

Missouri Part C

**Annual Performance Report
for
2005-2006**

Submitted February 1, 2007

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Part C State Annual Performance Report (APR) for 2005-06**Overview of the Annual Performance Report Development:**

The following is a brief description of the major changes in Missouri's Part C system, First Steps, over the past several years.

Missouri's Part C (First Steps) system underwent a major redesign beginning in 1998/1999 with implementation being phased in beginning in 2002. Previous to the redesign, service coordination and service provision was handled by Department of Health and Senior Services (DHSS) and Department of Mental Health (DMH) under agreement with the Department of Elementary and Secondary Education (DESE) as the lead agency. The redesign effort created 26 regional System Points of Entry (SPOEs) under contract with DESE to oversee the referral/intake/eligibility/initial Individualized Family Service Plan (IFSP) development. Independent and DMH service coordinators then handled ongoing service coordination after the initial IFSP was developed. Services to children and families are provided by a network of independent providers. A Central Finance Office (CFO) was contracted to handle payment to providers including independent service coordinators and to manage the child data system which contained primarily demographic, diagnosis, IFSP dates and IFSP service information.

- Phase 1, including five (5) SPOE regions covering St. Louis area and northwest corner of Missouri, was implemented on April 1, 2002
- Phase 2, including 21 SPOE regions covering remainder of state, was implemented on March 1, 2003

With implementation of the redesigned system, it became apparent that the independent service coordinator system did not function as had been envisioned by the redesign team. In addition, other system issues were identified which drove the lead agency to reevaluate the total SPOE operation and create necessary changes to address recognized issues. As the Phase 1 SPOE contracts came up for rebid, Phase 1 became, in effect, a pilot for implementation of a more comprehensive regional administrative organization, with a higher level of responsibility and oversight for the operation of the early intervention system. A critical element of the rebid of Phase 1 required the employment of service coordinators and the elimination of the independent service coordinator structure within the SPOE regions in Phase 1. Under this structure, the SPOE would employ enough service coordinators to provide service coordination for approximately 60% of the children in the region, with the remaining 40% of service coordination provided by the Department of Mental Health (DMH) under an interagency agreement. The Phase 1 pilot identified additional areas of concern from an operational standpoint that were incorporated into the rebid of the Phase 2 SPOE regions the following year. Impacting the rebid of the Phase 2 regions was the passage of legislation in 2005 which for the first time codified the state's early intervention program.

- Phase 1 rebid 7/1/2004. The original five Phase 1 SPOEs were reconfigured into three SPOE regions.
- Phase 2 rebid 2/1/2006. The original 21 Phase 2 SPOEs were reconfigured into seven SPOE regions.

Overarching information for this Annual Performance Report for the 2005-06 year follows:

New Phase 2 SPOE Regions and Contracts

As mentioned above, on February 1, 2006, the original 21 Phase 2 SPOE regions were reconfigured into seven geographically larger SPOE regions. With this final rebid/reconfiguration, the First Steps redesign system of 26 SPOE regions now incorporates ten SPOE regions. This configuration provides a more manageable number of SPOE contractors and better aligns the Part C service regions with the Department of Mental Health Regional Centers.

As a result of analysis of the Phase 1 pilot and state legislation, the following infrastructure and operating procedure changes were implemented with the award of new SPOE region contracts effective February 1, 2006. The changes include the following:

- An increased and more defined over-all administrative responsibility for activities necessary to operate the First Steps System at the regional level
- Greater provider oversight at the regional level in order to ensure compliance with state and federal regulations implementing Part C of the Individuals with Disabilities Education Act (IDEA)
- Joint training and coordination with the Department of Mental Health Regional Centers as interagency partners in the provision of service coordination
- The elimination of independent service coordination from all regions in the state in order to provide a more consistent and compliant approach to provision of services for children and families under Part C of IDEA
- A provision to allow SPOEs to hire or contract with providers who are not enrolled with the First Steps program in order to alleviate provider shortages
- A requirement that SPOEs establish evaluation teams to handle evaluations and assessments for eligibility determination and IFSP development purposes separating the evaluation process from the provision of services
- Performance standards applied to the SPOE region contract renewal process, including the following:
 1. Maintaining a target eligible child count within 1.7 – 2.0 % of the most recent census estimate
 2. Compliance with state and federal regulations implementing Part C of IDEA including 45-day timelines from referral to IFSP development, 6-month and annual IFSP reviews and timelines for transition from Part C to Part B (Early Childhood Special Education) of IDEA
 3. Correction of all non-compliance identified by the lead agency within 12 months of the date of the monitoring letter to the contractor
 4. A passing score on 90% of the files evaluated under the IFSP Quality Indicators Rating Scale (QIRS). NOTE: The IFSP Quality Indicators Rating Scale (QIRS) process was developed by lead agency staff in conjunction with nationally recognized early childhood experts to provide a “quality” evaluation instrument used to evaluate IFSPs
 5. Compliance with the requirement for an independent audit of the contractor’s Part C program at the end of each fiscal year
- Application of liquidated damages amounts to one half of one percent of the total amount of the annual contract renewal amount based on performance standards not met.

5-Component Model for Early Intervention in Natural Environments

Missouri is contracting for statewide technical assistance with Dr. Robin McWilliam, Director of the Center for Child Development at Vanderbilt Children’s Hospital. McWilliam offers a model for early intervention in natural environments that is based on the following five components:

1. Understanding the family ecology
2. Routines-based assessment
3. The primary service provider
4. Support-based home visits
5. Collaborative child care consultation

Each of these components has a specific practice that will get early interventionists well on their way to providing family-centered, functional services in natural environments. The associated practices are:

1. Developing an ecomap
2. Conducting a routines-based interview as part of IFSP development
3. Using transdisciplinary services
4. Focusing home visits on the provision of emotional, material, and informational support
5. Using integrated therapy or special instruction.

Therefore, the model attempts to provide children with as much intervention as possible without necessarily overloading the family with services.

Dr. McWilliam will conduct three (3) two-day workshops in the state during February and March 2007. These workshops will address routine-based early intervention planning, as well as, the use of transdisciplinary services. In an effort to provide on-going support and training to Missouri early

intervention providers on these concepts and practices, the state will work with Dr. McWilliam's group to prepare local trainers for regional follow-up activities.

This model is expected to impact the data for the SPP Indicators regarding early intervention services in natural environments (Indicators 1 through 4).

Web-based Data System

Realizing the limitations of the original child data system, the Division worked with the CFO to develop a web-based application. The new system collects virtually all information from referral to exit, including most eligibility and IFSP data. Previously, the software system was secondary to system operation and was primarily the tool to facilitate payment of providers. The new system was designed to help enforce compliance and is an integral piece of the Part C system. Implementation of the new web system began in summer 2005. SPOEs were instructed to convert all children to the new system unless the children would age out of the program by August 2006, so until that time, SPOEs were operating both the new web-based system and the old software. Since August, all active children are in the web system with none remaining in the old software. The Division has been working continuously with the CFO to make revisions to the system, both in response to legislative requirements and in response to requests from the field to make the system more flexible and user-friendly while maintaining compliance requirements.

Public Reporting of Data

The Division has developed a format for the public reporting of data by SPOE that covers all State Performance Plan (SPP) indicators. These reports will be posted on the Division's website by spring 2007.

Annual Performance Report (APR) Development

This APR for 2005-06 was developed by staff from the Division of Special Education. The proposed APR and updates to the State Performance Plan (SPP) were shared with the State Interagency Coordinating Council (SICC) in January 2007. Feedback from the SICC was incorporated into the SPP and APR prior to submission to the Office of Special Education Programs (OSEP). The SICC is certifying this Annual Performance Report as their annual report to the Governor and the Secretary of the U.S. Department of Education.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
2005-06	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner

Actual Target Data for 2005-06:

Children Receiving Timely IFSP Services 2005-06

Children Receiving All IFSP Services within 30 Days	1,391
Total Children Receiving IFSP Services	2,016
% of Children Receiving All IFSP Services within 30 Days	69.0%

“Children Receiving All IFSP Services within 30 Days” is determined by comparing the first date of service for each service type to the date of parental consent for the service. The date of parental consent is assumed to be equivalent to the IFSP meeting date. If one or more services on the child's IFSP were started more than 30 days after the meeting date or if the child received a 'No Provider Available' (NPA) authorization that was not then provided within the 30 days, the child is not counted as receiving all IFSP services within 30 days. In order to use a single, consistent database, children were only included if they were referred to the program after July 1, 2005. Services considered were those with first date of service between July 1, 2005, and June 30, 2006.

Due to the method of obtaining these data, it is unknown how many of the services not received in a timely fashion were due to family or parent reasons. Therefore, some children reported as not receiving all services within 30 days may be due to family or parent reasons.

DESE examined the data to account for the children who did not receive all services within 30 days, focusing on two main areas: the impact of NPA and the services/regions with the largest numbers of untimely services.

Of the 625 children receiving services who did not receive all services within 30 days, 67 of those (10.7%) were because of No Provider Available authorizations. Of these 67, 28 (41.8%) were Physical Therapy authorizations, and 25 (37.3%) were Speech Language Pathology authorizations.

The SPOE regions most affected by No Provider Available authorizations were the Southeast region (12 children deemed to have received untimely services due to an NPA authorization, 7 of which due to Physical Therapy), the Southwest region (12, 7 of which due to Physical Therapy), Greater Kansas City (12, 7 of which due to Speech), and the Central Region (10, 5 of which due to Physical Therapy). With

the exception of the Greater Kansas City SPOE, the others are largely rural areas where provider shortages have historically been an issue.

The 2,016 children included in this analysis had a total of 3,725 “first services” (excluding NPA authorizations) delivered during 2005-06, and 81.7% of these first services were delivered in a timely fashion. The four most prevalent services—Speech Language Pathology (84.7%), Special Instruction (81.9%), Physical Therapy (81.5%), and Occupational Therapy (79.5%)—were relatively close in overall timeliness; however the lower-incidence services—for example, Nursing Services (71.4%, 14 authorizations) and social work (63.6%, 11 authorizations) tended to come in lower.

Timely “first services” by SPOE ranged from 87.7% to 78.0%, showing that the percentages were fairly consistent across the state. All in all, while there are some variations, the data are fairly consistent across service types and regions.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

The data shows Missouri to be out of compliance with the requirement to provide timely services to infants and toddlers in the First Steps program; however, as noted above, the data does not take into account delays that were due to the child or parents since the data system does not currently collect that information. The narrative below describes the actions that DESE is taking to reach full compliance with this indicator. One improvement activity has been added to the SPP to better address this area; however, in general, the existing list of improvement activities continues to be appropriate and requires more time to impact change. The SPP was submitted in December 2005 at which time the 2005-06 year was almost half over. The activities implemented since December 2005 are most likely to impact 2006-07 data.

See Overview of APR regarding the 5-Component Model for Early Intervention in Natural Environments. A primary provider model should decrease the number of providers that work with a family, thereby making it more feasible to provide all identified services in a timely fashion.

See Overview of APR regarding the changes in SPOE contracts that were effective February 2006. The new contracts made all service coordination a responsibility of SPOEs or DMH, thereby providing oversight and support for the ongoing service coordinators. Also the new contracts allow for SPOEs to hire or contract with providers who are not enrolled in the First Steps program in order to get services to children when there may not be an available First Steps enrolled provider.

As noted above, there are often issues with getting services to children who live in rural areas that are not close to a large town. This is related to a lack of providers living in various rural areas of the state, and little incentive for providers to travel the distances to provide the services in the natural environment due to the rate structure and natural environment issues that tend to limit a provider’s ability to service more children. Transportation reimbursement has been a continuous discussion point with the SICC and providers for the past several years. A flat rate travel incentive was put in place March 2006, but only if a provider traveled more than 60 miles one way to a child’s home. Additional travel reimbursements are being considered for implementation in early in 2007. It is anticipated that this change will provide additional incentive for providers to travel to the natural environment and for non-system providers to consider participation in First Steps which should increase the number of children receiving services in a timely fashion.

The issue of the provision of timely services was to be reviewed during 2005-06 on a quarterly basis; however, due to implementation of the new web-based software in the fall of 2005 and the new SPOE contracts in February 2006, the database needed for such reviews was not available until fall 2006. Quarterly reviews beginning in 2007 will include a review of the provision of timely services on a regional basis and will be reviewed as a part of on-going monitoring reviews. Corrective actions will be ordered as necessary.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions were made to targets in the State Performance Plan. One improvement activity has been added to better address training for First Steps providers.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.
(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2005-06	95.0% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children

Actual Target Data for 2005-06:

Primary Setting for children under 3 years of age with active IFSPs	12/1/2003	%	12/1/2004	%	12/1/2005	%
Home	3,042	88.9%	3,126	90.7%	3,120	92.4%
Program Designed for Typically Developing Children	229	6.7%	212	6.2%	152	4.5%
Total		95.6%		96.9%		96.9%
Program Designed for Children with Developmental Delay or Disabilities	124	3.6%	78	2.3%	72	2.1%
Service Provider Location	10	0.3%	11	0.3%	7	0.2%
Hospital (Inpatient)	6	0.2%	16	0.5%	22	0.7%
Other Setting	12	0.4%	2	0.1%	2	0.1%
Residential Facility	0	0.0%	0	0.0%	1	0.0%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Data on service settings continue to be monitored by the Division. Providing services in the natural environment is a priority in the First Steps system, and its importance is understood by all staff working within the program. The data on location of services were reviewed throughout 2005-06 with the vast majority of services being provided in the natural environments. There are isolated areas of the state with higher than average use of special purpose centers, and consultants have been deployed to look into the situations when necessary. The web system requires a justification statement for every service authorized in a non-natural environment. These justifications are reviewed during the monitoring process, and noncompliance is rarely identified.

See the Overview of the APR for information on Dr. McWilliam’s model on early intervention services in natural environments.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

Per guidance from OSEP, the SPP reflects that targets have been set at 95.0% for each year since Missouri’s data has historically shown very high percentages of children primarily served in natural environments. No revisions to improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2005-06

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: See State Performance Plan

FFY	Measurable and Rigorous Target
2005-06	See State Performance Plan

Actual Target Data for 2005-06:

Not Applicable for the 2005-06 APR – See the Missouri State Performance Plan

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Not Applicable – See the Missouri State Performance Plan

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

Not Applicable – See the Missouri State Performance Plan

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2005-06	See State Performance Plan

Actual Target Data for 2005-06:

Not Applicable for the 2005-06 APR – See the Missouri State Performance Plan

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Not Applicable – See the Missouri State Performance Plan

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06

Not Applicable – See the Missouri State Performance Plan

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

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

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005-06	0.70% of infants and toddlers birth to 1 will have IFSPs

Actual Target Data for 2005-06:

Percent of Children Birth to Age 1 with IFSPs

	Dec-03	Dec-04	Dec-05
Child Count	465	514	547
Estimated Population	75,697	76,771	77,970
Missouri	0.61%	0.67%	0.71%

**States with Narrow* Eligibility Criteria and National Data (Excluding At Risk)
December 2005 Birth to 1 Child Count / 2005 Population Estimates**

MISSOURI	0.71%	Idaho	1.75%
National Data	0.95%	North Dakota	1.58%
		Oklahoma	1.35%
		Montana	1.33%
		District of Columbia	1.23%
		Connecticut	0.93%
		South Carolina	0.78%
		Oregon	0.74%
		Tennessee	0.73%
		Utah	0.66%
		Maine	0.65%
		Nebraska	0.64%
		Arizona	0.59%
		Georgia	0.48%
		Nevada	0.47%

Source: Data from [http:// www.rfcnetwork.org/content/view/248/358/](http://www.rfcnetwork.org/content/view/248/358/). Missouri data as of most recent submission to OSEP.

* Note that the narrow eligibility criteria group is used for comparison purposes. OSEP's groupings include Missouri in the Moderate category; however, Missouri's criteria of a 50% delay or diagnosed medical conditions should qualify the state to be in the Narrow category.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

The percentage of children birth to one has been increasing over the past several years in Missouri, and the target established for 2005-06 was met by the state. Both SPOEs and DESE look at referral data and eligibility rates by referral source on a quarterly basis. The SPOEs, along with their Regional Interagency Coordinating Councils (RICCs), are expected to use the information for child find planning purposes. Consultants, SPOEs and RICCs continue to meet with primary referral sources and train on the eligibility criteria for First Steps. The new SPOE contracts include a performance measure for the percent of the population served. SPOEs with less than the allowable percent could be assessed liquidated damages upon contract renewal.

The two RICCs in the St. Louis area, whose SPOEs account for approximately one third of the child count in the state, have agreed to partner on child find activities in the Greater St. Louis area. Joint activities have strengthened relationships between the two area SPOEs and local referral sources, particularly the hospitals and both private and public social service agencies. Activities include the following:

- Developed a Speakers Bureau that provides speakers to present First Steps information to targeted groups, such as NICU, childcare facilities, local private non-profit agencies that work with low-income or non-English speaking families
- Developed a Developmental Checklist Brochure to assist families in understanding the referral process and eligibility. This is distributed through city and county clinics, WIC Centers, adoption agencies and numerous other referral sources
- Developed a regional early intervention general information brochure to distribute throughout the city and county
- RICC Child Find Committee members staff informational booths at local malls or other events
- Child Find Committee members meet bi-monthly to review participation rates by zip code to determine in which areas to focus outreach efforts.

Some RICCs in rural areas are focusing on reaching populations in their most rural and remote counties. The mission statement for one rural RICC is "C.A.R.E. for Family Potential: Promote family potential by developing Collaborative Area Resources to Ensure that children with special needs are identified and their families can lead full and inclusive lives." The committee's goal is to target primary referrals sources that are not making referrals to First Steps and to receive referrals for a variety of children in each county.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions to targets have been made in the State Performance Plan.

A new improvement activity has been added to the SPP. The Division is contracting with a service research, evaluation and analysis firm to develop a statistical model which identifies and encompasses data-fed criteria in order to forecast the number of children eligible for Missouri First Steps. This model will utilize data on statewide, county and regional levels that includes the following variables: the latest population forecasts from state demographer's estimates, First Steps historical data, the Department of Health and Senior Services risk factor ratios, state eligibility criteria and advanced statistical forecasting.

A second improvement activity has been added as a result of discussions with the SICC. They feel that it is important to support the RICCs in child find activities, including, but not limited to making available public service announcements or public relations information that RICCs can use. Based on information gained through the statistical model described above, the Division will consider ways to assist SPOEs and RICCs in child find activities.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

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

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005-06	1.55% of infants and toddlers birth to 3 will have IFSPs

Actual Target Data for 2005-06:

Percent of Children Birth to Age 3 with IFSPs

	Dec-03	Dec-04	Dec-05
Child Count	3,423	3,445	3,376
Population Estimate	226,097	225,324	228,675
Missouri %	1.51%	1.53%	1.48%

**States with Narrow* Eligibility Criteria and National Data (Excluding At Risk)
Comparison of December 2005 Birth to 3 Child Count / 2005 Population Estimates**

MISSOURI	1.48%	Connecticut	3.16%
National Data	2.40%	North Dakota	3.02%
		Idaho	2.90%
		Maine	2.89%
		Montana	2.21%
		Oklahoma	2.03%
		South Carolina	1.87%
		Utah	1.87%
		Tennessee	1.80%
		Oregon	1.78%
		District of Columbia	1.68%
		Nebraska	1.67%
		Arizona	1.61%
		Nevada	1.36%
		Georgia	1.34%

Source: Data from [http:// www.rfcnetwork.org/content/view/248/358/](http://www.rfcnetwork.org/content/view/248/358/). Missouri data as of most recent submission to OSEP.

* Note that the narrow eligibility criteria group is used for comparison purposes. The information presented by OSEP's data includes Missouri in the Moderate group, however, Missouri's criteria of a 50% delay or diagnosed medical conditions should qualify the state to be in the Narrow group.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Missouri saw a decrease of 69 in the number of children served on December 1, 2005, and did not meet the target for 2005-06.

One potential reason for the lag in growth of the child count numbers is a drop in referral numbers starting in February 2005. In late January 2005, the Governor's recommended budget for the State of Missouri basically eliminated funding for the First Steps system creating statewide concern among all stakeholders as to the viability of the Part C Early Intervention system. Due to the efforts of various stakeholder groups, the budget for First Steps was eventually restored, but an apparent lack of confidence in the future of the program appears to have coincided with a steady drop in referral numbers.

For the period between February 2004 and January 2005, there were 5,666 referrals made to the First Steps program; 2,809 of those referrals led to a positive eligibility determination and IFSP, resulting in a 49.6% eligibility rate. Between February 2005 and January 2006, referrals dropped to 5,034, with 2,696 IFSPs resulting in a 53.6% eligibility rate. A large portion of this reduction in new referrals came in the month of February, shortly after the proposed budget reduction was announced. While the eligibility rate improved in this time span, suggesting that at least part of the lower referral numbers were due to better awareness of First Steps and its eligibility requirements, the overall number of referrals resulting in IFSPs dropped by 113 over this span of time.

The decrease in new IFSPs coincided with a rise in children leaving the program. From February 2004 to January 2005, there were a total of 3,073 children with IFSPs who exited the First Steps system. From February 2005 to January 2006, there were a total of 3,230 of children with IFSPs who exited, including an unusually large number of three year olds who exited in August 2005.

Beginning in February 2006, referral numbers began to rebound. From February 2006 to August 2006, there were 3,155 referrals to the First Steps program, in comparison to 2,950 from February 2005 to August 2005. In that same timeframe, overall exits dropped from 1,887 in February-August 2005 to 1,611 in February-August 2006. These changes coincide with the new Phase 2 SPOE contracts, and it is anticipated that the child find performance measure and SPOE/RICC responsibilities for child find will serve to locate all eligible children.

See Indicator 5 for additional information on child find activities.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions to targets have been made in the State Performance Plan. See Indicator 5 for information regarding new improvement activities.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2005-06	100.0% of eligible infants and toddlers with IFSPs will have an evaluation and assessment and an initial IFSP meeting conducted within Part C’s 45-day timelines

Actual Target Data for 2005-06:

2005-06 Referrals resulting in IFSPs

# IFSPs with acceptable timelines *	2,332
Total IFSPs	2,566
% with acceptable timelines	90.9%

* “Acceptable timelines” includes those evaluations and initial IFSP meetings completed within the 45-day timeline as well as those that went over 45 days due to parent or child reasons.

The following table shows the same data broken out by referrals prior to and after the February 1, 2006 SPOE contract change.

2005-06 Referrals resulting in IFSPs by time period

	% Acceptable Timelines for Referrals
Prior to Phase 2 contract change (July 1, 2005 – January 30, 2006)	87.7%
After Phase 2 contract change (February 1, 2006 – June 30, 2006)	95.4%
Total	90.9%

The following table provides detail on the reasons for exceeding the 45 day timeline. These reasons are required to be entered by service coordinators in the web system if a referral exceeds 45 days.

Reasons for Exceeding Timelines for Referrals from July 1, 2005, to June 30, 2006, Resulting in IFSPs	'Acceptable' Reasons	'Unacceptable' Reasons or No Reason Provided				Grand Total
	Parent/Child Delay	SPOE Delay	Provider Delay	Provider Availability Delay	No Reason	
Total	401	156	60	13	5	635
% of Total	63.1%	24.6%	9.4%	2.0%	0.8%	100.0%

A review of service coordinator case notes was conducted for a sampling of the “parent/child” reasons to determine if the reasons were documented and valid. All of the information reviewed showed that the delays were due to parent/child reasons, including hospitalizations, vacations, non-response from families, etc. In many cases, SPOEs or providers were also responsible for some of the delay; however, in all cases, the family played a significant role in the delay.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

See the Overview of the APR for information related to the change in SPOE contractors that occurred February 1, 2006. Prior to the effective date of the new SPOE contracts, data on 45 day timelines showed that 87.7% of referrals were handled within timelines from July 1, 2005 through January 30, 2006. After the new contracts were in place, data from February 1, 2006, through June 30, 2006, shows that 95.4% of referrals were handled within timelines. This indicates a marked increase subsequent to the issuance of the new SPOE contracts which include 45 day timelines as a contractual performance indicator that could impact contract renewal and trigger liquidated damages.

Four of the ten SPOEs had compliance rates less than 90% for 2005-06, but only one of those was under 90% under the new contract (since February 1, 2006). That region received a follow-up monitoring review, which included a review of 45 day timelines on May 11, 2006, with their report issued June 23, 2006. At that time, the region was found in compliance on all items reviewed. Most recent data for the SPOE (July 1 – October 1, 2006) shows that the SPOE had 94.3% of referrals completed within timelines.

DESE staff conducted compliance training in all SPOE regions after the new contract took effect. This training covered timelines and the referral, intake, evaluation and eligibility process. Data on 45-day timelines are evaluated on a regular basis and areas of concern are addressed by consultants. At the time of the annual contract review, SPOEs exhibiting noncompliance will receive a corrective action plan.

The new SPOE contracts have two provisions that are increasing compliance with referral timelines. The first is the requirement to establish evaluation teams. The intention is to have teams of providers available to conduct evaluations, rather than having to locate individual providers on an as-needed basis. The evaluation team requirement also separates the evaluation process from the provision of services. The second provision is a mileage reimbursement for evaluation team members in order to provide incentive to serve on evaluation teams. There is evidence in the state to suggest that where the teams are in place and functioning well, meeting 45-day timelines is not an issue.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions to improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 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 the (# 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.

FFY	Measurable and Rigorous Target
2005-06	100% of all children exiting Part C will receive timely transition planning by their third birthday

Actual Target Data for 2005-06:

	# of files reviewed	# in compliance	# out of compliance	% in compliance
A: IFSPs with transition steps and services	326	196	130	60.1%
B: Notification to LEA, if child potentially eligible for Part B	308	197	111	64.0%
C: Transition conference, if child potentially eligible for Part B	344	196	148	57.0%

Source – results of file review for Indicators 103600 (A), 103520 (B) and 103400 (C)

The data above summarizes the findings of file reviews that occurred during 2005-06. The reviews included initial monitoring reviews and follow-up reviews. In order to account for the noncompliance, the Division separated out the files reviewed into the last follow-up reviews conducted and all others. For example, if files from one SPOE were reviewed on two different occasions during the year (i.e. first for an initial review and then for a follow-up), the files from the last review were separated from the first. This data was then separated by SPOE, DMH and Independent (Ind.) service coordinators. The following table presents the levels of compliance for all files reviewed compared to files from the last follow-up for the various types of service coordinators.

Levels of compliance with transition requirements by service coordinator (SC) type

	Total (SPOE, Ind. and DMH) – all files reviewed	Total (SPOE, Ind. and DMH) - follow-up files reviewed	SPOE SCs - all files reviewed	SPOE follow-up files reviewed	Ind. SCs - all files reviewed	Ind. follow-up files reviewed	DMH SCs - all files reviewed	DMH follow-up files reviewed
A: IFSPs with transition steps and services	60.1%	94.0%	66.1%	94.5%	43.9%	100.0%	65.2%	91.4%
B: Notification to LEA, if child potentially eligible for Part B	64.0%	87.6%	70.8%	94.3%	45.2%	72.2%	68.7%	84.9%
C: Transition conference, if child potentially eligible for Part B	57.0%	79.3%	72.3%	96.7%	41.6%	80.0%	52.7%	63.1%

As displayed above, results of the latest follow-up reviews regarding transition showed that 94.5%, 94.3% and 96.7% of files for Indicators 8A, 8B and 8C, respectively, were found to be in compliance for SPOEs. In comparison, 100.0%, 72.2% and 80.0% of files for Independent Service Coordinators, and 91.4%, 84.9% and 63.1% of files for DMH service coordinators were found to be in compliance.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

The activities described below have resulted in clearing all noncompliance related to these indicators for all SPOEs and all but one DMH Regional Center as of January 31, 2007. See Indicator 9 for information on sanctions that have been imposed for the one DMH Regional Center with remaining noncompliance.

The continuing noncompliance of independent service coordinators represents the system prior to February 2006, and with the elimination of independent service coordination from the First Steps system, this issue no longer exists. Since the follow-up data for the SPOEs is very good and all SPOEs have been cleared of noncompliance with these indicators, this suggests that removing independent service coordinators from the system will serve to increase compliance with transition indicators significantly.

Significant changes regarding transition from the First Steps program came about with the new Phase I and 2 SPOE region contracts that were implemented beginning July 1, 2004, and continued in February 2006. See the Overview of the APR for more information. The new contract eliminated independent service coordinators from the First Steps program by requiring that the SPOEs employ all service coordinators other than those employed by the Department of Mental Health. Since the service coordinators are employees of the SPOEs, the SPOEs are able to provide a level of oversight that was not possible with the independent service coordinators. One of the performance standards incorporated

in the new contracts deals with holding timely meetings and specifically mentions transition meetings. This, combined with training and technical assistance discussed below, is bringing about positive changes in regard to transition requirements. Issues related to timely transition meetings continue for DMH service coordination; however, under the new SPOE contracts, training and collaboration between the SPOEs and DMH has strengthened.

First Steps Consultants conducted statewide technical assistance training for transition in March and April 2006. A total of 15 workshops were held. The table below shows the numbers of participants that attended the workshops.

Transition Workshop Participants	Number of Participants
Early Childhood Special Education	268
Parents as Teachers	78
SPOE	79
Department of Mental Health	52
Other	51
Total	528

*Other included Regional Professional Development Center staff, Missouri Parent Act, Providers, etc.

Recognizing that the statewide training was not enough to fully address the issue of appropriate transition planning, additional work was conducted at the SPOE level by both DESE staff and First Steps consultants. This work includes in-services with the SPOEs specifically targeted on transition, and QIRS trainings and reviews which include a review of the transition section of IFSPs.

In addition, Missouri is using State Improvement Grant (SIG) funds to develop and implement a more comprehensive Transition Module addressing the Part C requirements as well as the significance to early childhood special education under Part B. The module is expected to be completed in early 2007, with training delivery to begin in spring 2007.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

The State Performance Plan submitted in December 2005 had the following improvement activity: Use State Improvement Grant (SIG) funds to assist SPOEs/LEAs in creating Improvement Plans addressing transition issues. Due to the contractual restrictions, the Division was not able to flow additional funds to the SPOEs for improvement planning purposes. Therefore, this activity is being removed from the SPP, and will be replaced with the use of SIG funds to develop and implement the new transition module mentioned above.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:
 Percent of noncompliance corrected within one year of identification:
 a. # of findings of noncompliance
 b. # of corrections completed as soon as possible but in no case later than one year from identification.
 Percent = [(b) divided by (a)] times 100.
 For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2005-06	100% of noncompliance will be corrected as soon as possible but in no case later than one year from identification

Actual Target Data for 2005-06:

SPP Indicator	# SPOE/ Agencies Reviewed 2004-05	# SPOE/ Agencies with Findings 2004-05	# Findings in SPOE/ Agencies 2004-05	# Corrected within 1 Year	% Corrected within 1 Year
El services in natural environments	5	2	2	2	100.0%
Family Impact	5	4	4	4	100.0%
45 day timelines	2	2	2	2	100.0%
Transition	5	4	10	9	90.0%
Referral Process	2	1	1	1	100.0%
Evaluation/Assess Procedures	2	2	4	4	100.0%
IFSP	5	5	12	11	91.7%
Child Complaint Allegations			9	9	100.0%
Total			44	42	95.5%

Monitoring data for 2004-05 are from two SPOEs and 3 DMH Regional Centers. Initial reports were issued in 2004-05 with subsequent correction of noncompliance required within 12 months of the report date.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

The data above shows that all but two findings of noncompliance were corrected within one year. One of the two has since been cleared while the other has not yet been corrected. The remaining noncompliance is attributed to a DMH Regional Center. The Division is implementing enforcement actions with this Regional Center which include required training on transition procedures and submission of mandatory monthly data reports to DESE on the status of upcoming transition meetings.

Missouri awarded a contract for the development of a web-based general supervision system for both Part C and Part B in June 2006. Work began with the contractor immediately following the issuance of the contract, and as of December 2006, a large part of the Part B monitoring system has been developed. In early 2007, development work will begin on the Part C components which will include the SPOE Quarterly Reports, QIRS reviews/data and compliance file reviews and corrective action plans. The system will send regular reminders to SPOEs, DMH and DESE regarding the status of noncompliance that has not yet been cleared in order to ensure correction within one year.

Throughout 2005-06, consultants were deployed to SPOEs to target areas of potential noncompliance in order to gather information and provide technical assistance as needed, to help ensure that SPOE staff was informed about and operating under compliant procedures.

See the Overview of the APR regarding the new Phase 2 SPOE regions and contracts. As discussed in other SPP/APR indicators, this change has led to many positive improvements in terms of compliance, both in correction of noncompliance and in maintaining compliance through making SPOEs contractually responsible for more aspects of the system.

Missouri is continuing to refine and implement its system for general supervision as described in the State Performance Plan. Modifications to or additional information for the description in the SPP follow:

- **Systemic Non-Compliance:** Systemic non-compliance will be generally defined as less than 90% compliance on any indicator based on a percentage of the sampled files reviewed. This change from 80% to 90% will take effect for initial monitoring reviews beginning in 2006-07.
- The SPP indicated that a three-year cycle would be used for compliance monitoring purposes; however, DESE will utilize a combination of timelines for monitoring purposes. First, several data elements are reviewed on a quarterly basis. Many of these are performance measures that are built into the new SPOE contracts and will be examined through data and the SPOE Quarterly Reports. Areas of concern will be addressed by the First Steps consultants through technical assistance and training. Second, on an annual basis, contract performance measures will be evaluated for contract renewal purposes. Compliance concerns identified through the annual data reviews will result in CAPs. Third, on a biennial basis, SPOEs will receive a review that will include onsite and/or desk reviews of early intervention records and interviews. Identified noncompliance will result in the issuance of CAPs. The focus of the biennial reviews for each SPOE will be determined by synthesizing all available information, including statewide systemic issues, results of QIRS reviews, quarterly/annual performance data reviews, child complaint allegations, etc.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

The SPP contained an improvement activity regarding the development of a self-assessment process for SPOEs. This improvement activity is being removed since the existing SPOE Quarterly Report process is essentially an on-going self-assessment process, and no additional process is necessary.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / General Supervision

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.

FFY	Measurable and Rigorous Target
2005-06	100% of signed written complaints with reports issued will be resolved within 60-day timeline or a timeline extended for exceptional circumstances

Actual Target Data for 2005-06:

During 2005-06, nineteen (19) child complaints were filed, all of which were investigated. All decisions were issued within 60 calendar days or within extended timelines.

Complaints with reports issued in 2005-06	19
Reports within timelines	14
Reports within extended timelines	5
Percent issued within 60 day or extended timelines	100%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

DESE continues to use a database to record and monitor the timelines for issuance of child complaints. Reports are monitored to ensure that reports are issued within 60 days or, if not possible due to the nature of the complaint, appropriate extensions are made when necessary.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 11: 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.

FFY	Measurable and Rigorous Target
2005-06	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline

Actual Target Data for 2005-06:

During 2005-06, one due process hearing request was received. The request was dismissed, so no hearings were fully adjudicated.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

DESE continues to use a database to record and monitor the timelines for due process hearing requests. Missouri uses a 30-day timeline which does not provide for extensions.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY	Measurable and Rigorous Target
2005-06	Missouri did not adopt Part B due process procedures for Part C.

Actual Target Data for 2005-06:

Not applicable

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Not applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

Not applicable

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

FFY	Measurable and Rigorous Target
2005-06	Not set due to lack of baseline data

Actual Target Data for 2005-06:

There were no mediations requests during 2005-06.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Not applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2005-06

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2005-06	100% of State reported data will be timely and accurate

Actual Target Data for 2005-06:

All 618 data and required reports have been submitted on or before the due dates.

OSEP data reports, as well as data submitted in the SPP/APR are accurate as evidenced by the verification efforts described below, the most important efforts being the source document reviews during on-site monitoring, publication of the data and investigation of questionable data. The Division has submitted amendments to federal reports, largely due to the availability of more comprehensive and up-to-date databases as well as resolution of some of the issues described below.

Timely Data	100.0%
Accurate Data	91.0%
Timely and Accurate Data	93.0%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005-06:

Missouri implemented the new web-based child data system in the summer of 2005. This system captures virtually every data element in the Part C system and contains information from referral, eligibility determination and IFSP development. The system is compliance-driven; it requires critical data items and conducts edit checks on data to help ensure accuracy. The new system supplies a large amount of data that can be reviewed at the SPOE and state levels for program evaluation and monitoring purposes.

Since implementation of the web system, the Division has been working continuously with the CFO to make revisions to the system, both in response to legislative requirements and in response to requests from the field to make the system more flexible and user-friendly while maintaining compliance requirements.

As the web-based system has been implemented, the Division has been learning the underlying databases. Throughout the year, data reports have been shared with SPOEs, the SICC and posted on the web. There have been concerns raised regarding the accuracy of data reports by SPOEs and the

SICC. These concerns were researched, and were generally found to arise from one or more of the following:

- Timing differences for the pulling and reporting of data. The database used by the Division would be anywhere from one day to several weeks old, and therefore data would not always correspond to SPOE level data that was updated on a real-time basis. These differences were not found to impact the accuracy of the data.
- Delays in entering data in the web-system. Some concerns with accurate data were traced back to a delay in data entry. Data that were not entered into the system at the time of the data being pulled could not be reflected in reports. Since timely and accurate data entry are essential to the system and to children receiving services in a timely manner, this need is continuously stressed to SPOEs and service coordinators.
- Definitional differences for the pulling and reporting of data. Given the extensive nature of the data collected, there are multiple ways to count “active” children, i.e. active IFSPs, active referrals, active children in system, etc. Often, concerns about accuracy of data were related to comparing data that were not defined the same way. Upon resolving differences in definitions and parameters, these were not found to impact the accuracy of the data.
- Inaccurate or inconsistent data entry. Again, given the extensive nature of the data collected, data entry mistakes or inconsistencies are to be expected. These have been found to be the cause of some issues with data reports, and when identified, have been addressed in order to prevent the problem in the future.

In fall 2006, the Division began a targeted effort to confirm data items with the SPOEs in order to verify that the data being reported was indeed accurate. This process involved comparing two lists: 1) children with active IFSPs by SPOE for a given date from the database used by the Division, and 2) children with active IFSPs for that SPOE from the online data system. The lists were compared, and the Division identified children on one list but not on the other. Once these children were identified, an explanation for the discrepancy was sought. In almost all instances, the discrepancy was due to simple timing issues—the First Steps database could be up to a few weeks old, while the online data system is updated instantaneously. Any other issues discovered in this process (i.e. incorrectly-marked duplicate records, an incorrectly-entered inactivation, incorrect county of residence, etc.) were remedied. In some cases, guidance was sent out in regard to correct entry of data.

It should be noted that the concerns regarding accuracy of data reports were primarily at the SPOE level, and as the above issues were identified and accounted for, it was evident that very few of the concerns impacted the state level data reported to OSEP in federal reports or annual performance reports. It is the Division’s view that the data pulled from the First Steps database and used for state reporting purposes is highly accurate.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005-06:

No revisions have been made in the State Performance Plan.

U.S. DEPARTMENT OF EDUCATION
 OFFICE OF SPECIAL EDUCATION
 AND REHABILITATIVE SERVICES
 OFFICE OF SPECIAL EDUCATION
 PROGRAMS

TABLE 4
 REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE
 INDIVIDUALS WITH DISABILITIES EDUCATION ACT
 2005-06

PAGE 1 OF 1
 OMB NO.: 1820-NEW
 FORM EXPIRES: 8/31/20XX
 STATE: MISSOURI

SECTION A: Written, signed complaints	
(1) Written, signed complaints total	19
(1.1) Complaints with reports issued	19
(a) Reports with findings	6
(b) Reports within timeline	14
(c) Reports within extended timelines	5
(1.2) Complaints withdrawn or dismissed	0
(1.3) Complaints pending	0
(a) Complaints pending a due process hearing	0
SECTION B: Mediation requests	
(2) Mediation requests total	0
(2.1) Mediations	
(a) Mediations related to due process	0
(i) Mediation agreements	0
(b) Mediations not related to due process	0
(i) Mediation agreements	0
(2.2) Mediations not held (including pending)	0
SECTION C: Hearing requests	
(3) Hearing requests total	1
(3.1) Resolution meetings (For States adopted Part B Procedures)	0
(a) Settlement agreements	0
(3.2) Hearings (fully adjudicated) (For all states)	0
(a) Decisions within timeline 30 day Part C	0
(b) Decisions within extended timeline (only applicable if using Part B due process hearing procedures).	0
(3.3) Resolved without a hearing	1