Ongoing – The DHS contract with WPDP provides trainings for county staff on Family-Centered practices. Resource staff, through a DHS contract, provides ongoing technical assistance on an individualized basis to promote Family-Centered practices. Resources: contracts with WPDP and RESource, CESA.

Ongoing – DHS will use the annual Self-Assessment process to assess a county's results on meeting each of the indicators for this outcome. If a county does not meet the state target, they was provided technical assistance through RESource with documentation on the PIPP to support and monitor growth in this area. Resources: Department staff, RESource staff, PIPP process, ongoing survey distribution, technical assistance.

Part C State Performance Plan (SPP) for 2005-2012

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 5.

Monitoring Priority: Effective General Supervision Part C / Child Find Birth to One

<u>Indicator 5:</u> Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

A. Percent = # of infants and toddlers birth to one year with IFSPs divided by the population of infants and toddlers birth to one year times 100 compared to National data.

Overview of Issue/Description of System or Process:

In 2004, infants under age one represent more than one-half of the total growth in the Birth to 3 Program. This growth is primarily a result of the implementation of strategies recommended by the ICC and implemented jointly by DHS and county programs. In 2003 and 2004, the Birth to 3 Program partnered with Wisconsin Sound Beginnings and the Department of Public Instruction (DPI) Outreach Workgroup to develop the *Guide by Your Side Program*. Families who have an infant or toddler with a confirmed hearing loss are matched with a trained parent (guide) with a similar experience. The parent guide makes up to three visits with the new family to enhance the efforts of the Birth to 3 Program in introducing families to resources and options in intervention for children with hearing loss.

County Birth to 3 Programs work with state and regional hospitals that operate neonatal intensive care units (NICU) to connect families with early intervention services in their home county after their infant is discharged home, regardless of the distance from the hospital to home.

Beginning July 1, 2004 Child Protective Services (CPS) and the Birth to 3 Program responded to requirements of the Keeping Children and Families Safe Act of 2003. The requirement reads, ".... there <u>must</u> be provisions and procedures for referral of a child under age 3 who is involved in a <u>substantiated case</u> of child abuse or neglect to Early Intervention Services funded under Part C of the IDEA." Some County Birth to 3 Programs are managed by human services departments where close referral relationships already existed with CPS, and little change in implementing this requirement was needed. Other programs have developed written agreements to assure that appropriate referrals occur. Children identified by CPS as having developmental needs may also be referred by other sources before maltreatment is substantiated.

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Baseline Data for FFY 2004 (2004-2005):

On December 1, 2004, 1.12 percent of the children under age one in the Wisconsin population were served by the Birth to 3 Program, a 28 percent increase from the preceding year.

Discussion of Baseline Data:

The 28 percent increase in infants under the age of one in the Program over a one year time period is an indicator of the emphasis on the development of referral strategies for hearing impaired infants, NICU partnerships, and direct outreach to families and increased attention to relationships with Child Protective Services.

Percentage targets of children under age one participating in Wisconsin's Birth to 3 Program

FFY	Measurable and Rigorous Target
2005 (2005-2006)	1.13%
2006 (2006-2007)	1.14%
2007 (2007-2008)	1.15%
2008 (2008-2009)	1.16%
2009 (2009-2010)	1.17%

Improvement Activities/Timelines/Resources:

Since 2002 the ICC has reported on this indicator and has made recommendations to DHS for improvement such as the areas of NICU referrals and relationships with Child Protective Services (CPS).

Year 1, testing and implementation of the Birth to 3 Program elements of the Wisconsin Early Hearing Detection and Intervention Tracking and Referral Coordination system (WE-TRAC) database in the Wisconsin Sound Beginnings program began in pilot locations. The pilot was completed by June 2006. On-line training was available to programs and providers by December 2006. The database is designed to track a child following detection of hearing loss, reduce delays in follow-up, and to obtain appropriate services, supports, and equipment. The results were reported at the end of Year 1. The number of infants under age one with confirmed hearing loss served in the Birth to 3 Program accounted for the largest identified age group increase. WPDP provided statewide training in eligibility determination policies and practices and supported the eligibility process through the Birth to 3 Program training website.

Child count data for children under age one year was reported to county programs and to the local and State ICCs. Counties identified with less than 1 percent of children in this

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age group will confer with local advisory boards to determine strategies to assure referrals to the program. RESource provided technical support as needed. DHS promoted agreements between Birth to 3 Programs and NICU centers including those that are distant to the County Birth to 3 Program.

Year 2, DHS developed a collaborative system between local Birth to 3 Programs and CPS programs for referrals of infants affected by maternal substance abuse. DHS provided the state ICC updated child count data with descriptions of effective local strategies. The ICC I recommended best practices. WPDP and RESource provided technical assistance to counties serving less than 1 percent of the birth to one year old population. The number of infants under age one with confirmed hearing loss served in the Birth to 3 Program continued to account for the largest identified age group increase in Year 2.

Year 3, DHS updated public awareness materials to reflect the prior two year Findings of Non-Compliance in all areas that impact the referral of infants. DHS will report Year 2 strategies and progress to the ICC, counties, and local advisory councils. The ICC provided further direction to DHS based on county-specific and statewide trends.

In Years 4 through 8, DHS continued to report the previous year's child count data for children under the age of one year to local advisory boards, the state ICC and the public. DHS will respond to recommendations from the ICC for enhancement activities.

Revision and justification to reduce Wisconsin's target percentage of infants and toddlers birth to 1 with IFSPs is as follows.

FFY	Measurable and Rigorous Target
2010 (2010-2011)	.95%
2011 (2011-2012)	.96%
2012 (2012-2013	.97%

- During the past FFY the ICC discussed whether there was sufficient justification to reduce the birth to one target going forward. The findings of the committee's work does, in fact, justify a reduction of the current target of 1.18 percent to a baseline of .95 percent beginning in FFY 2010 and ending in FFY 2015 with a target of 0.99 percent. Therefore, beginning in FFY 2010 Wisconsin will implement a target reduction from 1.18 percent to .95 percent.
- Wisconsin has not met their target for indicator 5 (children Birth to 1 year) since the initial SPP target was established in 2004.
- The year in which Baseline was established (2004), proved to be an isolated event when compared to the next 5 subsequent years of Wisconsin's SPP. An exceptionally high rate (1.12 percent) of Wisconsin's children birth to age one were found eligible for Part C services in that year.

- Between the year prior to baseline, 2003, and the year baseline was established, 2004, there was an increase of 28 percent in children birth to one found eligible for Part C services. At the end of Wisconsin's 5 year SPP (2005-2010) it's evident the original target of 1.13 percent, with an annual increase of .01 percent was based on an artificially high and unrealistic target.
- The 2005-2010 SPP suggested the increase of 28 percent from the previous year was evidence of Wisconsin's successful implementation of state improvement activities the year prior. For example, some of the activities noted were increased efforts towards improving NICU partnerships, increased outreach activities targeting families and local communities, increased attention to developing and, in some cases, improving relationships among child protective agencies, and improving referral strategies, specifically for those children with early hearing loss. However, other state trainings and efforts towards policy clarification regarding eligibility during the same time period likely counteracted any realistic increase of eligible children birth to one. This and the improbability of a single year increase of 28 percent in child find made for the baseline target of 1.12 percent both unrealistic and unsustainable.
- While Wisconsin was establishing its birth to one target of 1.13 percent based on the prior year (2004) percentage of 1.12, nationally (50 states plus the District of Columbia) the average was .96 percent. For states using broad eligibility, as does Wisconsin, the average percentage of infants and toddlers being served in Part C programs was 1.03 percent. Overall, the majority of states have not met their targets over the four year period between 2006 and 2009.
- Wisconsin's Birth to 3 state staff and Technical Assistance network (RESource) have documented during annual Self-Assessments and periodic county reviews numerous child find efforts initiated and sponsored by local Birth to 3 programs. During the 2005-2010 SPP, child find efforts have included child care center outreach, attending pediatric conferences, mass mailings to a variety of potential referral sources, developing MOU's with CAPTA, face to face communication and mailings to local physician clinics, participation in community health fairs and local events and public transportation placards, etc. It's clear Wisconsin Birth to 3 Programs have established a variety of ongoing child find efforts and continually seek additional supports, materials and creative solutions to maintain child find efforts for children birth to one.

2005-2010 SPP

Wisconsin Percentage for Birth to one annual targets and actual

	Target	Actual
2005-2006 APR	1.13	.96
06-07	1.14	.95
07-08	1.15	.91
08-09	1.16	.86
09-10	1.17	.98

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- Increasing the identification of potentially eligible infants and young children is one of the byproducts of the many ongoing efforts of the Wisconsin's Early Childhood Collaborating Partners http://www.collaboratingpartners.com/ and its various subcommittees. An essential subcommittee of WECCP is the Healthy Children's committee whose overarching goal is to coordinate, inform, discuss, and strengthen efforts among state agencies serving young children in the areas of screening, assessments, and interrelated components such as Child Find. Agency representation for WECCP includes Head Start, Wisconsin Early Childhood Association, Wisconsin Alliance for Infant Mental Health, Child Care RESource and Referral Network, Parents Plus of Wisconsin, Wisconsin Department of Public Instruction, and many others.
- Other statewide initiatives affecting child find efforts include Research Topics of Interest (RTOIS), a three-year project involving work with Wisconsin family physicians to promote early identification of delays and timely referral to Birth to 3. Intended for doctors and general health care professionals to better understand early intervention and the use of developmental screening tools as part of well child check-ups.
- During much of the implementation of the 2005-2010 SPP data collection was done through the Human Service Reporting System (HSRS). A data collection system implemented in 1987 with limited data tracking elements such as name. birth date, sex, ethnicity, and client characteristics. HSRS prevented Birth to 3 programs from reviewing current data but instead provided each county program either a quarterly or annual report. This affected their ability to react to any changes or trends in a timely manner. However, with the introduction of Wisconsin's Program Participation System (PPS) in 2008 and the recent implementation of a PPS Data Mart, the program "Business Objects" will allow counties access to their own data and the ability to capture an almost limitless amount of data. This data is updated every week therefore counties may view up to date information or data archived years ago for comparison purposes. Once Business Objects is fully integrated County Birth to 3 Programs will have the ability to develop their own data queries including Child Find relevant information. For example, referral sources, age of referral, age of initial contact, number of referrals in a given time period, average age of child at initial IFSP, the number of referrals per source, etc. Designated County Birth to 3 program staff and/or administrative staff, state staff and TA (RESource) will have access to the data. Inquiries from an individual level to a regional or state level will be accessible and provide timely information in order to respond to any concerning data trends. With the elimination of HSRS and replacing Wisconsin's data system which contains current data, a web accessible system and the flexibility in regards to developing data queries with single to multiple criteria requests capability. The data queries referenced below are now available and updated on a weekly basis. The information illustrates that despite all the additional effort put forth by counties and the State Birth to 3 Program it appears children are not being referred until well after their first birthday. It's likely that these children were identified as having developmental concerns only after they should have been talking more than they were and therefore this became the first indication of a possible delay.

Data Points

Three Year Averages (2008-2011).

All information is based on state averages although county specific data is available and in some case individual agencies.

- Average <u>age</u> of child at initial IFSP
 20 months
- Average <u>age</u> of child at initial contact with family 19 months
- Avg. <u>days</u> between initial contact and initial IFSP 45 days
- Referral source and number of referrals to Birth to 3see below

Wisconsin Referral Sources (FFY 2010	Count
Tribal Health Center or Tribal CSHCN	29
Tribal School or Tribal Head Start Program	30
Audiologist	78
School District	149
Child Care Provider	199
Head Start Provider	200
Other health care provider	273
CAPTA Referral	301
Other county staff	365
County Social Services Agency	650
Public Health Agency	500
Other	825
Hospital or Specialty Clinic	1,844
Physician	5,751
Parent or relative**	7,642
Total	18,836

Data Source: PPS

total	51
mean	1.1217
median	0.97
mode	0.66
total	50
mean	1.05
median	0.96
mode	0.66
Excluding Hawaii (4.48)	

1-1-1

Source: U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS), OMB #1820-0557: "Infants and Toddlers Receiving Early Intervention Services in Accordance with Part C," 2008. Data updated as of July 15, 2008.

2005-2010 Wisconsin	5 years
Mean	0.93
Median	0.95
Mode	0.98

Based on the above graphs and explanations for the indicator 5 slippage Wisconsin is recommending lowering their Indicator 5 target from the 2005-2010 SPP baseline of 1.12 percent and the final SPP target year ending in 2010 of 1.18 percent. As seen in the above graphs the consistent average totals for both the nation (2008) and Wisconsin (2005-2010) range from .97 percent to .95 percent. Wisconsin will adjust their initial baseline target for the new 2010-2015 SPP to .95 percent with .01 increments per year and ending the 2010 SPP with a final target of 0.99 percent. It seems reasonable we begin with a baseline target that is within range of the national average (2008) and Wisconsin's 5 year average. It also appears practical and realistic to increase our target by.01 percent each year of the SPP in order to exceed both Wisconsin's final (actual) percentage of .95 percent and the nations average, Hawaii included, of .97 percent.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 6.

Monitoring Priority: Effective General Supervision Part C / Child Find Birth to Three

<u>Indicator 6:</u> Percent of infants and toddlers birth to three years with IFSPs compared to national data.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

A. Percent = # of infants and toddlers birth to three years with IFSPs divided by the population of infants and toddlers birth to three years times 100 compared to National data.

Overview of Issue/Description of System or Process:

Wisconsin has been identified as one of 24 states ranked as having a "Broad" definition of eligibility. The 2004 data from these 24 states displays a range of percentage of population served from 7.09% (Hawaii) to 1.28% (Alabama). The Wisconsin percent is 2.79 for 2004, which is near the mean of states with broad eligibility at 2.83 percent. The baseline for the nation as a whole in 2004 is 2.30 percent. Wisconsin has exceeded the national average each year and has also shown increases similar to the national trend.

The ICC recommended that the Birth to 3 Program should evaluate the potential for over and under identification of children on a county and statewide basis. This recommendation included consideration of factors such as limited English proficiency, poverty, race, and ethnicity. The Birth to 3 Program recently completed the work of the Eligibility Workgroup and presented the Guidelines to the state through a statewide videoconference. Over 300 persons participated in the conference which included a review of the requirements for evaluation and eligibility determination. The conference also provided new guidance for diagnosed conditions and additional information on evaluating a child's skills in developmental areas. The Guidelines are available in written format, as well as on the Birth to 3 Program website.

Baseline Data for FFY 2004 (2004-2005):

In 2004, 2.79 percent of the children age birth to three years in the Wisconsin population were served by the Birth to 3 Program.

Discussion of Baseline Data:

The following charts provide numbers of children served, percentage of children served based on Wisconsin's population, and increases over a three-year period.

Annual Child Count by Age of Child

	Birth to 1 year*	1 to 2 years*	2 to 3 years*	Total Child Count
2004	782	1644	3330	5756
2003	607	1554	3256	5417
2002	621	1625	3077	5323

II. Total Number and Percentage of Children Served Annually

	# children age birth to 3 years in the Program	% of the children age birth to 3 years in the population
2004	5756	2.79%
2003	5417	2.64%
2002	5323	2.54%

Percent of Children from Birth to Three Years Participating in Wisconsin's Birth to 3 Program

FFY	Measurable and Rigorous Target
2005	2.80 %
(2005-2006)	
2006	2.82%
(2006-2007)	
2007	2.83%
(2007-2008)	
2008	2.84%
(2008-2009)	
2009	2.84%
(2009-2010)	
2010	2.84%
(2010-2011)	
2011	2.84%
(2011-2012	
2012	2.84%
(2012-2013)	

Improvement Activities/Timelines/Resources:

Year 1, DHS provided all counties with quarterly reports providing the number and percentages of children in their program. Counties who serve less than 2 percent of the age group population will receive technical assistance to determine the reason for less children receiving services to increase their service numbers. DHS provided links to resources for obtaining promotional materials from other state programs, and collaborating partners in their area. RESource provided regional technical assistance Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

including facilitating communication with neighboring counties concerning shared local resources for identifying children. DHS reported Child Count and discuss local and statewide strategies and analysis of effectiveness to the ICC for review and recommendations.

Year 2, DHS collaborated with the Department of Public Instruction (DPI) to guide efforts for identifying and serving children who are homeless. DHS continued to report prior year's child count and analysis to the ICC, local programs and local advisory boards. This included an evaluation of early strategies for identifying and serving children who are homeless. DHS and RESource expanded collaboration with Children's Protective Services to assure identification of all children aged three years and under who are affected by substantiated maternal substance abuse.

Year 3, DHS developed guidance based on lessons learned from Year 2 including activities to assist local Birth to 3 Programs, in partnership with school districts and Head Start, in identifying and serving children who are homeless. DHS reported child count, analysis and expanded plans for identifying children who are affected by maternal substance abuse, or child abuse and neglect.

In Years 4 through 8, DHS has continued to report child count, analyze results, and promote best practices related to Child Find. DHS will disseminate information on best practices and provide technical assistance, as needed.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 7.

Monitoring Priority: Effective General Supervision Part C / 45 Day Timeline

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

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

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

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

Overview of Issue/Description of System or Process:

Wisconsin has regularly reviewed the timeliness of IFSPs during the DHS program review process. A new program review system began in July of 2002. In Wisconsin's FFY 2002 APR, DHS reported that three out of the seven counties reviewed in 2002 had issues relating to timeliness of the initial IFSP meeting. To address this issue on a statewide basis, the DHS added a required field on HSRS to enter the referral date for each child.

Baseline Data for FFY 2004 (2004-2005):

The baseline in the earlier SPP was based on parent survey results only. Based on HSRS data for 1/1/05-6/30/05, the baseline should be changed to 73.3 percent rather than 74.4 percent for the percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. The Referral Date became a required field in January 2006.

Discussion of Baseline Data:

DHS has significantly raised the profile and importance of this issue in Wisconsin. RESource staff are working with individual counties where issues persist. Referrals received between January 1, 2005 through September 30, 2005 showed that 77.8 percent of children had IFSP meetings within 45 days. DHS expects that the final 2005 data will show even greater improvement.

OSEP has requested additional data for two of the three counties initially noted in their response to Wisconsin's June, 2005 APR. County "A" had a total of nine children with Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

referral dates in 2005. Eight of the nine met the 45-day timeline. The one instance where the timeline was not met began as a referral on July 7, 2005. An early intervention (EI) team meeting was scheduled to be held on August 10, 2005, but the family could not attend. The parent gave notice the same day of the meeting that family members were ill. The service coordinator met with the family on August 22, 2005 to review results of the EI team meeting. No other B-3 staff were available so they couldn't hold the IFSP meeting at that time. The IFSP meeting was then held on September 6, 2005. The previous data for this county for all referrals in 2004 indicates that only five out of 13 families had IFSP meetings within 45 days, thus the county has demonstrated a significant improvement for 2005. Staff in county "A" now have implemented a process for monitoring the contract agency to ensure that the 45-day timeframe is met, a strategy that has been effective in improving this outcome.

County "C" has also shown improvement, but the current data continues to reflect timeliness issues from a substantial change in one contracted agency at the beginning of 2005. In 2004, 264 out of 412 (64 percent) families did not have the IFSP meeting within 45 days of the referral. For referrals through September, 2005, 90 out of 266 (33.8 percent) children did not have the IFSP meeting within 45 days of the referral. Of the 90, exceptional circumstances were documented for 40 children. Therefore a total of 81 percent were completed within 45 days or had exceptional circumstances documented. As noted in our August 2005 letter to OSEP, this county has two agencies providing services to children. One of these agencies became affiliated with a different organization at the end of December 2004. There was considerable staff turnover at that time, and there has recently been a change in the program coordinator position for that agency. There has also been a 37 percent increase in referrals in this county over the last three years. Therefore, staffing issues have had a significant impact on the timeliness of IFSP development.

State and RESource staff continue to meet with the county program coordinator and provider agency directors to address this issue. This was the second meeting with the county to determine the status of their corrective action plan and procedures. The county has developed a *Birth to 3 Case Status Report* that was used by both contracted agencies to enter date of referral and IFSP date for each child. The report also contains dates of contact with the family for scheduling evaluation activities and meetings. When the process is delayed, the form documents the reasons for the delay. The use of the *Status Report* has raised awareness of required timelines and expectations of timeliness among all staff.

When the timeline from referral to the IFSP meeting exceeds 45 days, each provider in County "C" submits a copy of this report to county program coordinator. This process began in both provider agencies in October 2005. The *Status Report* for delayed timelines is sent at least monthly by the programs and is tracked by the county coordinator. Each agency also provides a summary of the results to the County Birth to 3 Program director on a quarterly basis.

The provider programs in County "C" have eliminated scheduled breaks for training and other activities as further efforts to improve compliance with the 45-day timeline. This has increased the time that staff are available, particularly near scheduled holidays. RESource and state staff continue to provide further technical assistance to County "C".

Percent of Children with an IFSP within the 45-Day Timeline

FFY	Measurable and Rigorous Target
2005	100%
(2005-2006)	
2006	100%
(2006-2007)	
2007	100%
(2007-2008)	
2008	100%
(2008-2009)	
2009	100%
(2009-2010)	
2010	100%
(2010-2011)	
2011	100%
(2011-2012)	
2012	100%
(2012-2013)	

The target for 2006 was 100% of children with an IFSP completed within 45 days of the date of referral for evaluation. When the IFSP meeting is rescheduled or otherwise delayed beyond 45 days, there was documentation of the exceptional circumstance that prevented the timeline from being met. Counties with appropriate justifications for IFSP meetings (parent related) held after 45 days were considered as being in compliance.

Improvement Activities/Timelines/Resources FFY 2005-2012:

Year 1, RESource staff provided technical assistance and develops a PIPP goal related to the 45-day timeline for counties in which children do not have IFSP meetings within the 45-day timeline. RESource staff will support counties in developing a tracking system, work with counties to discover underlying causes for delays and develop a plan to remediate delays. An ICC workgroup will review and further define exceptional circumstances. County annual Self-Assessment data was reviewed with follow-up clarification for any county not meeting the target. RESource provided technical assistance and the development of plans to address problems throughout Year 1. Improvements in county practices were evident in the next annual Self-Assessment.

Year 2, the ICC, counties, and the public was provided with updated data from HSRS and from RESource file reviews to verify exceptional circumstances. Based on this information, the ICC will make recommendations for improvement efforts which were communicated to county programs through training and technical assistance.

Year 3 through 2012, the following improvement strategies will be implemented:

Local Determinations: Non-compliances were identified in early FFY 2007 as a part of data analysis in preparation for issuance of Local Determinations in October 2007, and required actions issued. This was more completely reported in the APR for FFY 2007 due in February of 2009.

System administration and monitoring: Wisconsin is improving system administration and monitoring to provide counties more opportunity to self-monitor in addition to their On-Site review by the State Birth to 3 Team. A Self-Assessment process was piloted in Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

FFY 2006 (2006-07) and implemented statewide in FFY 2007 (2007-08). Yearly each county will complete a Self-Assessment that is submitted to the State for review. As part of the Self-Assessment, each county program reviews and reports on their process to ensure timely evaluation and completion of the initial IFSP. A comprehensive file review of 10 percent of the children in each county identifies which children did not receive this initial evaluation and IFSP in a timely manner, and documents the specific reason. If the reason identifies a system or staffing issue, further evaluation of the necessary policy and system changes is required. Counties are also now required to track and document all reasons for any delay for all children referred to Birth to 3 for evaluation of eligibility. Counties must analyze and report these delays to the State quarterly, starting in FFY 2007.

Training and technical assistance: More targeted technical assistance is provided as State and local systems are examining current practices and strategies for improvement. Wisconsin's largest county is receiving additional technical assistance and monitoring oversight, with the Birth to 3 Program Supervisor providing direct support to this county. County administrative staff has met with the State Birth to 3 Team to examine more precise ways to provide monitoring oversight to the agencies that are contracted by those counties to provide birth to 3 services, and to tie upcoming contracts to compliance on these indicators. This county is required to provide monthly data analysis examining progress or slippage on this Indicator. The largest county in WI is monitored directly by the Birth to 3 Program Supervisor, and submits monthly analysis of data examining progress or slippage.

Web based data collection system: DHS is currently developing a new web based data collection system that will allow greater access to local reports and tracking of performance on indicators. This system was field tested in early 2008 and implemented in July 2008 with enhancements providing web based access to data for County Birth to 3 Programs scheduled for FFY 2012. A 'Federal Indicator Report' was developed through the data mart ability in Wisconsin's Program Participation System (PPS) to collect data on Indicator 7 in a timely and accurate manner without a lot of manpower to determine the compliance level, noncompliance level and errors that contribute to the compliance. This report was used to determine data for the 2010-2011 APR. In the future, Wisconsin will be updating the data mart ability to provide County Birth to 3 Programs more opportunities to self-monitor their compliance with Indicator 7.

Part C State Performance Plan (SPP) for 2005-2011

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 8.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

<u>Indicator 8:</u> 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:

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- 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, and prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services. (20 USC 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
 - Account for untimely transition conferences, including reasons for delays.

Overview of the State Performance Plan Development:

Wisconsin continues to participate in a range of training activities regarding transition for parents, early intervention providers, school districts and other partners that are designed to lead to improved transitions. The latest training effort is *Ready Set Go* that was first presented at regional meetings in April 2004, followed by a train-the-trainer workshop at Birth to 6 Leadership Meeting September 2004. Fifteen local trainings were initially conducted in 2004. The materials are available for ongoing trainings as well. These trainings are a partnership with schools, Birth to 3 Programs, and the Parent Projects. This material adds to the wealth of transition materials developed and made available to local programs.

Wisconsin is one of the states participating in the in National Early Childhood Transition Project. Families experiencing transition and their providers have been interviewed. The target group of children was tracked through kindergarten. Wisconsin DPI and DHS have collaboratively developed and shared the transition materials and guidance provided to school districts and Birth to 3 Programs.

Through 2004, data surrounding transitions was collected through parent and community partner survey and through county policy and procedure description surveys. The following chart includes the survey questions, type of survey respondents and positive response rate as a percentage of the total number of respondents. Annual survey results were compiled from those counties scheduled for an On-Site program review during the year. However, the review schedule was not based on an annual representative sample of counties, therefore variances among years may not demonstrate valid variations in response rates.

Indicator 8a: IFSPs with Transition Steps and Services

	2004	2003	2002
Families agreed that "their child's IFSP included	67%	84%	76%
information about leaving the Birth to 3			

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Program."			
Families report that "someone from the program	58%	55%	58%
has talked to use about services and resources			
available when my child turns three."			
Community partners report that "Birth to 3	77%	66%	64%
Program supports smooth transitions between			
programs.			

Indicators 8b and 8c: LEA Notification and Transition Conference

Former families who reported that they	70%	73%	75%
participated in a transition planning conference at			
least three months before our child turned three			
years of age.			

Baseline Data for FFY 2004 (2004-2005):

Indicator 8a: 67% based on the 2004 average responses to the three related questions.

Indicators 8b and 8c: 70% based on responses in 2004

Discussion of Baseline Data:

The percentages described above reflect the percent of families out of the total surveyed who had transition planning. There is no way to know from this data how many of the children whose families completed the survey were potentially eligible for Part B early childhood special education. Therefore, rather than using this survey data to respond to this measurement, DHS will utilize monitoring data.

Indicator 8b, notification to schools, is discussed at program reviews and 100 percent of counties reviewed thus far in the current four-year cycle have notified the LEAs. Some counties give the anticipated numbers twice each year, others at least once.

Wisconsin worked with OSEP to clarify the Letter to Elder provisions with respect to current practice and agreements. Once this is completed, then DHS worked with DPI to revise the Interagency Agreement related to this provision. This was followed by training for school districts and local Birth to 3 Programs. DHS is developing methods to assure that families are informed orally and in writing of their option to "opt out" of the LEA disclosure. This included an appropriate notation on each child's IFSP.

Beginning in January 2005 Wisconsin added a field to HSRS to collect the date of the transition planning conference. This is not a mandatory field, as children leaving prior to age three years may not have had nor needed this conference. This has resulted in incomplete data for 2005. Of the 1,506 children with exit codes indicating that the child was referred to Part B for an eligibility determination, only 412 (27 percent) contain transition planning conference dates. This is likely the result of new reporting forms in 2005 with an added field for the transition planning conference date. Some counties did not complete this new field. Counties were informed of their missing data. The DHS expects to have more complete data for CY 2005 by February 2006.

Transition Planning:

- 8A IFSPs with Transition Steps and Services
- **8B LEA Notification**
- 8C Transition Conference Held

FFY	Measurable and Rig	gorous Target
2005 (2005-2006)	Indicator 8A: 100% 100% Indicator 8C:	
2006 (2006-2007)	Indicator 8A: 100% 100% Indicator 8C:	
2007 (2007-2008)	Indicator 8A: 100% 100% Indicator 8C:	
2008 (2008-2009)	Indicator 8A: 100% 100% Indicator 8C:	
2009 (2009-2010)	Indicator 8A: 100% 100% Indicator 8C:	
2010 (2010-2011)	Indicator 8A: 100% 100% Indicator 8C:	
2011	Indicator 8A: 100%	
(2011-2012)		
2012	Indicator 8A: 100% 100% Indicator 8C:	
(2012-2013)		

Improvement Activities/Timelines/Resources:

Year 1, for indicator 8A, a stratified random sample of names was chosen by DHS for file review. This sample was stratified to ensure at least 33 percent of children are at least two years three months of age. If the file review indicates that IFSPs do not show transition steps and services for children exiting part C at age three years, a plan with specific strategies for improvement was implemented and monitored by RESource. IFSP trainings clarified that transition planning activities must be in the IFSP of children age two years three months and older. When calculating this indicator, the numerator was the number of IFSPs of children ages two years and three months or older which contained transition steps and services; the denominator was the number of children from this stratified sample.

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For indicator 8B, Wisconsin is received guidance from OSEP regarding the issue described under the discussion of baseline data. Children whose families exercised the "opt out" option were initially excluded from this measure. Therefore, the numerator was all children for whom LEA notification was completed, and the denominator was the number of children whose families did not exercise the "opt out" option. Please see current FFY 2009 APR for clarification of this measurement.

For indicator 8C, DHS included all children whose parents approved of a transition conference with the LEA. This will exclude families who exercised their "opt out" option as noted previously, as well as families who subsequently refused to approve a transition planning conference. The numerator was all transition conferences held at least ninety days before a child's third birthday, and the denominator was all children whose families agreed to this conference. This information was noted on each child's IFSP and transition planning conference date recorded on HSRS. This measure was reviewed in the children's records from the stratified random sample as noted previously and gathered data through record review during monitoring visits. DHS is follow up with counties based on PPS reporting concerns in an ongoing manner.

2005 HSRS data was analyzed. County specific data was compared to prior year's survey data and other available information from county site visits and RESource technical assistance activities. DHS will research reasons why counties may be outside the expected target, and DHS and RESource provided targeted technical assistance, if warranted. The information from reviews about the number of counties with at least one transition agreement with a school district was helpful in identifying areas that may need attention from DPI and RESource staff.

Year 2 through 2013: The following improvement strategies have been added to this revised SPP:

1. Transition Team:

In response to the analysis of data related to transition from 2005-2006, DPI and DHS created the Transition Team. Membership on this team includes leadership from both departments. One of the functions of this joint team is to review transition data and coordinate local improvement efforts. For example, determination letters from both departments encourage local programs to communicate and jointly plan improvement strategies. Both DPI and DHS have included expectations for their contracted training and technical assistance staff to include facilitating local interagency agreements and professional development on early childhood transition as a part of their on-going work.

Districts that did not meet the expected target of 100 percent for this indicator were required to submit a plan to improve their performance. These required plans included the district analysis of the reason for delays in the transition process, local strategies to correct timeliness, and requests for technical assistance. The Transition Team met to review and summarize these plans and to develop a coordinated approach to improvement activities.

Many districts have worked with their local Birth to 3 Program to take action to improve the transition process. These actions include the following:

Reviewing, revising, and committing to follow interagency agreements

- Improving referral processes such as making referrals at 120 days prior to the 3rd birthday, utilizing the electronic referral process, and assigning district staff to monitor referrals on a regular basis
- Working to support parents in making decisions about potential eligibility for services through the LEA and providing consent, developing better materials to inform and support parents and log parent contacts
- Providing teachers and other staff from Birth to 3 and early childhood special education more information about the transition process and their involvement in the process
- Conducting joint child find activities to further enhance the connection between programs and the sense of continuity for parents

The action plans contained requests for technical assistance either from state departments or regional technical assistance providers including the CESAs and the Birth to 3 Technical Assistance and Monitoring Project (RESource). These requests included the following:

- Facilitating interagency agreement development
- Clarify policy and practice including at the Transition Planning Conference, reporting transition data, clarifying IEP implementation, summer birthdays, late referrals, child moves during the eligibility determination process
- Utilizing the electronic data sharing systems
- Create an interpreter data warehouse to increase access to interpreters

Detailed information on the improvement activities designed by the Transition Team are described below. This team continued to monitor progress of transition data by examining data and analyzing strategies that result in improvement. The team is examining policies and practices that may improve the transition process. The team may also examine a process for an expedited eligibility determination process when a parent or Birth to 3 Program makes a late referral.

2. Monitoring and Self-Assessment

DHS requires that all Birth to 3 programs conduct an annual Self-Assessment, beginning in 2008. This Self-Assessment includes SPP data elements from a sample of 10 percent of the enrolled children. During the SPP cycle, all Birth to 3 Programs will receive a minimum of one On-Site visit, based on Self-Assessment or other data, additional On-Site visits can be scheduled at any time during the SPP cycle. Birth to 3 Programs are required to correct Findings of Non-Compliance as soon as possible, but no later than one year from identification. DHS verifies correction through the state PPS and desk audits.

3. Data Collection

Both DHS and DPI have made efforts to improve their existing data systems to capture more accurately the specific required elements of the transition indicators. Although these systems have significant limitations, they represent improvement over the capacity in previous years. DHS and DPI through their General Supervision Enhancement Grant (GSEG) have made great progress in developing a shared data system to capture more accurately transition information. This system will allow for encounter reporting through web access. The system is created by DHS under the leadership of a cross department technology and program workgroup. This system is built upon a transition tracking form that will enable the Birth to 3 Program to enter identifying information about a child that is Part C State Performance Plan: 2005-2012 (OMB NO: 1820-0578 / Expiration Date: 11/30/2012, Extended through FFY 2013)

preparing for transition, including dates of the Transition Planning Conference. This shared data system will inform the LEA that they will receive a referral for this child. As the LEA moves through the eligibility determination process, they will enter information regarding eligibility status and date of IEP implementation for children determined to be eligible. The system will generate both monitoring and summary reports for both DHS and DPI. This new system was field tested in spring of 2008 and implemented in July 2008.

A 'Federal Indicator Report' was developed through the data mart ability in Wisconsin's Program Participation System (PPS) to collect data on Indicator 8 in a timely and accurate manner without a lot of manpower to determine the compliance level, noncompliance level and errors that contribute to the compliance. In the future, Wisconsin will be updating the data mart ability to provide County Birth to 3 Programs more opportunities to self-monitor their compliance with Indicator 8.

4. Training and Technical Assistance

The Transition Team is also working to deliver common expectations regarding timely referral from Part C to B, participation of LEA in the transition planning conferences, IFSPs with transition steps, and LEA notification/referral. One of the strategies for creating these common expectations and understanding of IDEA 2004 requirements is through the network of training and technical assistance providers. This network includes the Birth to 3 RESource regional staff and early childhood program support teachers located in larger school districts and the CESAs. This network facilitates local meetings of Birth to 3 Programs, LEAs, and other community programs such as child care, tribes, and Head Start as they develop interagency agreements. This network also coordinates the delivery of the *Ready, Set, Go* trainings that are always presented by a team that includes representation from parents, Birth to 3 Programs, and LEAs.

5. Sanctions

The Departments are working collaboratively to address programs that are not complying with the requirements for creating a smooth transition for children. Data was monitored quarterly to determine that the process is followed and that children have IEPs implemented by their 3rd birthday, an outcome that is dependent upon LEA notification, transition planning, and the transition planning conference.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 9.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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Measurement:

- A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:
 - a. # of Findings of Non-Compliance of noncompliance made related to priority areas.
 - b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

Overview of Issue/Description of System or Process:

Monitoring Program: For each of Wisconsin's 72 counties, the local lead agencies for the Birth to 3 Program, is scheduled for a Program Review that includes a two-day visit by state level staff once in a four-year cycle. The process that has been applied for the current four-year cycle follows:

The Birth to 3 Program Review Process is designed to assess a county's Birth to 3 Program implementation of Part C of the Individual with Disabilities Education Act (IDEA), and HFS 90, the administrative code for Wisconsin's Early Intervention Program. The most recent cycle began in July of 2002. The Birth to 3 program also reviews the data from each county on all indicators once per year to ensure ongoing monitoring of compliance, by using its data system to determine compliance percentages.

The state review team includes staff from the DHS, staff from the RESource training and technical assistance project and when available the Human Services Area Administrator from the appropriate DHS Regional Office. Four months prior to the review, the state review team has a planning teleconference with local staff to plan the review.

Each county completes an overview of their local system by addressing thirteen programmatic and systemic questions, which are used to assist in completing the program review summary framework described below. In addition, the county submits a *Documentation Checklist* that requires the county program to review all current policies, contracts and other materials according to Ch. HS 90 requirements. The county also examines nine early intervention files, or 10 percent of enrollment, whichever larger, with a *File Review Checklist*.

Wisconsin's Birth to 3 Program Review Process includes a review of family surveys. All programs that have an On-Site review are required to submit current family survey results for inclusion in the review. When deemed appropriate and upon the request of the county; the state team interviews a minimum of three families as part of the On-Site review. The state team participates in a discussion with county administration, program coordinators, service coordinators, providers and the county community partners during the review. The information collected from these discussions provides a broad-based perspective about the county program.

All the information described above is synthesized in a summary framework through county and state team discussions. The framework intersects program areas such as evaluation, service delivery, and service coordination with aspects of the system that support the program areas, such as program planning, fiscal management, and human resources. A copy of the completed framework summarizing core Findings of Non-Compliance is provided to the county program at the close of the review.

Results are then summarized in a draft report that is sent to the county within two months of the On-Site review. This report includes an overview of the review process and specifics about the county, including strengths, suggestions for best practices and areas of concern. The county has an opportunity to review the report and make comments to DHS. Once comments are received, or within one month of the draft report, the report is finalized. The final report may be shared with interested parties and is accessible on the Birth to 3 Program website.

At the conclusion of the monitoring activities, Findings of Non-Compliance requiring corrective action by the county agency are identified, and confirmed with a final report within 60 days. The county and RESource staff begin to plan for the resolution of the program Findings of Non-Compliance in a Program in Partnership Plan (PIPP).

Baseline Data for FFY 2004 (2004-2005):

A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:

DHS uses the Birth to 3 Program Review Process to monitor whether procedural and quality aspects are in place in county early intervention programs. The focus is on the interplay of program areas such as evaluation, service delivery and service coordination with aspects of the system that support the program areas such program planning, fiscal management, and human resources.

The baseline in this area is limited. Discussion regarding compliance of the 45-day timeline is found in Indicator 7. In 2004, sixteen counties were reviewed and numerous strengths were noted in each county. Over 185 indicators of required practices are considered in the Program Review Process. The chart below shows the issues where standards were not met and corrections were required by two or more counties. There was only one federal indicator in this category, specifically, the Transition Planning Conference, as addressed in Indicator 8. The other concerns found in program reviews in 2004 were related to 1) procedural safeguards, including providing notice of parental rights and the content of written notices such as consents and invitations to meetings; 2) evaluation procedures; 3) IFSP content, including documentation of parent concerns and priorities; and 4) policies regarding early intervention records.

Birth to 3 Program Review Required Actions January 2004-December 2004

(16 Counties Reviewed)

Counties Must Assure:	Federal Indicator?	Number of Counties with Corrective Actions	Corrective Actions Completed
Notification of rights every time notice is given.		4	4
Parental consent to combine the early intervention records with another agency record.		2	2
Early intervention record policy includes policies for records generated and maintained by any provider.		4	4
Transition Planning Conferences are held at least 90 days before a child's third birthday.	Yes	3	3
An access log records all disclosures; identify who has access to record		4	4
A written invitation to IFSP reflects the activities: determination of eligibility and development of the IFSP.		7	7
Evaluations are conducted in all developmental areas.		5	5
Evaluation summary reports include summary of the five developmental areas.		2	2
Recommendations for services are not included on individual evaluator reports.		3	2
IFSPs reflect the precise frequency, intensity, and duration of services.		5	5
Family's concerns and priorities are included, with their approval, in the IFSP.		4	4
IFSP meetings are conducted when adding a service to the plan.		2	1
Consent to Evaluate forms inform about the purpose and procedures to be employed.		3	3
Consent to Evaluate forms include the title of evaluation team members.		2	2
Written invitation to IFSP meetings is used.		2	2
Consent for evaluation is obtained a reasonable time prior to the evaluation.		3	3

As noted in the chart above, only two counties have not sufficiently completed their corrective action plans, thus a 96 percent compliance rate was achieved. The DHS is continuing to monitor and provide technical assistance to counties remaining out of compliance. Each county has made substantial progress towards achieving the required action.

There were no complaints, due process hearings, or mediation agreements that required corrective action in 2003 and 2004. See Attachment 1.

The agreements resulting from mediations are confidential and are managed by the contracted agency. Wisconsin has no recent experience with corrective actions arising from other mechanisms such as complaints, and due process hearings.

Discussion of Baseline Data:

A. The percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification is 100 percent.

The above chart shows all areas for which corrective actions were required in previous federal fiscal years. Most of these sixteen issues reflect federal requirements; a few reflect Wisconsin Birth to 3 Program priorities. All counties reviewed in 2004 have completed corrective actions or continue to work toward reaching compliance. Ongoing progress for counties who have FFY 2007 or later non-compliances continue to be monitored and as appropriate a Corrective Action Plan may be developed.

Data concerning programs that do not correct non-compliances within one year and have ongoing non-compliances across fiscal years is currently under review. The ICC and state will re-evaluate this in an ongoing manner for updating future SPPs based upon

FFY2009 Data suggest significant progress in this area.

FFY	Measurable and Rigorous Target
2009 (2009-2010)	100%
Results	100%

Effective General Supervision:

9 – Non-compliance Correction Rate as soon as possible but no later than 12 months

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2006 (2006-2007)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2007 (2007-2008)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2008 (2008-2009)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2009 (2009-2010)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2010 (2010-2011)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2011 (2011-2012)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%
2012 (2012-2013)	Indicator 9a: 100% Indicator 9b: 100% Indicator 9c: 100%

Improvement Activities/Timelines/Resources:

Year 1, the Wisconsin Birth to 3 Program continued to implement a systemic approach to continuous quality improvement. This process included general supervision and monitoring strategies at both the local and state levels. The process is responsive to both the Wisconsin Birth to 3 Outcomes Framework and the OSEP State Performance Plan Indicators. The Birth to 3 Program is implemented by local county programs and their community providers and partners who provide local early intervention services. The local system is supported by RESource and WPDP. DHS staff participate in all aspects of general supervision and monitoring including regular communication with local programs, analysis of programmatic and fiscal data, support in planning and providing training and technical assistance, and leading the On-Site monitoring teams. The state ICC receives annual data and reports from all areas of the general supervision

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and monitoring activities and develops recommendations to DHS regarding the Birth to 3 Program based on this information.

Currently, the state team, contractual partners, and the ICC are revising the general supervision and monitoring process. This revision is based on multiple factors that include input from the statewide Birth to 3 Workgroup, surveys of local programs, OSEP requirements, and self-reflection on existing processes and creating the potential for continuous quality improvement. The revised process will support local programs in making data-based decisions by better gathering and utilizing data about management systems and program implementation. The new system included multiple strategies for gathering information and opportunities for local programs to make decisions about strategies that are most effective based on their unique configurations. Wisconsin is committed to maintaining a strong support and technical assistance system that guides local programs in making changes required for compliance and to enhance quality through program growth and development. Many of these quality features are related to local supervision and support to ensure that early intervention services are provided in the most efficient and effective manner possible. DHS will assure that there are organizational routines that maintain these approaches.

The general supervision and monitoring system contains four components that are interwoven to create the early intervention system:

Implementation: There are 14 elements that combine to create the early intervention systems and provide the organizational framework for delivery of services. They are all under the components of child and family service and supports, family and community partnerships, and management systems. The systemic perspective recognizes that for child and family services to be provided, there must be program administration, planning and Self-Assessment, communication, record-keeping and reporting, human resources, and fiscal resources. This approach also recognizes that unless management systems are a part of the solution for any identified problem or compliance issue, the problem will most likely reappear because there are not systems in place to maintain needed changes.

Technical Assistance: This process is woven throughout the early intervention system. The RESource project provides a regional specialist assigned to specific counties. The RESource specialist makes regular contact with local programs, responds to requests for information, links counties with similar questions or concerns, and provides a planned approach to individualized technical assistance. The RESource staff work with the county leadership team to develop a Program in Partnership Plan (PIPP) which identifies the areas within the 14 elements described above in need of improvement or assistance. This plan is updated on a regular basis and incorporates any recommendations following On-Site monitoring visits. The new approach developed by DHS has a strong focus on Self-Assessment. The PIPP was updated to reflect information gathered through this annual process.

<u>Self-Assessment:</u> Local programs were required to complete an annual Self-Assessment. This process was guided by the Birth to 3 Program Outcomes Framework. Counties were required to gather information to support each of the indicators. Outcome 6 which relates to the state system was revised to reflect local leadership and organization efforts. Counties will utilize several processes to gather information for the Self-Assessment including the following: surveys, interviews, and record reviews, observations, and data reports. The process will involve program coordinators, service

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coordinators, providers, families, and community partners including providers of Part B services. Local programs will have options for gathering information to respond to each indicator. For example, in smaller counties, they may choose to gather information from families through a focus group approach. Larger counties may choose to sample families using a survey approach. Counties was encouraged to use a Self-Assessment team that includes county staff, parents, and community partners in conducting the interviews or focus groups, reviewing files when possible due to confidentiality requirements, and reviewing data reports. Packets of materials provided to each county including: surveys, focus questions for interviews, file review checklists, overall program checklist, and others. The RESource staff worked with each county to develop a process that provides the required information and matches the uniqueness of the county. Counties prepared a report that provides data for each of the required indicators. This report was submitted to the state and regional Birth to 3 Program staff as well as RESource. The Self-Assessment process will build upon county efforts resulting from the previous review and ongoing PIPP process along with continuing local stakeholder input activities. It was designed to respect county workload and to facilitate internal quality improvement in addition to meeting state and federal requirements.

Monitoring: This was accomplished using many strategies and sources of information. Annually, local programs submit child counts and required elements on the Human Services Reporting System (HSRS). The second source of information was the annual Self-Assessment reports. A third source of information was data verification record reviews, as needed, to validate accuracy of reported data for specific indicators. Following the receipt and analysis of the combined information, there was a conference call or visit with RESource to discuss and to clarify the data. Based on this call, one of the following actions will ensue:

- The report is complete and data reveals that indicators are being met. The state team will review data each year and continue technical assistance and enhancement activities as described on the PIPP. Every four years there is a scheduled process to more extensively validate data through an On-Site visit.
 Data and strategies were validated by a team that includes state staff, RESource, and peers from other counties.
- If data indicates there are issues and a follow-up call confirms these concerns, the team gathered more data through other sources including targeted On-Site reviews by state staff, RESource and Human Services Area Coordinators to obtain more data.
- RESource will develop a PIPP to correct any noncompliance issues identified by the state team and report progress on corrective actions quarterly to the Department.

Year 2 through 8, the following improvement strategies are added to this revised SPP:

1. Regular Data Review and Analysis: In addition to the increased intensity of program monitoring through the Self-Assessment and the On-Site monitoring process, DHS will monitor programs through targeted data analysis and data verification. DHS provided quarterly reports to programs based on the current Human Services Reporting System. State staff and RESource staff will assist programs in analyzing the data and determining if they are maintaining compliance or reaching benchmarks. The State DHS will issue Findings of Non-Compliance of non-compliance as indicated through the data review, Self-Assessment, and/or On-Site review process. The corrective action plan was

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developed with the county program, state staff, and RESource utilizing the PIPP. The state team is sponsor to; at the minimum, quarterly "Data Discussion" Teleconferences allow local programs to receive information about the data collection process and to insure accuracy and consistency in the data collection process. These discussions emphasize the importance of compliance and timely correction of any non-compliance identified.

- 2. Development of web based data system: DHS is finalizing the development of the next generation of statewide data reporting system. This system was piloted in spring of 2008 and utilized statewide in July 2008. This new system will allow increased access to data at the local level, built in edits to improve accuracy of reporting, and more timely data reports to monitor progress regularly at both the state and local levels. The modifications providing valid and reliable data, as well as web access are scheduled for completion in FFY 2010.
- **3. Monitoring impact of improvement activities:** DHS will initiate an intensive review of their technical assistance and monitoring contract in preparation for competition for a new multi year contract. This process will allow for modification of contractual expectations and requirements based on data demonstrating most successful strategies in supporting local programs and state wide monitoring activities.
- **4. Partnership with Part B:** DHS and the Part B 619 staff from the Department of Public Instruction have put in place joint improvement activities, including a shared data system, to address compliance issues related to preschool transition. The Indicator 8 narrative thoroughly describes these activities.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 10.

Monitoring Priority: Effective General Supervision Part C / Complaint Timelines

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

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

Measurement:

Percent = (1.1(b) + 1.1(c)) divided by (1.1) times 100.

Overview of Issue/Description of System or Process:

As discussed in Indicator 4, the DHS has prepared informational documents for families that provide parent and child rights, as well as information about options for resolving disputes. All families receive Families are the Foundation of Wisconsin's Birth to 3 Program, which includes information about "How the Law Works for You," at intake visits. When consent for initial evaluations, IFSP services and other notices are provided, the families receive a statement of the Parent and Child Rights. In subsequent years, parents may receive the brochure Your Child and Family's Early Intervention Rights in lieu of the longer version, with notice that they may request the Parent and Child Rights at any time. Two additional brochures, Birth to 3 Mediation System and Options for Resolving Conflict are available for families at any time, but are often provided to families when there are concerns about their child's services.

Complaint Procedures for the Wisconsin Birth to 3 Program

The DHS accepts all written complaints. When a letter stating a potential complaint is received, the letter is forwarded to the Birth to 3 Program Coordinator and assigned to a complaint investigator. The letter is reviewed to determine if it meets the definition of a complaint and to identify the issue(s). If the letter is a complaint, the investigator prepares a letter to the complainant and the county agency administrator. The letter notifies them of the Department's receipt of the complaint; identifies the issue(s) defined in the complaint; describes the Department's responsibility to investigate the complaint; and lists any records or information needed.

When records arrive, the investigator reviews the records and then conducts any needed interviews. The investigator will complete an independent On-Site investigation, if necessary. The investigator reviews all relevant information and makes an independent determination whether the agency has violated the law. The investigator prepares the written decision with assistance from the Birth to 3 Coordinator, DHS, and the Office of Legal Counsel, as needed. The decision is made within 60 days of the receipt of the complaint.

The decision contains the following elements:

A statement of the issue(s) and the relevant state and federal requirements.

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- A discussion of relevant facts gathered during the investigation, and the sources of the facts.
- For each issue, a conclusion that addresses whether there is a violation and the reason for the conclusion.
- If there are violation(s), a directive that the agency submits, within 30 days of receipt of the decision, a corrective action plan (CAP) that describes how the agency will rectify the issues and the time period within which compliance was achieved.
- When there are no violations, the complaint decision states the case is closed.

Copies of the decision are distributed to the complainant, the County Birth to 3 Program administrators, the Birth to 3 Program Coordinator, and the DHS regional office contact. The Department may extend the 60-day time frame if exceptional circumstances exist, such as the investigation is hindered by the unavailability of necessary parties or information or the complaint investigation is held in abeyance. The complaint is closed when the agency submits documentation that it has complied with the directives in the complaint decision, or the decision states there are no violations. When an agency submits sufficient documentation of compliance with directives in that complaint decision, the Department prepares a closure letter.

During the Birth to 3 Program Review Process, surveys of parents ask about their understanding of their rights and the process for complaints about their early intervention services. These responses indicate that parents understand their rights and know whom to contact when there is a problem.

Parent Survey Responses Related to Rights

	2002 Strongly Agree/Agree	2003 Strongly Agree/Agree	2004 Strongly Agree/Agree
Current Parents			
I understand			
a. what rights my family has in the program.	98%	98%	97%
b. whom to tell if there is a problem or question about my child's services.	97%	98%	93%
Former Parents			
When my child was in the Birth to 3 Program, I understood			
a. what rights my family had in the program.	100%	97%	100%
b. whom to tell if there was a problem or question about my child's services.	100%	95%	94%

Baseline Data for FFY 2004 (2004-2005): DHS complaint history from 2000-2004

Year	Complaint Received?	Resolved in 60- day timeline?	Findings of Non- Compliance?
2000	Yes	Yes	Yes
2001	Yes	Yes	Yes
2002	Yes	Yes	Yes
2003	No	NA	NA
2004	Yes	Yes	No

Discussion of Baseline Data:

The Wisconsin Birth to 3 Program experiences few complaints from parents or others concerned that a program has violated the requirements of state and federal law related to early intervention. In the years since the beginning of the program in 1992, there has been no more than one complaint in a calendar year, with the majority having none. The DHS has prepared procedures for the handling of complaints. Except for one complaint where an outside investigator was used, the DHS uses a staff member to investigate the complaint and prepare the Findings of Non-Compliance. The investigator monitors the Corrective Action Plan if one is required.

Percent of Signed, Written Complaints Resolved within the 60-Day Timeline

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

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2011	100%
(2011-2012)	
2012	100%
(2012-2013)	

Improvement Activities/Timelines/Resources:

Year 1-6, DHS provided participants in the *Orientation to Best Practices* training information about procedural safeguards and intake procedures. RESource will monitor county program activities around procedural safeguards during program reviews. Review procedures, forms, and documentation. During random file reviews, RESource will check that proper notice is provided to parents and necessary consents are obtained.

Year 2, DHS worked to increase connections with FACETS, and the Native American Empowerment Center at GLITC and Wisconsin's Parent Training and Information Centers (PTI), to ensure that the staff and coordinators understand the Birth to 3 Program and are ready to serve families in the program.

DHS 8the Parent and Child Rights statement and related materials in compliance with final regulations for Part C. DHS will investigate the need for centrally translated materials versus local materials.

Year 3 through 8, DHS continues to provide training and strengthen connections to the PTIs. The stakeholders will review the Findings of Non-Compliance from dispute resolution sessions, file reviews, and parent surveys to provide further guidance and suggest improvement activities.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 11.

Monitoring Priority: Effective General Supervision Part C / Due Process Timelines

<u>Indicator 11:</u> Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

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

Measurement:

Percent = (3.2(a) + 3.2(b)) divided by (3.2) times 100.

Overview of Issue/Description of System or Process:

The Wisconsin Birth to 3 Program has an agreement with the Division of Hearings and Appeals (DHA) to serve as impartial decision-makers and conduct early intervention hearings. DHA conducts hearings for special education hearings through the DPI as well. The agreement was updated in September 2004.

The hearing officers at DHA were provided specific information about early intervention requirements, policies, and recent issues in early intervention case law. An *Early Intervention Hearing Handbook* has been developed, modeled after the one used by DPI.

When a request for a hearing is received by DHS, DHA is notified. Staff at DHA contact the parties and make the arrangements. The county administrative agency is responsible for the cost of the hearings.

Baseline Data for FFY 2004 (2004-2005):

DHA Hearing Requests

Year	Hearing Request Received?	Resolved in 45-day* timeline?
2000	No	
2001	Yes (2)	Withdrawn by parent(s)
2002	No	
2003	No	
2004	No	

^{*}Wisconsin currently uses the Part B timelines.

Discussion of Baseline Data:

Wisconsin has few requests for early intervention hearings. In the history if the program, only one hearing was conducted in 1998. This hearing was conducted by an impartial decision-maker selected by DHS. This was prior to the agreement with DHA.

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Wisconsin had adopted Part B requirements for procedural safeguards because of the longer timeline for hearing decisions and the opportunity to extend the timeline. Wisconsin intends to adopt Part C requirements with the FFY 2006 application. The DHA has expressed concerns about working within the shorter timeline, so the agreement was reviewed to assure compliance.

Percent of Fully Adjudicated Due Process Hearings within Required Timeline

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2011	100%
(2011-2013)	
2012	100%
(2012-2013)	

Improvement Activities/Timelines/Resources:

Year 1, DHS will revise Ch. HFS 90 to reflect Part C requirements rather than Part B requirements for procedural safeguards. DHS worked with DHA to implement procedures to assure that the shortened timeline can be met.

Years 2 and 3, DHS updated the Parent and Child Rights statement and related materials in compliance with final regulations for Part C.

DHS is increase connections with FACETS, the Native American Empowerment Center at GLITC, and Wisconsin's Parent Training and Information Centers (PTI), to ensure that

the staff and coordinators understand the Birth to 3 Program and are ready to serve families in the program.

Year 3, DHS provided training to DHA hearing officers about changes to Part C and other issues current to early intervention dispute resolution.

Years 1 through 8, DHS provides participants in the *Orientation to Best Practices* training information about procedural safeguards and intake procedures. RESource will monitor county program activities around procedural safeguards during the program review, along with review of county procedures, forms, and documentation. During random file reviews, RESource will check that proper notice is provided to parents and necessary consents are obtained. Annually, the ICC will review the Findings of Non-Compliance and timelines from any due process hearings and results from parent surveys to provide further guidance and suggest improvement activities.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 12.

Monitoring Priority: Effective General Supervision Part C / General Supervision / Hearing Requests Resolved by Resolution Sessions

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

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

Measurement:

Percent = 3.1(a) divided by (3.1) times 100.

Overview of Issue/Description of System or Process:

Wisconsin will use Part C requirements and will not use this process. We do encourage county programs to attempt to resolve disputes with parents at the local level, but remind counties and providers that any local procedures cannot take the place of State level early intervention procedures available to families.

Baseline Data for FFY 2004 (2004-2005): Not applicable.

Discussion of Baseline Data: Not applicable.

Percent of Hearings Resolved by Resolution Sessions

FFY	Measurable and Rigorous Target
2005 (2005-2006)	N/A
2006 (2006-2007)	N/A
2007 (2007-2008)	N/A
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010	100%

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(2010-2011)	
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Improvement Activities/Timelines/Resources:

In previous fiscal years DHS has not had any requests. However the increased effort to provide Written Prior Notice to families and ensure that procedural safe guards are followed has resulted in inquiries from parents. To date all inquiries and requests have been timely.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 13.

Monitoring Priority: Effective General Supervision Part C / General Supervision / Mediation Agreements

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

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

Measurement:

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by (2.1) times 100.

Overview of Issue/Description of System or Process:

The Wisconsin Birth to 3 Program has a contract with Burns Mediation Services, LLC, to provide mediation services to the Birth to 3 Program. DHS has chosen to have requests for mediation made directly to Burns Mediation Services LLC, to support both parents and county use of this resource for dispute resolution as a neutral arbitrator. Staff at Burns Mediation Services, LLC, contact both parties to determine their willingness to participate in mediation. Burns Mediation Services. LLC, assigns the mediator. If both parties agree with the assignment, the mediator contacts the parties to arrange the mediation session.

The contract with Burns Mediation Services, LLC, includes the cost of the ongoing mediation system. The payment of the mediator is through DHS directly. The contract is issued yearly. Burns Mediation Services, LLC, also maintains a website about the Birth to 3 Mediation System: www.wib3ms.us

A DHS staff person participates in the yearly training provided to the mediators. In addition, the Birth to 3 Program provides materials and resources about early intervention to the mediators.

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Baseline Data for FFY 2004 (2004-2005):

Requests for Mediation: 1998-2005

Date	Agreement?
December 1998	One party refused. Did not mediate.
November 1999	No. Several sessions held. Party
June 2001	Yes.
November 2002	Settled prior to session.
February 2003	Yes.
January 2005	Yes.

Note: there were no mediation requests in 2000 and 2004.

Discussion of Baseline Data:

Although Wisconsin has few experiences with mediation, the experiences have been positive. Of the four mediation sessions that were held over the past four years, only one did not result in an agreement. In this particular case, several sessions were held prior to ending the mediation.

Percent of Mediations that Result in Agreements

FFY	Measurable and Rigorous Target
2005 (2005-2006)	N/A (too few mediations)
2006 (2006-2007)	N/A
2007 (2007-2008)	N/A
2008 (2008-2009)	N/A
2009 (2009-2010)	100%
2010 (2010-2011)	100%
2010 (2010-2011)	100%
2011 (2011-2012)	100%
2012 (2012-2013)	100%

Since a low number of mediation sessions have been held, it is difficult to set yearly targets. Therefore, with stakeholder input we have set an internal goal that 75 percent of mediations over a four-year period will result in agreements. By 2010 Wisconsin expects that at least 80 percent will result in agreements. The Birth to 3 Program stakeholders cautioned that setting the expected rate of agreements too high may pressure participants to reach agreements.

Improvement Activities/Timelines/Resources:

Year 1, DHS revised Ch. HFS 90 to reflect Part C requirements, rather than Part B requirements for procedural safeguards.

Years 2 through 8, DHS increased connections with FACETS, the Native American Empowerment Center at GLITC, and Wisconsin's Parent Training and Information Centers, to ensure that the staff and coordinators understand the Birth to 3 Program and are ready to serve families in the program.

Year 5, DHS provided statewide training about mediation and other dispute resolution options via the teleconference.

Years 1 through 8, DHS provided participants in the *Orientation to Best Practices* training information about procedural safeguards and intake procedures. During random file reviews, RESource will check that proper notice is provided to parents and necessary consents are obtained. The ICC will review the number of agreements obtained through mediations to consider whether the goal should be revised and suggest activities to increase awareness and improve results.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

This information is provided under Indicator 1 with specific activities integrated into the overview for Indicator 14.

Monitoring Priority: Effective General Supervision Part C / General Supervision

<u>Indicator 14:</u> State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

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

Measurement:

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

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring accuracy).

Overview of Issue/Description of System or Process:

Child data is entered by the county into the PPS, a mainframe system that stores data at DHS. (Replacing HSRS) PPS is a reporting tool used to collect data on several social service and disability service programs operated by counties and funded by federal, state, and local funds.

For reporting purposes, a client is a child who has been found eligible for Birth to 3 Program services and has an Individualized Family Service Plan (IFSP) in place. Data must be entered on the Birth to 3 Module monthly for all children participating in the Birth to 3 Program. The data must accurately reflect current information about all children in the county system, active or closed.

All children who have IFSPs in place on October 1 must be entered. There is no requirement for monthly or semi-monthly reporting, although the option to use the system on a monthly basis is available to counties.

In addition to PPS reporting for the October 1 child count, counties also submit a written report that serves to verify the count data. In addition, the report gives the number of referrals in the calendar year and the number of screenings and evaluations completed that year. The number of children reported on PPS during the report generated October 1 is compared to the enrollment the county submitted. During the month of November, conflicts between PPS data and county enrollment, missing data, and duplicate reports are resolved by the Birth to 3 data manager and county staff. The reports of children enrolled on October 1, and all those served during the year, are run again at the end of December. The required reports are submitted to OSEP as soon as possible after the December reports are generated.

DHS prepares summary reports about the various data elements, such as child count, services and settings, and exiting data. Currently, these reports are shared in written and electronic formats.

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The Birth to 3 Program has been running reports more frequently during the year to share data with counties about specific issues, e.g., 45-day timelines. With more frequent reports to counties, DHS is able to improve data accuracy, as the county programs can correct elements, and attend more carefully to data that reflects required practices, such as reporting the date of the transition planning conference.

Baseline Data for FFY 2004 (2004-2005):

At the time that the baseline data was gathered reports were entered quarterly and the count was done on December 1. The child count data for December 2004 was submitted to OSEP on February 1, 2005. Other required child count data was submitted on September 16, 2005. This met required elements of accuracy and timeliness.

Wisconsin's Annual Performance Report (APR) covering the calendar years of 2003 and 2004 was submitted on May 25, 2005. This met the timeline for the extension of submission date granted by OSEP.

Discussion of Baseline Data:

Wisconsin has been consistently timely with reporting of required data, APRs and CIFMS reporting. Depending on the day of the week when the final child count reports are generated, our submission of data may be up to two days beyond the February 1 deadline. Implementation of the PPS system is providing an opportunity for implementation of the October 1 count and earlier analysis and reporting of data.

State Reported Data Are Timely and Accurate

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

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2011 (2011-2012)	100%
2012 (2011-2013)	100%

Improvement Activities/Timelines/Resources

Years 1 and 2, the Birth to 3 Program staff focused on the new data elements and reports related to those elements. These include the transition planning conference date and the start date for each early intervention service. DHS is able to generate reports about the 45-day timeline and the transition activities. This data was verified by RESource staff and during program reviews. DHS is using the teleconferences to provide needed training.

Wisconsin has submitted a GSEG proposal in collaboration with the DPI. The intent of the proposal is to move away from the mainframe system for reporting to one that will allow real time data entry in a web-based system. Summary data was shared with counties and other interested parties and a password protected system will allow user review of individual child data.

Year 2, **Modifications to the HSRS Data System:** The Human Services Reporting System (HSRS) is the DHS statewide mainframe data collection system. The HSRS enables DHS to track statewide and county status by analyzing patterns and progress or slippage in meeting targets for the indicators. To improve the infrastructure in Wisconsin DHS for collecting data, two primary actions have occurred. The first is to modify the current HSRS system within the parameters and limitations of the current system. The second is to commit to the development of a HSRS replacement system expected to be launched after July 1, 2008. DHS has prioritized the Birth to 3 Program for this Department wide initiative and funds from the General Supervision and Enhancement Grant (GSEG) awarded by OSEP to Wisconsin have been committed to this task.

HSRS Improvements: To improve the comprehensiveness and accuracy of data collection for reporting on indications, HSRS was revised to the extent possible within the current system. The revisions included new data elements and guidance for reporting the required data. The improved HSRS data collection system was implemented in April 2007 with a retroactive effective date of January 1, 2007. This includes the following:

Indicator 1: HSRS was adapted to capture not only the initial IFSP date and delivery of initial services, but also the date of any subsequent additions and start date of each additional service. This revision also included reason codes for any service that starts beyond the 30-day timeline.

Indicator 2: HSRS was modified to include a field to appropriately capture the service location code identifying "other settings," and to appropriately capture settings for the most recent IFSP.

Indicators 5 and 6: HSRS requirements Child count reporting is required quarterly, with an October 1 child count date (changed from December 1) with all entries due on October 31 of each year.

Indicator 7: HSRS clarified the definition of referral date for the beginning of the 45 day timeline.

Indicator 8: HSRS was modified to include transition planning conference dates and the reason(s) the transition planning conference did not occur. Revisions also included the updated codes for closing a Birth to 3 HSRS to clarify reasons for not referring a child to an LEA (i.e., parents did not give consent, not referred as the child perceived to not be eligible for preschool special education services.

These changes were communicated in a memo dated April 2007 effective for all children who entered and exited the Birth to 3 Program beginning January 1 2007. Because the HSRS system freezes all data input for the previous calendar year in March of each year, counties were unable to enter these new fields for children who had services added from July 1, 2006 through December 31, 2006. The memo was disseminated to all key local program contact administrators and training was provided at the spring and fall 2007 Regional Meetings and through a Teleconference on March 8, March 31, and September 17, 2007. In addition, a session on HSRS reporting was held at the November 30, 2007 Birth to 3 Leadership Event.

Years 3 through 8,

- Wisconsin Birth to 3 Leadership Conference: Quality Decision-Making: Using Data to Create Opportunities, November 29, 2007: The focus of this event was on data gathering and accountability as part of a quality improvement process. The emphasis of the event was to place the OSEP Indicators and other accountability activities in the context of program improvement based on data-driven decision making. Sharon Walsh, Walsh Taylor Inc., Government Relations, Council for Exceptional Children, Division of Early Childhood, and Infant Toddler Coordinators Association provided a national perspective on OSEP accountability demonstrating the implications for program improvement at the local level. Ann Bailey, North Central Regional Resource Center, demonstrated data-based decisions-making strategies using materials from the It Kit (developed by the NRRC). These plenary sessions were followed by interactive application sessions.
- New HSRS web-based application replacement completed available November 2008 no titled PPS
- Quarterly deadlines for PPS reporting was in place, with quarterly feedback to counties providing feedback on progress or slippage
- "Data Requirements" clarification memos was mailed to counties in January
- ♦ "Child Count/Child Find" analysis memos was sent to counties with requests to review and reflect on the data and local trends and unique demographics that might influence a county's improvement strategies
- ♦ Local Determinations was issued early in the spring, and tied to development of improvement strategies identified in each County's PIPP
- ♦ "Data Discussion" Teleconference available for counties

Revisions to the current process are under review in keeping with ongoing enhancement and development of the PPS system and its web based access.

In Year 7, FFY 2011, the following improvement strategies are added to this revised SPP:

1. Use of Data Mart with county Birth to 3 Program

In the second half of FFY 2011, Wisconsin began initial plans and initiation of training to provide County Birth to 3 Programs access to the Data Mart in order to monitor local program data and compliance with federal reporting indicators. Initial Data Mart training was provided in June, July, and August 2012; counties were encouraged to use the statewide reports for the federal compliance indicators to review and finalize their FFY 2011 data.

2. Part C regulation changes

A large focus in the second half of FFY 2011 was on implementation of Part C Regulation changes, with two statewide trainings provided prior to the end of FFY 2011 and additional training and technical assistance provided into FFY 2012.

3. Revised data entry deadline for county Birth to 3 Programs

In FFY 2011, the state Birth to 3 Program continued the requirement for counties to enter data for a given month by the 5th of the following month. This requirement was created to provide accurate, up to date data for ongoing monitoring of county performance. The DHS Birth to 3 Program adjusted this expectation in the fall of 2012 given county feedback about the time needed to enter data and effectively use the Data Mart to review and make any necessary edits to data entry in PPS. In December 2012, DHS communicated a change to the data entry policy to a deadline of the third Friday of each month. It is expected that this change will continue to increase the accuracy of data in PPS.

4. Year End Data Certification requirement

DHS implemented a Year End Certification process for counties to confirm their year-end data was final and accurate in order to assure complete data for the FFY 2011 APR.