



Part C
State Performance Plan and
Annual Performance Report
July 1, 2013 to June 30, 2014

Submitted by

Louisiana
Department of Health & Hospitals
Office for Citizens with Developmental Disabilities

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Executive Summary

State Performance Plan - Annual Performance Report April 16, 2015,

Annual Reporting to the US Department of Education, Office for Special Education Programs

The Individuals with Disabilities Education Improvement Act (IDEA) requires that each state develops a State Performance Plan (SPP) which details the state's implementation of IDEA. Following the development of the Plan, the state reports its progress toward implementing the Plan in its Annual Performance Report (APR) submitted to the Office for Special Education Programs (OSEP) in February each year. This year marks the beginning of the next SPP cycle for 2013-2018. Since the release of the final SPP requirements in Spring, 2014, the lead agency staff, the SICC, and stakeholders have been working on the development of the new SPP. These activities have included reviewing data from the last SPP cycle, reviewing requirements for the new period, setting targets for performance indicators and developing the newest component of the SPP, the State Systemic Improvement Plan or SSIP. This summary outlines this effort and provides an overview of performance results for the portion of the APR which submitted February, 2, 2015. The SSIP portion of the report was submitted April 1, 2015. The complete APR is distributed to SICC members and stakeholders and posted to the website at <http://www.earlysteps.dhh.louisiana.gov>. Following its review of the APR, OSEP will issue each state's *determination* of the SPP and the performance results. For the past 4 years, Louisiana has achieved the highest possible determination for its performance: **Meets Requirements**.

Overview of the Annual Performance Report Development:

The Louisiana State Performance Plan (SPP) and Annual Performance Report (APR) are developed with broad stakeholder input. Since the passage of the legislation for the early intervention system, the development of the program components in Louisiana has been conducted through stakeholder input and committee recommendations from the State Interagency Coordinating Council (SICC). These families, stakeholders and SICC members were also involved in the development and updating of the State Performance Plan in 2005 and 2011 and the Annual Performance reports for FFY 2005 through last year. Committees were formed which included these members, EarlySteps central office staff, regional coordinators, regional quality assurance specialists, and regional EarlySteps Community Outreach Specialists/Parent Liaisons. In addition, central office and regional staff participated in technical assistance telephone conference calls provided by OSEP, the Early Childhood Outcomes conferences and the OSEP leadership conferences. EarlySteps central office staff also participated in technical assistance calls, review of materials, technical assistance meetings, webinars and streaming of live events with the Early Childhood Technical Assistance Center and Southeast Regional Resource Center, and OSEP.

Data for reporting performance was collected through the following procedures:

- Desk audits of central data system reports (Early Intervention Data System-EIDS)
- Monitoring by Regional Coordinators and central office staff which included onsite visits and records review
- Technical Assistance and on-site follow up monitoring by Regional Coordinators
- Surveys conducted with families by Community Outreach Specialists

The following table identifies each indicator, provides the state's performance in 2013-14 and gives the targets and the results for 2014-15. Following OSEP's review of the APR, Louisiana revised some APR targets and other components of the new SSIP. In addition, the format for the APR has changed as follows:

1. New Introduction Section provides an overview of the Early Intervention structure and the General Supervision System. General Supervision describes the process Louisiana uses to oversee its activities including monitoring and correction of findings. The overview also includes how technical assistance and professional development are provided.
2. A description of how stakeholders are involved in the development of the SPP and the APR.
3. Indicator Sections: each indicator section has been revised and includes the following:
 - a. Historical targets and performance results from previous APR reporting periods 2005-2012
 - b. New targets for 2013 through 2018—some of the proposed targets have been revised since approved by stakeholders and the SICC. The changes resulted from the requirement that the new targets had to show improvement from the initial baseline data or the baseline had to be reset according to updated performance. These target changes can be seen in Indicators 4b and 5.
 - c. Explanations of data collection and the performance results including whether the target was reached and whether slippage occurred.
 - d. The status of correction of findings from the previous fiscal year. This was previously reported in the old Indicator 9 which has now been revised and reporting of correction occurs within each indicator.
 - e. Indicator 11: State Systemic Improvement Plan section includes the targets and is followed by a separate document after page 40. Included with the separate document are the Theory of Action and the Infrastructure Analysis that were developed to meet the SSIP Phase 1 requirements.

Indicator	Data Collection Process- 2012-13	Data Collection Process – 2013-2014
1. Percent of infants and toddlers (I/Ts) who receive Early Intervention Services (EIS) in a timely manner (within 30 days from parent consent on the IFSP). Compliance Indicator	1. Data run of Children with IFSP dates 7/1/2012 to 12/30/2012 by region 2. RC's to review charts of each FSC agency/SPOE send back in spreadsheet which verifies service provided. Target: 100% Status: 91% Very slight slippage of .2%	1. Data run of Children with IFSP dates 7/1/2013 to 12/30/2013 by region 2. RC's to review charts of each FSC agency/SPOE send back in spreadsheet which verifies service provided. Target: 100% Status: 95.45% Best results ever
2. Percent of infants and toddlers who receive services in home/community based settings. Results Indicator	2. EIDS Report Target: 98% 2012-13 Results: Slight slippage 97.4% Did not meet target	2. EIDS report— Target: 98% Results: 97.68% Did not meet target, had slight improvement
3. Percent of infants and toddlers who show improvement in a. positive social emotional skills b. improved knowledge including communication c. use of appropriate behavior to meet needs Results Indicator	Targets: a. positive social emotional skills-Targets: 22% and 34% Actual: *Summary Statement 1—24.7% *Summary Statement 2—44.5% Exceeded both targets b. improved knowledge—45% and 33% including communication Actual: *Summary Statement 1—30.0% *Summary Statement 2—34.7% Did not meet target #1 with slight slippage Exceeded target #2 with slight slippage c. use of appropriate behavior to meet needs—32%/48% *Summary Statement 1—25.6% *Summary Statement—39.5% Did not meet either target, improvement in #1, and slight slippage in #2	Targets: Data Analysis Underway a. positive social emotional skills-Targets: SS1-22%, SS2-37% Actual: Summary Statement 1—34.02% Summary Statement 2—46.9% Exceeded both targets b. improved knowledge including communication Targets: SS1-43.1% SS2-34% Actual: Summary Statement 1—39.6% Summary Statement 2—36.44% Did not meet SS1, exceeded SS2 c. use of appropriate behavior to meet needs Targets: SS1-29.6%, SS2-46.2% Actual Summary Statement 1—27.84% Summary Statement 2—44.1% Did not meet SS1 or SS2
4. Percent of families who report EIS have helped them a. know their rights b. Communicate child's needs c. help child learn and develop Results indicator	1. Written surveys sent out for families exiting over 3 month period 2. OCDD (NCIS survey) surveys underway—analysis underway 3. Survey Monkey posted on parent page of EarlySteps website--results being analyzed Targets/Performance: a. know their rights—80%/77%-- improvement, did not meet target b. Communicate child's needs—80%-- 93%--exceeded target c. help child learn and develop—91%-- 84%--did not meet target	Targets: 1. Written surveys sent out, returned, analyzed 2. OCDD surveys —analysis complete 3. Survey Monkey results analyzed Targets/Performance: a. know their rights—80%/86.4% b. Communicate child's needs—84.1%/93.7% c. help child learn and develop—91%/93.65% Final—exceeded all 3 targets Target 4b was revised

Indicator	Data Collection Process- 2012-13	Data Collection Process – 2013-2014
5. Percent of I/T's 0 to 1 with IFSP's compared to: a. other states with similar elig. criteria b. national data Results indicator	2013 Results—Target 1.5% 12/1/2012 Child Count=1135—represents decrease of 79 children Status: 1.82%--slippage, exceeded target	2013-14 Results—Target 1.5% 12/1/2013 Child Count=718—represents decrease of 417 children Target: 1.17% Result: 1.17% Status: slippage, Met revised target
6. Percent of I/T's , 0-3 with IFSP's compared to a. other similar states b. national data Results Indicator	2012-13- Results Child Count = 4013 (decrease of 1093) Target=2.65% Actual=2.13%--did not meet target.	2013-2014 Results— Child Count = 4145 (increase of 132) Target=2.08% Result=2.25% Actual=exceeded target
7. Percent of I/T's with IFSP in 45 day timeline Compliance Indicator	*Data collection via EIDS Target: 100% 2012-2013—99.8%--did not meet target	*Data collection via EIDS Target: 100% 2013-2014- 99%--did not meet target—using family reasons calculation—99.9%. Slight improvement
8 Percent of children exiting with timely transition a. with IFSP's b. with notice to local ed. Agency c. with transition conference Compliance Indicator	Regional Coordinators to count their regions. Targets 100% 1. Review all children exiting in March, April, May, 2013 from transition report— Targets: a. with IFSP steps: 100%-- 99.2% b. with notice to local ed. Agency— 100% c. with transition conference— 100% Results: 93%	1. Review all children exiting in March, April, May, 2014 from transition report— Targets: 100% a. with IFSP steps: 100% b. with notice to local ed. Agency—100% c. with transition conference—98.69% Results: Met targets for a and b. Did not meet target for c, had improvement
9. Monitoring and noncompliance corrected asap but no later than 1 year a. noncompliance from monitoring corrected within 1 year b. other areas of noncompliance corrected in 1 year c. compliance with complaint resolution Compliance Indicator	42 out of 42 findings of noncompliance resolved within one year. 100%--achieved target	Will no longer report as a separate indicator. Status of findings of noncompliance will be reported indicator by indicator Result: using last year's calculation performance at 97%--3 findings not corrected in one year. New Indicator 9—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). Louisiana will not report on this indicator—do not use the Part B process
10 Percent of written complaints resolved in 60 day timeline	2012-2013 results: Target: 100% Status: 100% 15/15 complaints resolved timely	No longer reported as a separate indicator. This data is reported separately in a "618 data report." All complaints for 2013-14 were resolved timely (17/17) New Indicator 10: Percent of mediations held that resulted in mediation agreements. Formerly indicator 13. Louisiana will not report on this indicator as there were no mediations requested in

Indicator	Data Collection Process- 2012-13	Data Collection Process – 2013-2014
Compliance Indicator		2013-14. States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, the state must develop baseline and report in the subsequent APR.
11. Percent of adjudicated due process hearings within timeline Compliance Indicator	2012-2013: None EarlySteps had a request for a due process hearing, but was closed following successful resolution of family concerns	No longer reported as a separate indicator. This data is reported separately in a "618 data report." New Indicator C-11: Target: 42.5% Result: 42.5% Description of the measure and calculation is included in the section of the APR. Met target for this reporting period.
12 Percent of hearing requests resolved through settlement agreement (if state uses Part B) N/A	N/A	NA
13. Percent of mediations held resulting in agreements Compliance Indicator	Central Office 2012-2013 Results: None	NA Now Indicator 10
14. Reporting data for State Performance Plan and "618" data timely and accurate Compliance Indicator	2012-13 Results 100%	No longer a required indicator. OSEP will be using a new measurement process to issue determinations for which, a part of the analysis will include a state's "timely and accurate" data performance. Preliminary review of this data resulted in a score of 100%

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

General Supervision System:

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

Introduction and System Description:

EarlySteps, Louisiana's Individuals with Disabilities Education Improvement Act (IDEA)-Part C program, is administered by the Department of Health and Hospitals (DHH), Office for Citizens with Developmental Disabilities (OCDD). The lead agency for the program was originally the Louisiana Department of Education. In 2003, the Governor changed the program leadership to the Department of Health and Hospitals, Office of Public Health. In 2007, the leadership was changed to OCDD. OCDD is responsible for managing the developmental disabilities service system for Louisiana which includes Medicaid waiver programs and state-funded supports for persons with developmental disabilities, in addition to the IDEA, Part C program. The Part C service delivery system can be described as an "independent vendor" model of service delivery that includes the following administrative staffing and structure to support its operations:

- Central Office has 4 employees: Program Manager, Assistant Program Manager, Training Coordinator, and Provider Relations Specialist. These staff coordinate state-level activities, manage contracts, provide oversight and supervision for system implementation and assurances that requirements are met and recommend system changes and improvements.
- Regional Operations: There are 9 regional coordinators responsible for the implementation of EarlySteps components in their respective regions. The Assistant Program Manager also supports region 10, in addition to her central office responsibilities. The regional coordinators are responsible for training, technical assistance, provider enrollment and referral source outreach, and components of the general supervision system including complaint investigation, quality assurance, and follow up. Regional coordinators are housed in DHH Human Services District/Authority offices, OCDD regional resource center offices, or in other state agency offices. The main work of the state's technical assistance system is conducted by the regional coordinators and central office staff.
- The State Interagency Coordinating Council (SICC) is coordinated through the Governor's Office of Community Programs and employs an executive director to manage its activities. The SICC members are appointed by the Governor to represent the required constituency groups. The EarlySteps program manager represents OCDD on the SICC. Also representing DHH on the SICC are staff from Medicaid, Maternal Child Health, and Children's Services in the Office of Behavioral Health. In 2008, the SICC and the lead agency developed a joint strategic plan which guides the operations of both the SICC and lead agency. The activities for the Strategic Plan are developed and implemented by staff and committee members: Comprehensive System of Professional Development (CSPD), Program Components, and Public Relations. Lead agency staff, community outreach specialists, and families, providers and other stakeholders comprise membership of the committees. Committee chairs also represent their committees on the SICC Executive Committee. Ad Hoc committees are appointed by the SICC chair when needed to address specific issues. Examples include a streamlining committee and a fiscal management committee to address specific activities from the Strategic Plan. The SICC and its committees meet quarterly, the SICC Executive Committee meets monthly when the SICC does not meet, and committees may also meet more often as needed. For the purposes of the SSIP work the committees were re-organized into 3 workgroups as outlined in the stakeholder involvement section which follows.
- Regional Advisory Councils: The SICC structure and function is mirrored at the regional level with regional ICCs (RICCs). The regional coordinators are responsible for coordinating the RICC activities and meetings with regional/local providers, families, agency representatives, providers and other stakeholders. A report of their activities is presented quarterly to the SICC. RICC input flows from the regional level to the SICC for recommendations, input, follow up etc. Information from SICC meetings is also shared at the RICC meetings.
- Quality Assurance Specialists (QAS): There are 10 QASs responsible for required QA management in each DHH region. A portion of their time is allocated to EarlySteps. The QAS's are responsible for monitoring and reporting associated with

the OCDD quality assurance activities through work with the regional coordinator. Regional coordinators facilitate the development of corrective action plans and identification of correction following issuing of findings of noncompliance from monitoring.

10 System Point of Entry Offices (SPOEs)—the SPOEs are contract agencies responsible for intake, eligibility determination, initial service coordination, and the development of the initial IFSP for all referrals and children who become eligible. There is one SPOE contractor for each DHH-OCDD region. The contracts are awarded at least every three years through a competitive RFP process. SPOE staff consist of a program director, intake coordinators and an early intervention consultant. Following the development of the initial IFSP, the SPOE intake coordinators assist families with provider and family support coordinator selection for the implementation of the IFSP. Subsequent activities are managed by the IFSP teams consisting of providers, families, and a support coordinator. SPOEs have the ongoing responsibility for data entry into the Early Intervention Data System (EIDS) managed by the Central Finance Office and for maintenance of the early intervention records.

1 Central Finance Office (CFO) contractor—who provides the following system supports: provider enrollment and maintenance, claims processing and payment for non-Medicaid-paid services and/or services for children who are not Medicaid eligible, and the maintenance of the “central service directory” or service matrix. The CFO is responsible for EIDS management and works with the lead agency to meet data reporting needs. Included in their operations with Medicaid is a monthly eligibility verification batch file submission to Medicaid’s fiscal intermediary (FI) to accurately identify Medicaid-eligible children so that the appropriate fund source can be billed. From the eligibility data, an additional file is submitted daily to the FI to issue prior authorizations for support coordination services. The CFO issues all support coordination and services authorizations following IFSP meetings. The CFO contract is awarded at least every three years through a competitive RFP process.

9 Community Outreach Specialists (COSs) and 1 COS State Liaison through contracts with Families Helping Families and Southeast Louisiana Area Health Education Center (AHEC). COSs are parents/family members of children with disabilities who provide parent-to-parent support and conduct outreach for EarlySteps. The COSs provide family support for approximately 20 hours per week, the state liaison is full time.

Provider Affiliation Agreements are completed for individual and agency service providers and support coordination agencies enrolled in the system. There are approximately 800 providers enrolled in the system statewide.

General Supervision System

The administrative structure described above supports the general supervision activities in EarlySteps: OCDD uses a continuous quality improvement (CQI) model for the developmental disabilities service system and this serves as the framework for the system of general supervision for IDEA, Part C implementation.

The components for this model are based on these components: *plan, do, check, act* which outline the framework for the general supervision system as follows:

The “*plan*” phase incorporates the components of the SPP/APR that involve preparation for the plan, stakeholder input, identifying data sources and collecting baseline and other performance data, setting targets, budgeting for system activities, strategic planning to identify improvement strategies, determining staff responsibilities for implementing the plan and identifying professional development needs. All staff, the SICC, and stakeholders are involved in this phase of the process. Central office staff compile data, make recommendations, and report results to present to and receive feedback from stakeholders prior to annual APR submission to OSEP.

The “*do*” phase incorporates training/professional development, communication flow, policy development and implementation, memoranda of understanding and interagency agreements, and the implementation of the strategic plan action items/improvement strategies. Central office staff and the SICC Executive Director provide the administrative oversight of the implementation activities such as contract development. The actual “implementation” of system components occurs at the regional and local levels through the SPOEs and providers. The regional coordinators have the responsibility to oversee implementation at the local/regional level. This phase incorporates the professional development components of the system and includes setting provider credentials and qualifications. The activities of professional development are managed through central office staff with support from the SICC CSPD committee.

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The "*check*" phase includes the "monitoring" components of the system which include all of the following: agency/provider onsite monitoring, EIDS reporting review, chart review, family surveys/interviews, fiscal management/monitoring, and the dispute resolution system. This phase also involves staff, providers and stakeholders at all levels. Central office staff guide report development and set timelines for monitoring, regional staff are responsible for the monitoring activities and analysis of results. Central office staff aggregate performance results to present and receive feedback from stakeholders. The SICC committees and stakeholders are responsible for reviewing and updating the strategic plan activities based on performance results or other identified issues. The dispute resolution system is managed primarily by regional staff. Complaints are responded to by the regional coordinator and entered into OCDD's complaint management system. This system assists with generating responses and correspondence to the complainant and with tracking timelines for resolution. The complaint system can be reviewed at the central office level. The Division of Administrative Law is responsible for dispute resolution if mediation or a due process hearing are requested.

The "*act*" phase is the component which responds to the other phases based on the results of their components. This phase includes development, implementation of, and follow up with corrective action plans; determinations, public reporting of performance results, enforcement of requirements, revising policy and strategies based on performance and system needs/changes, and developing pilot activities. These activities occur at all levels of the system as well. Regional staff are responsible for follow up with monitoring findings to ensure correction and at the central office level, staff review results and review correction, issue determinations, enforce sanctions and, and recommend revisions to the improvement process. SICC committees will recommend improvement strategies based on performance results or complaints.

Use of this CQI model to support Louisiana's general supervision system has proven to be effective in improving the state's performance results since 2007. It is an integrated model which is informed by data, responsive to stakeholder input, and based on the assumption that improvement is ongoing and continuous.

Technical Assistance System:

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

Technical Assistance System

As mentioned in the general supervision system description section above, the EarlySteps technical assistance (TA) system is a component of its General Supervision system. The infrastructure which supports the TA system relies strongly on the support provided by the regional staff. EarlySteps' TA model has traditionally relied on on-line training modules and face-to-face training with follow up TA provided by the regional coordinators. TA activities might include initial system training following completion of the online modules with new provider/agency enrollment. The regional coordinators have a standard orientation module used for this purpose. The module requires a series of scheduled contacts with the agency/provider covering certain content with built-in follow up activities. When new policies, etc. are forthcoming, regional staff are responsible for coordinating the implementation and conducting monitoring to ensure that implementation occurs as intended. Follow up after monitoring, to ensure effective implementation after noncompliance or other issues are identified, is also the responsibility of regional coordinators. Regional staff are responsible for information sharing at RICC meetings and through email listservs. This TA model is the basis of support planned for systems improvement with the SSIP.

Professional Development System:

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

Professional Development System

The EarlySteps professional development system is designed to operate hand-in-hand with the TA system. As a component of the general supervision system, it is designed to be responsive to identified provider/agency/family needs, to inform the system when new procedures and policies are required, to address practice change to improve child and family outcomes and to implement evidence-based practices. The system includes proposed improvement activities based on the SICC-Lead Agency strategic plan developed by the CSPD committee, entry level online training modules, information sharing and resource sharing, posting information on the EarlySteps website, and information and training for families. Face-to-face professional development activities are usually provided through contracted trainers who work with central office staff and the CSPD committee to develop training modules based on system needs. Follow up TA after training is then provided by regional staff.

Stakeholder Involvement:

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

Stakeholder Involvement

Stakeholder involvement has always been a strong, valued component of Louisiana's early intervention system. This involvement began during the planning years of "Part H" under the LDOE at the time, when SICC committees were formed to assist the lead agency in the design of what has evolved to become the current early intervention system. Although the focus of the committees has changed over time, their work has continued to contribute to changing needs and to system improvement. At Strategic Planning sessions, the focus and roles of the committees is always reviewed when the system strategic directions are identified. The focus on and value of stakeholder involvement continues under the leadership of OCDD.

As part of the administrative transition of EarlySteps from the DHH Office of Public Health to OCDD in 2007, a program evaluation was conducted resulting in a Lead Agency improvement plan. The description for this process and resulting improvement activities from the implementation plan were reported in the previous State Performance Plan and Annual Performance Reports. At that time, the lead agency worked from its own improvement workplan and the SICC had its Strategic Plan to guide its work. In 2008, the lead agency and the SICC agreed to develop a single Strategic Plan to coordinate their quality improvement efforts. The process to develop the Plan included:

- Forming an SICC ad hoc workgroup that included the ICC executive director, lead agency staff, and the EarlySteps State COS Liaison. The workgroup members developed the process by which the plan would be developed and reported their activities monthly to the ICC Executive Committee.
- Conducting focus groups with stakeholders in May, 2008. A process for facilitating focus group discussion was developed by the workgroup so that a standardized process would be used across the DHH regions. Regional Coordinators and COSs participated in training to implement the process and nine regional focus groups were conducted. The information gathered from the focus groups was used to frame the strategic planning discussion.
- Holding a Strategic Plan retreat in June, 2008. The workgroup assembled stakeholders representing families, SICC and RICC members, lead agency staff, providers, and others to develop the plan, including developing a vision and focus areas. Each focus area had at least one goal and several action steps needed to accomplish the goal. SICC committees were re-organized based on the newly identified focus areas and action steps were formulated by committees to address goals.
- Presenting the Plan to the SICC. The plan was reviewed and approved by the SICC for the 2008-2011 period. This was the first time that the SICC and lead agency were jointly working on system improvement activities. Through this process the SICC executive director, lead agency, and committee chairs could report on their activities in an aligned, focused manner.
- In 2011, the SICC Executive Committee agreed to conduct a planning meeting to revisit and update the Strategic Plan. Regional "listening sessions" were held and facilitated using a similar format to solicit stakeholder input. The information was compiled to present at a Strategic Planning retreat in May, 2011. Grace Kelley with SERRC facilitated the meeting using the Technology of Participation model. Approximately 35 stakeholders participated and developed a vision and three strategic directions to guide the state's work: Improving the System, Enhancing Services and Accountability, and Improving Efficiency and Access. Each Strategic Direction had three to four goals and several action steps. The goals were aligned with APR Performance Indicators and other state quality initiatives. Committees were re-aligned to accomplish the work: Program Components, CSPD, and Public Relations.

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- The Strategic Directions and Strategic Plan for 2011 through 2014 were presented to and approved by the SICC at its July 2011 meeting. The plan included the implementation activities planned for the SICC, the lead agency, and the SICC committees for the 3-year period. The plan not only directed the program activities planned for the period, but also guided improvement strategies which the lead agency incorporated into its SPP/APR improvement activities.
- When OSEP proposed the new SPP-APR process in 2013 including Indicator C-11, the SICC voted at its July, 2013 meeting to re-visit the Strategic Plan for the purpose of updating it and to use it as the framework for the preparation for the Statewide System Improvement Plan (SSIP).

Describing the history of Louisiana's Strategic Planning process is important to show the ongoing focus on continuous improvement held by the system as well as the contributions of its stakeholders. The result of this jointly developed and implemented strategic plan is that Louisiana has coordinated its activities to support improvement developed and provided through stakeholder involvement since 2008. This strategic plan, the results of the APR performance and other state data are used to inform improvement planning for EarlySteps each year. As with SSIP development, as data results are reviewed, improvement activities are recommended to the lead agency and incorporated into the committee/workgroup plans through the Strategic Plan implementation. More information regarding the contributions of stakeholders in the development of the SSIP will be forthcoming in the Indicator C-11 Phase I analysis due in April, 2015.

The Louisiana State Performance Plan and Annual Performance Report were developed with the broad stakeholder input described above. Since the passage of the legislation for the early intervention system (EIS), the development of the Part C program components has been conducted through stakeholder input and the State Interagency Coordinating Council (SICC) committee recommendations [Public Relations (PR), Program Components, and Comprehensive System of Personnel Development (CSPD)]. Committees meet at least quarterly prior to SICC meetings. These family members, stakeholders, lead agency staff and SICC members were also involved in the development and update of the State Performance Plan (SPP) in 2005 and 2010 and the Annual Performance reports for Federal Fiscal Years (FFYs) 2005 through 2012. Committees were formed which included these members, providers, EarlySteps central office staff, regional coordinators, regional quality assurance specialists, and regional COSs for the development of the SPP and APR. EarlySteps regional staff also solicit input and provide reports to the nine regional ICCs which meet at least quarterly.

More information regarding the contributions of stakeholders in the development of the SSIP will be forthcoming in the Indicator C-11 Phase I analysis due by April, 2015. The description will also include the process used to set targets for the new phase of the SPP as recommended by stakeholders.

Reporting to the Public:

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

Reporting to the Public

Data results for the APR are reported monthly from September through January each year to the SICC Executive Committee and/or at SICC meetings as soon as performance results are available for the APR reporting period. The APR Monthly Report is disseminated at these meetings and then distributed through the SICC listserv. The regional coordinators also distribute the report at their quarterly regional ICC meetings. Once the APR results are complete and final, an Executive Summary is shared with the SICC at its January meeting and distributed via the listserv and Regional Interagency Coordinating Council (RICC) meetings. The Executive Summary includes the link to the full report. The SICC certification statement is completed at the January SICC meeting. The APR, revised SPP, and local performance reports are posted on the state's website in February each year. OSEP's response to the APR and the annual determination are shared in the same fashion. These are posted to <http://www.earlysteps.dhh.louisiana.gov>. The SICC Executive Director also provides the APR to the Governor to meet the requirement for the SICC Annual Report.

Indicator 1: Timely provision of services

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	50.00%	85.00%	86.00%	87.60%	90.70%	93.80%	91.20%	91.00%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

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

FFY 2013 SPP/APR Data

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	4,145	1,406

Explanation of Alternate Data

Timely services data was collected from one quarter to represent the reporting period. An Early Intervention Data System (EIDS) report was developed to identify a list of children for whom timely services could be analyzed by chart and data system review according to the following definition: identification of timely services provided within 30 days of the development of an IFSP for all children with initial, revised, or annual IFSPs between July 1 and September 30, 2013. This timeline is representative of all quarters of the reporting period and represents census data. More information regarding the data and report follows. The report was disaggregated by region and sent to the appropriate regional coordinator. The regional coordinator compared the data from the list (i.e., child name, IFSP date, service dates, etc.) with service billing data and/or provider service contact notes. The total number of IFSPs reviewed for the time period was 1406 representing 34% of all children served on the December 1 child count date.

For 2013-2014, 22 findings of noncompliance were issued to 22 FSC agencies for services not provided within 30 days of parent consent of the IFSP. These findings are under corrective action at this time. In addition, there were 10 findings issued for this indicator from family complaints. These 10 findings were corrected timely following development of corrective action and follow up verification of correction by regional coordinators.

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,281	1406	91.00%	100%	95.45%

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

61

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

- State monitoring
- State database

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

July 1, 2013 through September 30, 2013 representing the first quarter of the fiscal year: all IFSPs written during the time period are reviewed from every SPOE and family support coordination agency(FSC) responsible for writing IFSPs for the quarter.

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

The timeline used for 2013-14 data collection is representative of all quarters of the reporting period and represents census data. The total number of IFSPs reviewed for the time period was 1,406 representing 34% of all children served on the December 1 child count date. Data collected for this indicator is accurate and valid as it was collected from all regions of the State in 32 family support coordination (FSC) agencies and 1 SPOE for all children for whom IFSPs were written in the first quarter of 2013-14. This data is representative of all quarters of the year as shown:

1st Quarter: 1,406 IFSPs—22% of the IFSPs for the year

2nd Quarter: 1,717 IFSPs—26%

3rd Quarter: 1527 IFSPs—23%

4th Quarter: 1805 IFSPs—28%

The process for data collection was an EIDS report comparing IFSP dates for the July-September 2013 date range with service start dates within 30 days of parent consent for the IFSP. The report queried IFSP dates within the date range to identify IFSPs written by child and by FSC/SPOE agency and included service authorization dates and service date ranges from July 1, 2013 through December 31, 2013. Using the six-month date span allowed for identification and verification of service start dates which may have occurred after 30 days.

Provide additional information about this indicator (optional)

The data source for this indicator results from a combination of the State's database and from State monitoring. A report, as described above, is generated from EIDS and data is compared against the EIDS billing data. The review also requires cross-walking service claims and payments with the State's Medicaid Information Management system for service claims paid for by Medicaid. Therefore, a combination of State database and State monitoring is used to collect information for this indicator.

Actions required in FFY 2012 response table

None

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

Correction of Findings of Noncompliance Identified in FFY 2012

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

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
31	29	2	0

FFY 2012 Findings of Noncompliance Verified as Corrected

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

Status of FY 2012-13 Findings

The February 2014 APR outlined the status of findings identified during FFY 2012, as shown in the chart below. At the time of the APR submission there were 19 findings which had not been corrected, although still within timeline. The current status of the FFY 2012 findings is as follows:

Indicator 1	FFY 2012 Findings	February 2014 status remaining for correction	Subsequent Timely Correction February 2015
Findings	8 timely services 15 related requirements 8 complaints= 31 total findings	8 timely services (CAP underway) 3 related requirements= 11 remaining findings for correction	8 from CAP 1 RR= 9 corrected timely
Number Corrected	8 complaints 12 related requirements= 20 corrected findings	8 timely services= 8 corrected	All but 2 findings corrected timely= 2 not corrected timely

In 2012-13, onsite FSC agency monitoring was conducted in 4 FSC agencies. Fifteen related requirements' findings were attributed to Indicator 1. As of submission of the APR in February 2014, 12 findings were corrected timely and 3 remained under corrective action. Subsequently, one finding was corrected timely, and two findings were subsequently corrected, but not timely.

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

Verification of correction of FFY 2012 noncompliance:

1. Louisiana can confirm that the agencies for which findings were issued in 2012-13, are correctly implementing the timely services requirement as the service start date for all services was monitored by regional coordinators as verified by reviewing updated data from the EIDS report and chart review for subsequent quarters following the completion of the agency's corrective action plan. Related requirements findings were also verified as corrected through follow up chart review.
2. Each finding of noncompliance was corrected for each individual child for whom services were late. Two findings from 2012-13 were not corrected timely, but the State was able to verify that the services were received, although late and the findings were subsequently corrected.

The 8 findings from complaints were corrected timely.

The two FSC agencies with the findings which had ongoing noncompliance, have subsequently closed, however, correction was verified as stated above.

Louisiana is providing the status of all findings for FFY 2012-13 in the attached worksheet. The State is using the previously required C-9 Worksheet to outline, indicator by indicator, the findings of noncompliance for each indicator, for related requirements, and complaints, and the status of correction within one year. A description of the correction and the status of each finding and complaint is also outlined in the narrative in each indicator section, as appropriate.

Indicator 2: Services in Natural Environments

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		98.00%	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%
Data	98.60%	99.00%	99.00%	99.00%	99.00%	99.00%	99.00%	97.40%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	98.00%	98.00%	98.00%	98.00%	98.00%	98.00%

Targets: Description of Stakeholder Input

Stakeholder involvement in the development of data collection for Indicator 2 and in target setting is described in the Introduction section of the APR. More detail will also be provided in the Indicator C-11 SSIP submitted in April, 2015.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	4,049	
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Total number of infants and toddlers with IFSPs	4,145	

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Total number of infants and toddlers with IFSPs	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
4,049	4,145	97.40%	98.00%	97.68%

Provide additional information about this indicator (optional)

Louisiana's EIDS is used to collect data for this indicator. Service settings are determined as part of the IFSP process and are entered by the System Points of Entry offices (SPOEs) following the submission of the IFSP. An EIDS report can be generated to review settings results for APR reporting and policy compliance.

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

Louisiana is reporting progress data and actual target data for FFY 2013-2104 as required in the FFY 2012 Results Data Summary Notes.

Indicator 3: Early Childhood Outcomes

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A1	2008	Target ≥					20.50%	21.50%	22.00%	
		Data				20.10%	23.10%	17.00%	20.00%	24.70%
A2	2008	Target ≥					32.90%	33.90%	34.00%	
		Data				32.40%	46.50%	36.20%	44.40%	44.50%
B1	2008	Target ≥					43.10%	44.10%	45.00%	
		Data				42.60%	33.90%	30.00%	30.20%	30.00%
B2	2008	Target ≥					29.40%	30.40%	33.00%	
		Data				28.90%	39.30%	34.50%	37.50%	34.70%
C1	2008	Target ≥					29.60%	30.60%	32.00%	
		Data				29.10%	19.00%	22.00%	21.50%	25.60%
C2	2008	Target ≥					46.20%	47.20%	48.00%	
		Data				45.70%	38.00%	40.30%	40.80%	39.50%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A1 ≥	22.00%	22.00%	22.00%	22.00%	22.00%	22.00%
Target A2 ≥	37.00%	37.00%	37.00%	37.00%	37.00%	37.00%
Target B1 ≥	43.10%	43.10%	43.10%	43.10%	43.10%	43.10%
Target B2 ≥	34.00%	34.00%	34.00%	34.00%	34.00%	34.00%
Target C1 ≥	29.60%	29.60%	29.60%	29.60%	29.60%	29.60%
Target C2 ≥	46.20%	46.20%	46.20%	46.20%	46.20%	46.20%

Targets: Description of Stakeholder Input

Stakeholder involvement in the development of data collection and in target setting for Indicator 3 is described in the Introduction Section of the APR. Following the data analysis review from Phase I SSIP planning, child outcomes will be an area of focus for Louisiana's SSIP. Changes to the data collection and reporting process are anticipated as a major activity of the SSIP under the leadership of Louisiana's SICC Early Childhood Outcomes Workgroup. More details on target setting, stakeholder involvement, and other change activities recommended by stakeholders and the workgroup will be provided in the Indicator C-11 SSIP submitted in April, 2015.

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

FFY 2013 SPP/APR Data

Number of infants and toddlers with IFSPs assessed	763
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Does the State's Part C eligibility criteria include infants and toddlers who are at risk of having substantial developmental delays (or "at-risk infants and toddlers") under IDEA section 632(5)(B)(i)? No

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

	Number of Children
a. Infants and toddlers who did not improve functioning	330
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	21
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	54
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	127
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	231

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	181	532	24.70%	22.00%	34.02%
A2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	358	763	44.50%	37.00%	46.92%

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

	Number of Children
a. Infants and toddlers who did not improve functioning	338
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	54
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	93
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	164
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	114

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	257	649	30.00%	43.10%	39.60%
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	278	763	34.70%	34.00%	36.44%

Outcome C: Use of appropriate behaviors to meet their needs

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

	Number of Children
a. Infants and toddlers who did not improve functioning	362
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	32
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	32
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	120
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	217

	Numerator	Denominator	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program $(c+d)/(a+b+c+d)$.	152	546	25.60%	29.60%	27.84%
C2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program $(d+e)/(a+b+c+d+e)$.	337	763	39.50%	46.20%	44.17%

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? No

Provide the criteria for defining “comparable to same-aged peers” and list the instruments and procedures used to gather data for this indicator.

in 2007, the *Battelle Developmental Inventory, 2nd edition* (BDI-2) was selected as the sole tool for eligibility determination for EarlySteps and for outcome measurement using BDI-2 entry and exit scores. The results of the initial evaluation of a child at entry are entered into EIDS and are used for the entry scores. An exit BDI-2 is administered at exit of the child from early intervention. For children who have been in early intervention for at least 6 months, scores are compared for outcome reporting. An EIDS system modification was made to accommodate entering of BDI-2 entry and exit outcome scores by the SPOEs according to the criteria to allow for reporting outcome scores.

The process for categorizing entry and exit scores to place children in OSEP’s categories a. through e. is summarized as follows:

- Entry and exit data was collected for children exiting from July 1, 2013 through June 30, 2014 who had been in the system for a minimum of 6 months. Complete entry and exit scores were collected on 763 children which represents 22% of the children who exited in 2013-14. Of the children who exited EarlySteps in 2013-14 (3,441 children), 80% were in the program for more than 6 months.
- Children were considered to be functioning at a level *below same-age peers* if the standard score for the domain was below 78 or if the z-score was greater than -1.47. These scores were chosen because they are commensurate with the eligibility criteria for Louisiana of 1.5 standard deviations below the mean. Scores at or below 80 or a z-score less than -1.47 and at or greater than -1.33 were considered to be *a level nearer to same-age peers*. Standard scores above 80 or a z-score less than -1.33 are considered to be *comparable to same age peers*. This distinction recognizes that children may not qualify for EarlySteps services but may still be functioning below typically developing peers. According to the *BDI-2 Examiner’s Manual* (page 74), children with standard scores below 80 (but above the 78 cut off for EarlySteps) fall into a mild developmental delay category.
- Exit assessment is defined at the latest BDI-2 administered for annual eligibility determination or the “exit outcomes assessment” prior to the child’s exit during 2012-13. The child must have been in the program for 6 months.
- The BDI-2 developmental domains were utilized for reporting as follows:
 1. The Personal-Social Domain was used to report “positive social-emotional skills, including social relationships.”
 2. The Communication Domain was used to report “acquisition and use of knowledge and skills (including early language/communication).”

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

3. The Motor Domain was used to report the "use of appropriate behavior to meet needs."

The process for determining progress and placing a child in one of the five OSEP reporting categories was taken from the ECO Center report referenced above and applied as follows:

- a. Children in this reporting category either acquired no new skills or behaviors, or their level of functioning regressed between entry and exit. Category a. includes children whose exit scores were at or below their entry score, regardless of whether they were functioning typically at entry or not.
- b. Children in this category improved functioning, but not sufficient to move nearer to functioning comparable to same-age peers. These children had improved exit scores and had a standard score between 78 and 80 and a z-score of -1.47 to -1.33 , placing them out of the eligibility score for EarlySteps but still within "mild developmental delay" category according to the BDI-2.
- c. Children in this category entered below typical peers; their exit scores were improved from their entry score but they exited below "typical" or with less than a standard score of 78 or z-score of -1.47 for that developmental domain. Scores in this category would generally indicate continuing eligibility for EarlySteps.
- d. Children in this category entered below typical peers; their exit scores were improved with a standard score at or greater than 80 at exit indicating improvement to a level comparable to same-age peers.
- e. Children in this category entered at or above their same-age peers, with standard scores of 80, who showed improvement at exit with standard scores above 80.

For the 2013-14 reporting period, the EIDS data report was used to report on child outcomes. Data was reviewed for all children for whom the BDI-2 entry and exit data was available, who exited the system between July 1, 2013 and June 30, 2014 who were in the system for a minimum of 6 months. The same methodology used to place children in progress categories a-e last year was also applied for this reporting period.

Provide additional information about this indicator (optional)

Louisiana's results data for Indicator 3 have fallen outside of the national trends based on results from other states data for child outcomes each reporting year. In addition, the State has always reported between 43-55% of children who did not improve functioning or who had regression (progress category a) from entry to exit. As part of its State Systemic Improvement Plan (SSIP), the State has conducted analysis of these results and will be reporting on improvement strategies to improve its child outcome measurement process with the SSIP report submitted in April, 2015.

Actions required in FFY 2012 response table

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

Responses to actions required in FFY 2012 response table

Targets for the new SPP/APR reporting period are outlined in the FFY 2013-2018 Targets section. Louisiana is reporting progress data and actual performance results for 2013-14 for 763 children who had been in the early intervention system for at least 6 months and for whom entry and exit scores are available.

Indicator 4: Family Involvement

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Historical Data

	Baseline Year	FFY	2005	2006	2007	2008	2009	2010	2011	2012
A	2006	Target ≥		74.00%	75.00%	76.00%	77.00%	78.00%	80.00%	80.00%
		Data		78.00%	64.00%	78.00%	81.50%	72.00%	74.00%	76.80%
B	2006	Target ≥		72.00%	73.00%	74.00%	75.00%	76.00%	80.00%	80.00%
		Data		84.00%	80.00%	89.00%	91.40%	83.00%	88.00%	93.50%
C	2006	Target ≥		86.00%	87.00%	88.00%	89.00%	90.00%	91.00%	91.00%
		Data		81.00%	85.00%	91.00%	88.40%	87.00%	91.00%	83.80%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target A ≥	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%
Target B ≥	84.10%	84.20%	84.30%	84.30%	85.00%	85.10%
Target C ≥	91.00%	91.00%	91.00%	91.00%	91.00%	91.00%

Targets: Description of Stakeholder Input

Stakeholder involvement in the development of data collection and target setting for Indicator 4 is described in the Introduction Section of the APR. More detail regarding stakeholders and target setting for all indicators will also be provided in the Indicator C-11 SSIP description submitted in April, 2015. In addition, the EarlySteps Community Outreach Specialists (COSs) reviewed the Early Childhood Outcomes (ECO) Center, *Family Outcomes Survey, Revised Version*, and selected this survey for the mailed surveys to which families responded. Prior to this time, the original version of the ECO *Family Outcomes Survey* was used in Louisiana. The additional State-developed questions which had been submitted during the previous SPP/APR period were added to the revised survey. The information below describes the process used with the new survey:

The *Family Outcomes Survey, Revised Version* uses a 5 item rating scale. EarlySteps considers a response of "Somewhat helpful" or better as the criteria for determining if early intervention services "helped/describes their family."

A. Know their rights

EarlySteps selected question 7 from Section A (A-7) and questions 2 and 5 from Section B (B-2 and B-5) of the survey to obtain results for this area. The items were:

- A-7 We know who to contact and what to do when we have questions or concerns.
- B-2 How helpful has early intervention been in giving you useful information about your rights related to your child's special needs?
- B-5 How helpful has early intervention been in explaining your rights in ways that are easy to understand?

B. Effectively communicate their child's needs

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

EarlySteps selected question 2 from Section A (A-2) and a question from Section B (B-9) the survey to address this area. An additional question was added to the survey in this section to assess the use of family assessment in developing IFSPs: How helpful has early intervention been in helping your family understand the importance of your input in planning for your child and family (Concerns, Priorities, and Resources)?

- A-2 We understand our child's strengths and abilities
- B-9 How helpful has early intervention been in talking with you about what you think is important for your child and family.
- State-Added Question: How helpful has early intervention been in helping your family understand the importance of your input in planning for your child and family (Concerns, Priorities, and Resources)?

C. Help their child develop and learn

Early Steps selected question 13 from Section A (A-7) and questions 15 and 16 from Section B (B-15 and B-16) to address this area.

- A-7 We are able to work on our child's goals during every day routines
- B-15 How helpful has early intervention been in identifying things you do that help your child learn and grow?
- B-16 How helpful has early intervention been in sharing ideas on how to include your child in daily activities?

A copy of the survey is attached.

FFY 2013 SPP/APR Data

Number of respondent families participating in Part C	595
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	363
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	420
B1. Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	387
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	413
C1. Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn	398
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	425

	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights	76.80%	80.00%	86.43%
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs	93.50%	84.10%	93.70%
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn	83.80%	91.00%	93.65%

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

Data for Indicator 4 was collected through three survey procedures in FFY 2013, using both census and sampling methods.

For Methodology 1, *The Early Childhood Outcomes Center-Family Outcomes Survey, Part C* Revised Version was utilized to collect information for Indicator 4 for the first time for this reporting period, with State-added questions.

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

Surveys were mailed to all families (529 families) whose children exited EarlySteps in the months of April, May, and June 2014. Completed surveys were received from 126 families or 23.8% of the surveyed families. The surveys were mailed and coded to identify the region of the respondent. Additional demographic information was added for the families to identify their children's gender, length of time in EarlySteps, and their eligibility for Medicaid as a general indicator of income. The regional distribution of the total EarlySteps population is compared with the regional distribution of the surveyed families. The distributions are similar with the exception of regions 2 and 3 which were slightly over-represented and regions 4 and 9 which were underrepresented:

Region	1	2	3	4	5	6	7	8	9	10	Total
EarlySteps Total	8.5%	10.6%	12%	12.4%	4.9%	4.7%	11.2%	12.3%	15%	8.4%	100%
Method 1 Survey Respond.	8.5%	13%	14%	9%	5.2%	5.7%	12.6%	11%	13%	7.9%	100%
Method 2 OCDD Survey	5%	12.5%	10.7%	25%	2%	7.1%	7.1%	12.5%	5.3%	12.5%	100%

Surveyed families indicated that 59% of the children were male and 41% were female, compared to the distribution of all children who exited in 2013 as 64.3% male and 35.7% female. Sixty-four percent of the responding families indicated that their child received Medicaid. The average Medicaid enrollment in EarlySteps in 2013-14 was approximately 60%. Parents reported their child's average time in EarlySteps as follows:

- o 13 (11%) respondent's children had been in EarlySteps for less than 6 months
- o 35 (30%) children had been in EarlySteps for 6 months to 1 year
- o 28 (24%) children had been in EarlySteps for 1 to 2 years
- o 42 (36%) children had been in EarlySteps greater than 2 years

For Methodology 2, EarlySteps families also participated in consumer surveys conducted by OCDD for this reporting period in four aspects of the National Core Indicators (NCI) project for 2013. The Consumer Surveys (interviews) were conducted across the 10 OCDD Developmental Disabilities service areas.

Three mail-out surveys (Children/Family, Adult/Family and Family/Guardian) were mailed to OCDD services participants, of which 56 were EarlySteps families. The sample drawn represents the distribution of race, ethnicity, and gender of the total EarlySteps population based on the EarlySteps population data from the OSEP Table 3 data as previously reported. The geographic distribution is also shown on the chart above.

Responses were obtained for 56 EarlySteps families with this methodology or 1.3% of the EarlySteps population.

For Methodology 3, an electronic survey was posted on the EarlySteps website. The survey remains active all year and families may respond at will. On July 1, 2014 the survey results were aggregated from 10 surveys and compiled with the mail out survey results from Methodology 1.

Ten families used the Survey Monkey to give feedback.

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

Was sampling used? Yes

Has your previously-approved sampling plan changed? No

Was a collection tool used? No

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

As stated above, 3 methods are used for collecting data for Indicator 4. The second method uses a sampling plan which was approved by OSEP during the prior SPP/APR period which has not changed. The office selects participants using the geographic distribution data from EIDS as well as the demographic data from 618 reporting. Samples are drawn from the EIDS data to represent the numbers sampled per region, age, race and gender distribution of the enrolled population. As a result, this sample, although the response rate was low, is felt to represent the population of EarlySteps-enrolled children.

Actions required in FFY 2012 response table

None

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

In 2012-2013, 4 FSC agencies had on-site monitoring resulting in 22 related requirements issued findings related to Indicator 4. These findings included lack of written prior notice, lack of documentation that parent rights were provided, and lack of documentation of parent consent obtained. All findings were corrected timely as of the submission of the 2012-13 APR.

To verify correction, staff determined that:

1. The agencies are correctly implementing Family Rights and notice requirements at 100% from follow up monitoring conducted by regional staff and from EIDS data reports, and
2. The individual cases of noncompliance were corrected, that prior, written notice was issued to families when consent was required for services and documentation that parent rights were provided were available.

Findings for Indicator 4 for FFY 2013-2014

In 2013-14, 7 findings of noncompliance for Indicator 4 were issued from complaints. These complaints involved issues related to confidentiality and consent for services. For these complaints, providers and/or FSC agencies were placed under corrective action and families selected other providers. The complaints were all resolved timely.

Indicator 5: Child Find (Birth to One)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2013

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		1.25%	1.30%	1.35%	1.40%	1.45%	1.50%	1.50%
Data	1.79%	0.85%	1.27%	1.46%	1.56%	1.64%	1.92%	1.82%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	1.17%	1.20%	1.30%	1.40%	1.50%	1.50%

Targets: Description of Stakeholder Input

Stakeholder involvement in the development of data collection and in target setting for Indicator 5 is described in the Introduction Section of the APR. More detail regarding stakeholders and target setting for all indicators will also be provided in the Indicator C-11 SSIP submitted in April, 2015.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers birth to 1 with IFSPs	713	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	12/16/2014	Population of infants and toddlers birth to 1	60,988	

FFY 2013 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
713	60,988	1.82%	1.17%	1.17%

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

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Indicator 6: Child Find (Birth to Three)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target ≥		2.45%	2.50%	2.55%	2.60%	2.65%	2.65%	2.65%
Data	1.76%	1.27%	1.78%	2.03%	2.27%	2.50%	2.72%	2.13%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥	2.08%	2.08%	2.08%	2.08%	2.08%	2.08%

Targets: Description of Stakeholder Input

Stakeholder involvement in the development of data collection and in target setting for Indicator 6 is described in the Introduction Section of the APR. More detail regarding stakeholder involvement and target setting for all indicators will also be provided in the Indicator C-11 SSIP submitted in April, 2015.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2013-14 Child Count/Educational Environment Data Groups	9/24/2014	Number of infants and toddlers birth to 3 with IFSPs	4,145	
U.S. Census Annual State Resident Population Estimates April 1, 2010 to July 1, 2013	12/16/2014	Population of infants and toddlers birth to 3	184,103	

FFY 2013 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
4,145	184,103	2.13%	2.08%	2.25%

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

For FFY 2012-13, there was one finding related to Indicator 6 from a parent complaint regarding eligibility determination. The complaint was verified, correction was verified and the complaint was resolved timely.

For FFY 2013-14, there were no complaints related to Indicator 6.

Indicator 7: 45-day timeline

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	95.02%	91.00%	96.00%	97.50%	99.40%	99.70%	99.90%	98.20%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

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

FFY 2013 SPP/APR Data

Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline	Number of eligible infants and toddlers evaluated and assessed for whom an initial IFSP meeting was required to be conducted	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
3,633	3,699	98.20%	100%	99.97%

Number of documented delays attributable to exceptional family circumstances (this number will be added to the Number of eligible infants and toddlers with IFSPs for whom an initial evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline)	65
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What is the source of the data provided for this indicator?

- State monitoring
- State database

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

The EIDS data report, Average Days from referral to IFSP, for the fiscal year period 7/1/2013-6/30/2014. A total of 3,699 IFSPs were written and counted for reporting.

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

The EIDS was used to collect and analyze data for Indicator 7. This report generates a list of every initial IFSP written during the fiscal year. The 45-day timeline from referral to IFSP was analyzed for each system point of entry office in the State for the fiscal year and included all of the IFSPs written in the reporting period. A total of 3,699 IFSPs were written with 3,633 meeting the 45-day timeline and 65 late due to family reasons. The results represent all geographic areas of the State in all SPOE regions for all children. The EIDS report also provided the reasons for IFSP delays. The system calculates the number of days from referral to IFSP based upon referral entry data. Following referral, when the SPOE enters an IFSP date and if the 45th day has passed, the date triggers a window in which the SPOE must enter a reason for delay. Choices for entry related to

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

delay reasons include: none, child deceased, child illness/hospitalization, family requests delay, family response time, system delay. SPOEs are able to run reports to check referral to IFSP timelines, and they report this in the monthly self-assessment submitted to EarlySteps central office. Central office is able to run a report for all SPOEs and compare with what has been submitted. Reasons for delay can also be identified in the EIDS report. Analysis of the reasons for untimely evaluations, assessments, and initial IFSPs indicates that 65 IFSPs were late due to family reasons such as a child's illness or hospitalization, response time by the family and family request. There was 1 remaining late IFSP due to "system delay" for the following: scheduling conflict. In this case, the report indicates that the meeting date occurred, although late.

Results indicate slightly improved performance from FFY 2012-2013 by .17 percentage point.

For 2013-14, one SPOE was issued a finding for the system delay resulting from one IFSP that was delayed until 49 days and occurring during the third quarter of the reporting period. To establish correction, IFSP timelines for this SPOE were reviewed for the subsequent two quarters of resulting in correction of the noncompliance with 100% of the IFSPs in this review period met the 45-day timeline.

The average number of days for IFSP completion for the ten SPOEs during the period analyzed was 37.8 days, the minimum was 3 days and the maximum was 111 days (family reason).

Actions required in FFY 2012 response table

None

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

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1		0

FFY 2012 Findings of Noncompliance Verified as Corrected

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

As reported in the February 3, 2014 APR, one SPOE was issued a finding for the system delay which caused one IFSP to be delayed to 49 days during the third quarter of the reporting period. IFSP timelines for this SPOE were reviewed for the subsequent two quarters resulting in correction of the noncompliance with 100% of the IFSPs in this review period meeting the 45 day timeline. The average number of days for IFSP completion for the ten SPOEs during the period analyzed was 37.8 days, the minimum was 3 days and the maximum was 111 days (family reason).

In every case of a late IFSP written after referral, the meeting date occurred, although late, unless the family chose not to participate in the program.

In addition, onsite FSC agency monitoring was conducted in 2012-2013 in 4 agencies resulting in 26 related requirements findings of noncompliance. Twenty-five findings were corrected timely, one finding was subsequently corrected, but not timely. The state verified correction through follow up monitoring after the completion of the CAP. The state verified that:

1. the agency was correctly implementing the related requirement at 100% compliance and that
2. the agency corrected each individual case of compliance,
3. one agency did not correct a finding within the one-year timeline.

As stated in the Indicator 1 section, the FSC agency involved in the ongoing non-compliance has subsequently closed.

Findings from 2013-14:

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

There were 2 findings issued for this indicator from complaints filed in 2013-14: one finding was related to eligibility determination and one finding was related to support coordination. Both complaints were resolved timely.

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

For the Indicator 7 finding detailed above, correction of noncompliance occurred in the following two quarters when the EIDS report verified that

- (1) the SPOE is meeting all 45-day timeline requirements for every child as determined through EIDS and that
- (2) the IFSP which did not meet the 45 day timeline was subsequently developed, although late.

Indicator 8A: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	86.00%	93.00%	94.00%	94.50%	99.60%	100%	97.20%	99.20%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

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

FFY 2013 SPP/APR Data

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

Yes

No

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
458	458	99.20%	100%	100%

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

State monitoring

State database

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

The State uses both the State database and monitoring for Indicator 8a. Central Office/Regional Coordinators developed procedures for record review process: chart review of all children who exited EarlySteps in March, April, and May 2014 (census data).

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

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

The EIDS transition report generates the list of children exiting during the target months. Chart review is then conducted for data collection for 8a and 8c of this indicator by regional coordinators using a standard review tool. Transition conference dates are verified as occurring for birthdates 2 years, 2 months to 2 years, 9 months. Chart review of Family Service Coordination agency charts was then conducted for all children exiting the program in March, April, and May 2014, a total of 458 children (census data). This represents 13.3% of the children who exited EarlySteps in 2013-14. The review tool used by the regional staff requires them to indicate the status of the child's transition after contacting the LEA or the parent. Therefore, even if performance is less than 100% for an agency, the child's transition status is verified through the review.

Actions required in FFY 2012 response table

None

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

Correction of Findings of Noncompliance Identified in FFY 2012

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

FFY 2012 Findings of Noncompliance Verified as Corrected

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

In the February 1, 2014 APR, Louisiana reported 3 findings for 2012-13 were issued under this indicator related to IFSP's without documentation of transition steps and services from agency on-site monitoring and 3 findings related to complaints. As of the February, 2014 submission of the APR, the monitoring findings had been corrected timely. The 2012-13 on-site monitoring also resulted in 5 related requirements findings for Indicator 8a which were subsequently corrected timely.

The complaints were investigated and all 3 were resolved timely.

There were no findings issued for the 2013-14 reporting period.

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

Louisiana can verify that the 3 findings issued for Indicator 8a related to transition steps and services and the 5 related requirements findings were corrected as follows:

1. The 3 agencies are correctly implementing the requirements at 100% compliance as verified by follow up onsite monitoring following completion of the CAPs and
2. For the individual cases for which transition steps and services were not documented, the children successfully transitioned by their 3rd birthdays. Individual cases of noncompliance for related requirements were correctly resolved.

Indicator 8B: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

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

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

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

FFY 2013 SPP/APR Data

Data include notification to both the SEA and LEA

- Yes
- No

Number of toddlers with disabilities exiting Part C where notification to the SEA and LEA occurred at least 90 days prior to their third birthday for toddlers potentially eligible for Part B preschool services	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
1,876	1,876	100%	100%	100%

Describe the method used to collect these data

For notification to the SEA and LEA, the data source was changed in 2006 from chart review of IFSPs to a central reporting process using EIDS. This process is described in Louisiana's February 2007 APR. In this process, a monthly data report of all active children at least age 2 years, 2 months through 3 years of age is sent to the LDOE. The appropriate LDOE contact acknowledges receipt of the list. The performance for this indicator is reported as 100%, since 100% of the number of active children for the entire State for the given age range is sent to meet the timeline requirements. The numbers sent each month vary as the ages of the children change monthly. An average of 1,876 names per month was reported to the LDOE. Since the children falling within the age range will appear on the list several months in a row, the average number of children per month (1876) is used for calculating results for this indicator, rather than the total sent, since the total would include

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

duplicated data. Actual numbers as submitted and compared across several reporting periods appear below:

Transition List Totals per Month to LDOE

Month	Referrals 2013-14	Referrals 2012-13	Referrals 2011-12	Referrals 2010-11	Referrals 2009-10	Referrals 2008-09	Referrals 2008-09	Referrals 2006-07
July	1935	2404	2603	2422	2241	1855	1353	1696
August	1952	2191	2640	2283	2264	1924	1431	1471
September	1922	2024	2624	2441	2280	1860	1415	1410
October	1864	1953	2626	2443	2354	1922	1540	1368
November	1888	1887	2585	2479	2363	1965	1580	1328
December	1844	1850	2363	2582	2416	2018	1702	1398
January	1808	1841	2561	2463	2423	1939	1721	1216
February	1847	1908	2613	2553	2385	2010	1673	1304
March	1840	1958	2633	2599	2411	2090	1790	1268
April	1891	1955	2658	2597	2491	2162	1853	1362
May	1831	1944	2624	2581	2461	2157	1874	1407
June	1894	1931	2550	2632	2468	2210	1912	1430
Ave/Month	1,876 names per month	1987 names per month	2590 names per month	2506 names per month	2379 names per month	2009 names per month	1653 names per month	1388 per month

Upon receipt of the report, the LDOE sends an acknowledgement back to EarlySteps that the report was received, then disaggregates and sends the list to the appropriate LEA. The receiving LEA staff reviews the list and contacts families to begin the eligibility determination process for Part B. Discrepancies are discussed with the FSC agency and/or Regional Coordinator. Examples of identified discrepancies include the reporting of a child of the appropriate age whose case was closed when the notification was sent or an incorrect address or contact phone number by which to reach the family. In addition, the LDOE staff compares the lists with its data system to monitor timely completion of IEPs by the third birthday. Discrepancies for timely IEPs are reported by memo from LDOE to the superintendent of each LEA with copies to the appropriate regional coordinator.

Do you have a written opt-out policy? No

Actions required in FFY 2012 response table

None

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

Correction of Findings of Noncompliance Identified in FFY 2012

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

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

Indicator 8C: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Historical Data

Baseline Data: 2005

FFY	2005	2006	2007	2008	2009	2010	2011	2012
Target		100%	100%	100%	100%	100%	100%	100%
Data	96.00%	85.00%	92.00%	91.40%	95.20%	98.20%	94.20%	93.00%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

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

FFY 2013 SPP/APR Data

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

- Yes
- No

Number of toddlers with disabilities exiting Part C where the transition conference occurred at least 90 days, and at the discretion of all parties at least nine months prior to the toddler's third birthday for toddlers potentially eligible for Part B	Number of toddlers with disabilities exiting Part C who were potentially eligible for Part B	FFY 2012 Data*	FFY 2013 Target*	FFY 2013 Data
452	458	93.00%	100%	98.69%

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

- State monitoring
- State database that includes data for the entire reporting year

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

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

Louisiana uses both data from the State database and State monitoring to collect data for Indicator 8c. The process and time period used for reporting are discussed in the Indicator 8a section.

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

As discussed in the Indicator 8a section, census data for the reporting period was collected for all children exiting the program in the months of March, April, and May, 2014. The number of transitions monitored during this 3 month time period represents 32% of the children who exited and who were potentially eligible for Part B. This census data reflects the data for the full reporting period.

Actions required in FFY 2012 response table

None

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

Correction of Findings of Noncompliance Identified in FFY 2012

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
14	14		0

FFY 2012 Findings of Noncompliance Verified as Corrected

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

As reported in the February, 2014 APR, the State issued 6 findings in 2012-13 for indicator 8c for FSC agencies which did not document transition conferences for children potentially eligible for Part B. Eight findings were also issued for transition conferences as a result of onsite FSC agency monitoring.

For 2013-14 three findings of non-compliance were issued to support coordination agencies for transition conference which did not meet the 8c requirements. These agencies are currently under corrective action.

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

As of the February, 2014 APR submission, the 14 findings were still under corrective action. Subsequently, regional coordinators conducted on-site follow up monitoring and the state can verify that each agency:

- (1) is correctly implementing the timely transition conference requirements in 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) with 100% compliance based on chart review according to the Corrective Action Plan; and
- (2) had conducted a transition conference, although late, for any child potentially eligible for Part B whose transition conference was not timely, unless the child is no longer within the jurisdiction of the EIS program. Regional coordinators verified that each child successfully transitioned to the LEA, if Part B-eligible.

The status of correction of findings is also outlined in the Worksheet attached to the Indicator 1 section.

Indicator 9: Resolution Sessions

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Historical Data

Baseline Data:

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

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥						

Targets: Description of Stakeholder Input

This indicator does not apply in Louisiana as EarlySteps does not use IDEA, Part B due process procedures.

Prepopulated Data

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

FFY 2013 SPP/APR Data

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

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

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Indicator 10: Mediation

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Historical Data

Baseline Data: 2005

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

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2013 - FFY 2018 Targets

FFY	2013	2014	2015	2016	2017	2018
Target ≥						

Targets: Description of Stakeholder Input

Prepopulated Data

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

FFY 2013 SPP/APR Data

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

Actions required in FFY 2012 response table

None

Responses to actions required in FFY 2012 response table

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Indicator 11: State Systemic Improvement Plan

Monitoring Priority: General Supervision

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

Baseline Data

FFY	2013
Data	42.50%

FFY 2014 - FFY 2018 Targets

FFY	2014	2015	2016	2017	2018
Target	42.50%	45.00%	48.00%	50.00%	55.00%

Description of Measure

The SSIP is attached as a separate document and includes the Description of the Measure for the baseline and targets.

Targets: Description of Stakeholder Input

Two documents are attached which outline the stakeholders involved in the development of the SSIP and their roles and one that describes the planning and development process for Phase I and how decisions were made throughout the process. These documents and the attached SSIP describe the stakeholder involvement for each of the SSIP components.

Data Analysis

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

The SSIP is attached as a separate document which includes a data analysis section.

Analysis of State Infrastructure to Support Improvement and Build Capacity

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

The SSIP is attached as a separate document and includes the State Infrastructure to Support Improvement and Build Capacity component.

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

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

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

Statement

The SSIP is attached as a separate document and includes the State-identified Measurable Result component.

Description

Selection of Coherent Improvement Strategies

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

The SSIP is included as a separate document and includes the Coherent Improvement Strategies component.

Theory of Action

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

Submitted Theory of Action: Theory of Action

Provide a description of the provided graphic illustration (optional)

Certify and Submit your SPP/APR

This indicator is not applicable.

Indicator C-11 State Systemic Improvement Plan

Louisiana IDEA-Part C: EarlySteps

April, 2015

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Baseline Data and Targets

Baseline Data

<u>FFY</u>	<u>2013-14</u>
<u>Data</u>	<u>42.5%</u>

FFY 2013 – FFY 2018 Targets

<i>Area</i>	<i>2013-14</i>	<i>2014-15</i>	<i>2015-16</i>	<i>2016-17</i>	<i>2017-18</i>
Progress Categories d and e combined	42.5%	45%	48%	50%	55%

Targets: Description of Stakeholder Input

As mentioned in the APR Introduction Section submitted in February, 2015, Louisiana has a long history of stakeholder involvement in the development and implementation of all aspects of the Part C system, including the SPP and APR. Since the beginning of the SICC in Louisiana in the 1980s, the operations of the ICC have been stakeholder-driven, where the design and implementation of the Part C System

Components and the SICC functions and role, came from SICC working committees which included SICC members, lead agency staff, families, providers and other stakeholders, both at the state level and through the state's regional ICC structure.

The process for the development of the SSIP was easily incorporated into this structure. When the first drafts of the new SPP-APR process were released in 2013, information was shared by the lead agency to the SICC regarding the changes and planning to address the required State Systemic Improvement Plan (SSIP) components began. The *SSIP Planning Activities and Stakeholder Involvement Table* attached to Indicator C-11 in GRADS 360° outlines the process, identifies stakeholder activities throughout Phase 1 including setting targets for Indicators 2, 3, 4, 5, 6, and 11, and describes the outcome of each meeting.

The process for the 2015 SPP/APR and the SSIP began at the April, 2013 SICC quarterly meeting after the proposed SPP/APR package was released by OSEP. As part of the review, a presentation was made at the SICC meeting and the members were asked to recommend a process for moving forward with implementing the new requirements. At its July, 2013 meeting an update reflecting changes to the final May, 2013 SPP/APR requirements was presented by the lead agency.

- To accomplish the development of the SSIP, the SICC voted to have a Strategic Plan update retreat in September, 2013. Participants from the 2011 Strategic Plan meeting were invited as were SICC members, SICC committee members, Community Outreach Specialists and state staff. Grace Kelley with SERRC led the strategic planning activities on two prior occasions and was asked to facilitate the September meeting. Based on the initial data analysis and strategic plan review, the participants recommended three workgroups to address priority areas identified. SICC committee members and stakeholders were asked to sign up for a workgroup.
- Stakeholders who participated in the September, 2013 Strategic Plan meeting became the state leadership team (also called the small stakeholder group). This group met 3 times in 2013-2014 and made recommendations for data to be presented, for areas of focus, and for the workgroup(s) which could address the goals and activities. The *SSIP Stakeholder Involvement Table*, attached to Indicator c-11 in GRADS 360°, provides a description of the meetings and the outcomes.
- After these leadership team meetings, activities to address the Phase I SSIP components were accomplished by the members of the three workgroups under the leadership of their respective chairs and co-chairs. The lead agency, chairs and SICC executive committee met monthly (except in the months of the quarterly SICC meetings) to plan the activities for each subsequent workgroup meeting, to identify data needs and any materials or information needed for the meetings and to address how the Phase 1 component would be accomplished (infrastructure analysis, theory of action, etc.)
- Conference calls and webinar-format meetings facilitated by Grace Kelley occurred as needed in between.

Targets: Explanation for Target Selection and Description of Measurement

The Data Analysis section which follows details the data that was selected and reviewed for Phase I activities. Throughout the discussions, Louisiana's Indicator 3 performance data was identified as a high priority for improvement. Stakeholders felt that any improvement activities that the state would select

would not show improvement if the data results did not improve, specifically, if the results of the progress categories did not shift from the large numbers of children in category a (children who did not improve functioning) and the small number of children in category b (Children who improve but not sufficient to move nearer to functioning comparable to same age peers) into categories d and e. The stakeholder groups were particularly interested in improving the percentage of children who maintain or reach a level comparable to same-aged peers across the 3 developmental domain areas. Therefore, the group recommended that the percentages of children in progress categories d and e be combined across the 3 areas, expressed as a percentage, and used to show baseline and set targets for the APR period. The table below shows how the data is calculated and additional explanation follows in the data analysis section.

Number of Children

Progress Category	Social Emotional	Acquiring and Use of Knowledge	Taking Action to Meet Needs	Total
Category d: Children who improved functioning to reach a level comparable to same-aged peers	127	164	120	411
Category e: Children who maintained functioning at a level comparable to same-aged peers	231	114	217	562
Totals	Total Possible=763	Total Possible=763	Total Possible=763	<u>963</u> 2289

The total possible row for each category shows the number of children for whom exit results are available, that is, exit evaluation results were available for 763 children. The total possible for each of the developmental domain areas together equals 2289 (763 x 3 domain areas). By dividing the total possible into the number of children in categories d and e across the 3 domains (963/2289), the resulting percentage is 42.5%. This will be Louisiana’s baseline for the SIMR and the state’s process for measuring targets each year of the APR period.

Data Analysis

Following the July, 2013 SICC meeting, lead agency staff began a series of planning calls with Grace Kelley, Louisiana's technical assistance provider with the Southeast Regional Resource Center (SERRC) to prepare for the September Strategic Planning-SSIP retreat. During these calls, ideas for data elements to present to stakeholders for the Phase I data analysis component were discussed and identified. Proposed data included national data related to preschool-age children, state data from education, health and social services, and national and state-specific APR data. Formats for presenting the data were also discussed.

- **Description of key National, State and Program Data proposed:**
 - National Data: Kids Count Data Book and the National Institute for Early Education Research (NIEER)
 - State Data:
 - Louisiana Risk and Reach Report,
 - ADHD diagnosis and medication utilization data,
 - APR Data—to review the APR data, it was determined that slides showing trends from the baseline year through 2011-12 would be shown. The 2012-13 data was being aggregated as these activities began, but it was agreed that as that year's data was completed it would be subsequently shared with stakeholders. State-level data would be compared to national APR data and also be disaggregated to the local/regional level.
 - Indicator Compliance Data for compliance indicators
 - Indicator Results Data for results indicators
 - Other data available from the state's Early Intervention Data System (EIDS), including team meetings, provider availability by region and discipline, service expenditures and trends, outcome results by region and evaluators, and service settings data,
 - IDEA 618 data including, specifically exit data,
 - Indicator 4 Family Outcome data and other data available from family surveys,
 - Child outcome data from the LDOE, including indicator B7 and Kindergarten readiness data,
 - Data collected from Louisiana's Early Care and Education Network pilot network cohorts and any other preschool data collected.

The APR and 618 data would be shown over the SPP period and by indicator and shared at the September, 2013 retreat. Other state and national data and materials listed above would also be made available to the participants for review and discuss.

- **Advisory groups and councils whose data might assist with the process were also identified:**
 - Children's Cabinet Advisory Board
 - Louisiana's Early Care and Education Advisory Council (formerly Bright Start)

- Louisiana Partnership for Children
- Child Well-being Initiative
- Children’s Special Health Services Needs Assessment/Resource development

At the September, 2013 Strategic Planning Retreat and SSIP Planning meeting, a presentation was made using recommended data and materials for participants to review. APR trend data was presented for the previous SPP periods:

- Indicator specific data from baseline year to FY 2011-12 reporting periods compared to targets,
- Indicator data broken out by region,
- Indicator data comparing Louisiana performance to national APR results,

As part of the discussion at this meeting, the participants requested additional data to review and discuss. The additional data would serve to “drill down” further into the data by parish, region, and/or by provider. It was agreed that additional information would be available for the December, 2013 follow up meeting of the SSIP state leadership team.

Summary of Data Analysis Discussion

- The participants agreed that EarlySteps has made good progress in performance for the compliance indicators over the period of the SPP. In addition, results for indicators 2, 5, and 6 had expected and/or explainable performance results. For example, the trends for Indicators 5 and 6 could be explained by changes in eligibility criteria (narrow, then moderate, and currently narrow criteria) during the SPP period.
- Indicator 3 Child Outcome Data generated the most discussion by the participants, especially when comparing Louisiana results to the national data.
 - Participants agreed that when year-to-year Louisiana-specific results from progress categories a-e are compared, they are largely stable. That is, data results are consistent over time within the progress categories for the number of children reported each year. The trends over time for the summary statements are not as consistent. Louisiana is an outlier when compared to national Indicator 3 data both for child outcome data as well as for the number of exit evaluations completed.
 - Following the review of Indicator 3 data and trends, the participants requested additional data for Indicator 3 including:
 - disaggregating results by region and
 - disaggregating results by evaluators who conduct the BDI-2 assessments which are used to report entry and exit scores.
 - Discussion of Indicator 3 data contributed to the majority of the data discussion at the first meetings. The root causes identified for performance results included:
 - The business rules for placing children in progress categories a-e, with particular concern in categories a (very high) and b (very low). For progress category a, the large number of children who show regression or no progress contributes to the state’s low performance for Indicator 3. It is of special concern to providers when discussing outcome results with families both in the aggregate and

specific to their own child that so many children do not show progress or who have regression in their BDI-2 scores.

- Potential evaluator-specific variation in administration of the BDI-2 resulting from review of the results by region where larger numbers of children were in category a.
 - Lack of follow up by state staff to BDI-2 training for administration fidelity by evaluators.
 - Consideration of the BDI-2 tool as the best measure to demonstrate progress, specifically the scoring process Louisiana uses to allocate placement in a progress category.
- Review of all EarlySteps-specific data led to discussion regarding addressing system concerns through training. Due to budget constraints, minimal training has been available for at least a year. Many of the data concerns regarding the child outcome data could possibly be resolved through adequate training. Large turnover in support coordinators results in the need for ongoing “basic” training in the system requirements, which is primarily provided through online modules with onsite follow up by regional coordinators. Professional development activities for other ongoing providers and support coordinators have been minimal. Concerns about regional performance discrepancies were felt to be the result of lack of training to EarlySteps services providers.
- Louisiana Department of Education data reporting only 54% of Louisiana children are entering Kindergarten “ready” as a focus for the state’s Early Childhood Care and Education initiative (also called Act 3).
 - National data from the National Institute for Early Education Research (NIEER) where Louisiana ranks 15th in quality indicators for publically-funded public preschool programs for 4-year olds. Louisiana recently received one of the preschool expansion grants which will provide additional funds to allow more children to access preschool seats and to support the Act 3 initiative.
 - Data from Kids Count and the Early Childhood Risk and Reach Report provide data which are associated with poorer outcomes for children in school:
 - ✓ 33% of Louisiana children under the age of 5 live in poverty
 - ✓ 53.5% of Louisiana children are born to single mothers
 - ✓ 10.7% of Louisiana children were born with low birth weight
 - ✓ 52.6 per 1000 births to teens ages 15-19 years
 - ✓ 86% of Louisiana’s parishes (55 out of 64) are rated as “High Risk” on at least one of the indicators measured in the Risk and Reach Report.
 - Review of provider availability data provided stakeholders with an overview of the availability of providers by region, parish, and discipline. This data indicated shortages of physical and occupational therapists as well as other provider types in rural central and north Louisiana.
 - Review of the Strategic Plan

The EarlySteps Strategic Plan 2011-14 was reviewed for the status of the strategic directions, goals and action steps. Completed activities were identified and new areas of focus were added. Discussion also included a review of each committee's structure and focus. As a result of the initial data review and the discussion of status of the Strategic Plan activities, the participants agreed that the focus of the work for the SSIP could be addressed through three workgroups to address the strategic plan priorities and to move into the SSIP required components. The recommended workgroups include:

- Early childhood outcomes workgroup to address Indicator 3 data,
- Professional development workgroup to address training needs and,
- Resource availability to address provider shortages.

Participants were asked to sign on for their particular area of interest and chairs and co-chairs were solicited for the 3 workgroups. The SICC Executive Committee reviewed and made recommendations for additional participants based on a stakeholder representation (parents, providers, etc.) and geographic representation and formalized the selection of Chairs and Co-chairs.

Results of Strategic Plan Review and Data Analysis:

- Data review clearly indicated the need for an improved process for reporting for indicator 3. Louisiana will not be able to demonstrate improvement in results from any system or practice changes as long as the process for collecting and measuring child outcomes remains the same. Of particular concern is the large number of children in progress category a, that is, children who do not show progress from entry to exit or children who show regression. Also of concern is the very small number of children in progress category b, that is, children who improve functioning, but not sufficiently to be comparable to same-aged peers. Stakeholders agreed that the business rule changes or another measurement process or tool must be considered so that more children show appropriate progress by which to measure the impact of system improvement changes, such that Louisiana is not an outlier when compared to other state's results, and so that child progress resulting from intervention supports can be adequately demonstrated, especially to families. Discussion was also held regarding aligning these efforts with the LDOE Act 3 initiative including changing the measurement tool to the AEPS (used for 619 outcome measurement) or to the *Teaching Strategies Gold* (used as the Act 3 child improvement measurement tool). Stakeholders felt that improvement to the child outcomes measurement must be made to support any SSIP practice changes designed to demonstrate the benefit of early intervention. Therefore, the focus on child outcomes was determined to be a very clear choice for Louisiana's State-identified Measurable Result (SIMR). The Early Childhood Outcomes (ECO) workgroup was established to address this area. The selection of this area of focus is the result of the data analysis and input from Louisiana's stakeholders. While the child outcomes data appears to indicate that children do not make progress, based on the interventions provided and the stakeholder discussion, providers suggest that the BDI-2 results do not reflect actual child progress and that children do improve from entry to exit.

- Data reviewed from service provider availability data reports by region and discipline indicated need for increased provider availability/capacity for central and north Louisiana and in rural areas of other parts of the state. The Resource Availability workgroup will address this area of need. Additional data was requested and analyzed by the workgroup. Strategic plan activities were updated to reflect the focus on this area. The activities in this area will continue as a focus for improvement as part of the Strategic Plan, but will not be part of the SIMR.
- Resulting from the review of the strategic plan activities, discussion regarding the focus for the 2011-2014 strategic plan activities indicated an ongoing need to address effective team-based service delivery. Review of activities indicated a renewed interest in continuing the focus on team-based service delivery as an evidence-based practice which could improve service delivery, service availability, and incorporate data-based decision making as a focus for team functioning. These improved practices will result in improvements in child and family outcomes from early intervention.
- Louisiana had previously developed additional quality indicators to improve system performance through a 2010 Quality Assurance Project which Louisiana participated in with SERRC and the Data Accountability Center (DAC). The discussion identified the need to continue the focus on developing and implementing IFSPs which address family-identified needs and priorities, specifically, the use of the family assessment to identify family concerns and priorities regarding their child's development to develop and focus the IFSP outcomes. This initiative was previously started with some IFSP quality review data, but the stakeholders strongly felt that its implementation at this time could result in child and family outcome improvement.
- As part of the discussion regarding the alignment of the SSIP activities with the Act 3 Early Care and Education initiative the focus for supporting teachers and caregivers of EarlySteps-eligible children in Child Care settings was recommended as a focus for improvement. EIDS data for children receiving support in child care is not robust enough to allow for much data disaggregation in that the current report just provides a count of children in that setting. Additional data analysis was recommended to further explore this Strategic Plan focus.

Data Analysis Discussion

During the initial data review at the September, 2013 meeting, stakeholders requested information with which to further consider the data, resulting in the need for additional disaggregation of the data by region and by provider. Also, data reporting needs for information not currently available were also identified.

Disaggregation of data by region:

- Child Outcome data for the three domains were disaggregated by region
- Number of exit outcome evaluations available disaggregated by region
- Indicator trend results were compared across an indicator or indicators. For example Indicators 4a, 4b, and 4c were compared and it was noted that 4a and 4b trended closely compared to 4c. Other similar comparisons were reviewed.

Despite the acknowledged problems with Louisiana’s child outcome measures process and results stakeholders observed interesting trends regarding disaggregated child outcome data by region:

- lower numbers of available exit data in 2 regions compared to all available exits and
- higher percentages of children in progress category a in one region in the social emotional domain and use of behavior to meet needs, but not in that same region in acquisition and use of knowledge domain.
- In addition, training needs of evaluators including follow up reviews for BDI-2 implementation fidelity resulted in a need to be addressed as a focus for a professional development workgroup. The SICC has always had a CSPD committee, and members felt that a workgroup addressing professional development and training needs was needed for the SSIP. The SICC and stakeholders identified activities for this workgroup. Stakeholders requested that the outcome measures report generated by EIDS add a field to the report which identifies the evaluator to consider any additional trends related to specific evaluation providers.
- Discussion was held about the value of additional disaggregation of the Indicator 3 data given that the business rules for the measurement process were in question. The group concurred that options for more in-depth analysis should be considered as changes in the measurement process are implemented. Additional data reports are needed and will be developed as part of ongoing evaluation of the SSIP. Recommended were:
 - Child outcomes by disability category,
 - Child outcomes by evaluator, and
 - Applying business rules from other states that use the BDI-2 for outcome reporting to Louisiana’s data
 - Team meeting participation by discipline, type of meeting
 - Child outcomes by setting (specifically child care)

Results of Indicator 3 discussion: an SICC workgroup was formed to address the concerns about the data and make recommendations to the lead agency for improvement. Stakeholders were committed to not only improving the process, but developing a clear message to describe how children improve in EarlySteps. Therefore, it was determined that the two progress categories (d and e) which show children exiting at a level comparable to their same-aged peers should increase to at least the level of national data and be used as the data source to measure progress for the SSIP. The table below illustrates the application of the data:

Current Performance:

<i>Area</i>	<i>Current Louisiana Data (2013-14)</i>	<i>Compiled Louisiana Data (2007-2014)</i>	<i>Current National Data (2012-13)</i>	<i>Compiled National Data (2007-2013)</i>
Category d	17.9%	14.6%	33%	30.55%
Category e	24.5%	25.26%	24%	27.66%
Categories d and e combined	42.5%	39.86%	57%	58.3%

- For the quality indicator on completion of family assessments on IFSPs, stakeholders noted improvement in the percentage of family assessments completed from the initial monitoring

(80% of IFSPs) to some 2013-14 data (90% of IFSPs). There is no current data-system measure for family assessments and it requires chart review by regional coordinators. Coaching on conducting the family assessment and its use to develop IFSP outcomes is part of the ongoing TA provided by the regional coordinators with FSC agencies and will be a focus for improvement strategies.

- In review of team meeting participation, data points available for reporting do not allow for calculation of IFSP team member participation in team meetings. The report currently just provides counts by authorizations and claims. An additional report is needed to drill down further into this data as part of the upcoming improvement activities. Team-based decision making is a focus for improvement strategies.

Analysis of APR Compliance Data

As part of the data analysis component in Phase I, stakeholders also reviewed trend data for compliance Indicators 1, 7, 8 and 9. Louisiana has shown improvement over the SPP period in compliance performance results as shown by its recent determinations of “Meets Requirements.” No barriers to improvement were identified through this discussion of compliance indicator data, beyond what is reported in the APR.

- Trends for Indicator 1 (Timely services) were of particular interest to the Resource Availability workgroup members. Lack of provider availability has been cited as a main barrier to services not being delivered timely, especially in certain geographic areas of the state, primarily rural central and north Louisiana. Additional data was subsequently provided to the workgroup that detailed the distribution of providers by discipline across the regions and parishes of the state to assist in developing improvement activities for the Resource Availability workgroup. Data for Indicator 1 requires cross-walking EIDS and MMIS data (from Medicaid’s fiscal intermediary data system) which can be cumbersome in attempting to identify children in both systems. Disaggregation of the provider data will also assist in identifying areas of the state where provider recruitment is necessary. Strategic Plan Action Steps have been added to the Resource Availability Workplan.
- Trends for Indicator 7 (45-day timeline) reveal consistent improvement over the SPP period. SPOEs have developed tracking systems to improve performance in this area. No barriers were identified. Monitoring activities will be conducted during Phase II to verify that appropriate documentation is available to support the designation for “family reasons” for delays in SPOE charts.
- Trends for Indicator 8 (age 3 transition)
 - Performance for 8a (IFSPs with steps and services) and 8c have shown a general upward trend since the baseline year. When 8a and 8c are compared together, the trend lines basically mirror each other with the exception of 2006-07.
 - With LDOE staff participating in the data analysis, stakeholders reviewed LEA participation and on-time conferences compared together and noted regions of the

state where LEA transition conference participation has declined. This observation resulted in recommendations for Strategic Plan activities in these regions.

- Data for Indicator 8 requires chart review as part of the process.
- Trend for Indicator 9 (Timely Correction)—EarlySteps has been trending upward in its performance for this indicator. The state has developed strong tracking processes for regional staff to monitor correction of findings. The result of the Quality Improvement Project that Louisiana developed with DAC and SERRC has been the major factor effecting improvement for timely correction.

Analysis of National Data and State Initiatives

- National data from other sources—*Kids Count* Data—Louisiana continues to trend, from many sources, with several of the indicators which place children at risk of successful outcomes, such as number of children born at low birth weight (improved at 8%), children in single parent homes (worsened at 35%), children living in poverty (worsened at 13%) with an overall national ranking of 47th, which is an improvement from 2010 at 49th.
- State data from the Fall, 2012, *Early Childhood Risk and Reach in Louisiana* report--This report provides similar data as the Kids Count resource but performance is also disaggregated by parish in the state. Review of the data indicates those parishes in the state with the greatest risk factors, including 37 parishes which rank in the High Risk category on at least one of the five economic risk factors and 3 parishes comprising all five of the risk indicators. Similar trends are identified in the areas of education and health in this report.
- Data from Louisiana’s Act 3 Early Care and Education Initiative--Since 2012, Louisiana has been implementing an early childhood care and education system improvement initiative referred to by its authorizing legislation as “Act 3.” The main focus for the initiative is to improve the percentage of children who demonstrate readiness for Kindergarten. Currently the LDOE reports that only 54% of Louisiana children demonstrate Kindergarten readiness. The framework and the LDOE implementation recommendations were reviewed by SSIP stakeholders including:
 - the development of birth to five early learning standards,
 - improvements to the licensing requirements for early care and education programs,
 - development of and transition to a new quality rating process,
 - identifying a child assessment process,
 - development of a uniform application process for local early childhood program seats,
 - preservice and postservice training to strengthen the workforce, and
 - implementation of system changes through early childhood network pilots.

The Act 3 initiative includes all publically-funded early care and education programs in Louisiana including child care programs which accept CCAP funds, Early Head Start, Head Start, 619 programs for 3-5 year olds with disabilities, publically-funded 4-year old classrooms in public

schools and in private schools. EarlySteps has been a participant in the development and implementation of the system in developing strategies to support caregivers where infants and toddlers with disabilities receive the services from the Act 3 networks. As part of the development of the Act 3 system, the LDOE is implementing the requirements through parish/regional pilot networks which include the programs listed above. As of the 2014-15 school year, all areas of the state will be piloting the requirements. EarlySteps staff participates in the network cohort leadership teams to address issues specific to needs of children with disabilities and their families in the networks. As part of the resource identification available through the Act 3 initiative, approximately 800 EarlySteps providers and staff participated in web-based training introducing network members to the Act 3 requirements. This training was available to providers at no cost to the early intervention system. This resource for training is being explored as a shared resource to improve availability of training EarlySteps providers.

The process for demonstrating improved child outcomes for Kindergarten readiness was discussed. The early childhood workgroup agreed that EarlySteps should consider aligning its child outcomes measurement process with the Act 3 initiative process as well as identifying ways EarlySteps providers can support caregivers in childcare and Early Head Start settings. In addition, recommendations made to the LDOE regarding Act 3 supports to children with disabilities should be added to the EarlySteps workplans.

- Review of OCDD System Transformation Initiative--DHH is the lead agency for EarlySteps which is located in the Office for Citizens with Developmental Disabilities (OCDD). A major activity for OCDD in 2012-13 was to propose a redesign of its developmental disability service system referred to as "OCDD System Transformation." Focus areas for improvement through this initiative include:
 - the DD system eligibility determination and entry process,
 - needs-based assessment and resource allocation,
 - the Medicaid waiver services registry,
 - supports planning and service array,
 - support coordination,
 - the provider network,
 - quality indicators,
 - administrative structure, and
 - stakeholder engagement.

Data reviewed for this project included the large number of persons on the Medicaid waiver registry (waiting list), service utilization, status of eligibility processes/approvals, effective transition of children exiting EarlySteps into the DD system, and methods to improve identification of service needs and utilization. The impact of the analysis and system planning has been for the office to align with DHH's initiative to move the service system into a managed care model which will incorporate the system transformation goals and DHH's goal to streamline its Medicaid services using a managed care model. It is felt that the result of aligning this initiative with the Part C SSIP will be to provide a unified DD system infrastructure offering

opportunities to leverage resources to combine and streamline EarlySteps and other DD system components thereby reducing duplication of infrastructure components such as eligibility determination, support coordination, provider enrollment and claims processing, data maintenance and reporting.

- Review of DHH/OPH/OBH Project LAUNCH activities--In 2013-14, the DHH Offices of Public Health and Behavioral Health were awarded a Project LAUNCH grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). Following the grant award, the Project began with a review of child, family and provider needs in the state. EarlySteps is participating in this initiative at the state level through the Child Wellness Council and at the regional level in the identified pilot region. As a result of parish level data reviews of the state's Maternal and Child Health Profiles, the project will support increased screening and assessment of child/family mental health, integration of behavioral health services into primary care settings, and to increase workforce knowledge of children's social and emotional development with a focus on supporting EarlySteps providers in their work with families and with caregivers in child care settings. Data reviewed for this initiative included:
 - training needs identified by providers,
 - availability of supports for behavioral health needs,
 - a needs survey completed by the child-wellness collaborative members, and
 - the Maternal Child Health Profile data from parishes in the Project LAUNCH target region including birth rates and other infant health indicators (birth weight, preterm birth, mortality and risk factors).

Participation in these activities will provide an opportunity to leverage training resources for EarlySteps providers to support children in child care settings.

- Review of the DHH ADHD initiative--DHH began a department-wide initiative with the goal of increasing effective assessment, diagnosis, and treatment of ADHD within the state. Data review indicates that Louisiana has very high utilization of medication as a treatment for ADHD and more specifically, high medication utilization rates among younger children. An internal workgroup was appointed to consider ways to address this issue. A state symposium was then held to expand the discussion across many stakeholders including universities, families, physicians and other healthcare providers, and mental health professionals. As part of the data review, it was determined that among the groups of children who are at increased risk of an ADHD diagnosis are children who are eligible for EarlySteps, that is, children who are preterm, children with autism, and children who are substance-exposed. EarlySteps will be involved in the initiative to identify and support families whose children have these established medical conditions to identify resources to support the family with their child's social emotional development and to identify and develop evidence-based prevention strategies which may minimize the impact of ADHD to child and family functioning.

Data Quality Discussion

Stakeholders reviewed EarlySteps data detailed above and with the exception of Indicator 3 data, data quality for performance indicators was not identified as an issue. The state utilizes a Central Finance Office (CFO) contractor to support its data collection and management and to meet its data reporting requirements. The SPOEs are responsible for the child-specific electronic and hard copy records and conduct all the data entry into the system, called EIDS. Providers enter claims data for billing, but must submit hard copies to the SPOE to maintain records for required data elements. SPOE staffs enter all data into the system which is centrally aggregated and available to central and regional office staff. EIDS is designed with data entry protocols to support quality, such as entry for dates, not allowing for revisions to referral dates for timelines to be adjusted, etc. EIDS now requires an upgrade to its server platform and the ability to increase real-time data access. These were cited as infrastructure limitations to the current system and are being addressed with the CFO now. The ability to analyze the currently available reports had been improved through reporting system upgrades accomplished in 2013-14.

Data for APR and other reporting is collected in the following ways:

- Indicator results for Indicators 2, 3, 5, 6, and 7 and IDEA 618 reports: child count, exit and settings, are generated solely by EIDS through standard reports. Not only are the reports generated for annual reporting but for agency monitoring monthly by the SPOEs for self-reporting, for desk review for TA, or for onsite monitoring.
- Indicator 1 and 8 data results use a combination of EIDS reports and chart review. Indicator 1 requires additional review due to some service claims being paid by directly by Medicaid meaning this data is not available in EIDS and requires cross-walking with Medicaid MMIS. Indicator 8 a and c data require chart review for IFSP steps and services. Indicator 8b data is available through EIDS.
- Indicator 3 child outcomes data does have data quality issues related to the processes for calculating child progress, but is unrelated to the quality of data that is entered in EIDS, rather a function of the business rules process for assigning children to the progress categories. During 2014-15, regional coordinators have been conducting data validation reviews to verify data entry quality, look for trends in results such as child diagnosis, evaluator performance, etc. In addition, increasing the number of children for whom exit assessments are available is an improvement strategy for the ECO workgroup.

Due to the robust nature of EIDS, Louisiana feels that its data quality overall is a strength of its infrastructure and will enhance the state's work on the SSIP. As Phase I planning has proceeded, the lead agency has involved the CFO in identifying additional data needs including, potential data elements not currently being collected, and identifying reporting needs. Regional staff use state-developed protocols when conducting on-site monitoring to review quality of data entry. Data system reviews are also conducted to review data entry quality, both by the SPOE and by regional and central office staff.

Analysis of State Infrastructure to Support Improvement and Build Capacity

Process for Infrastructure Analysis

From December, 2013 through April, 2014, the state leadership team met to develop the process for addressing each of the SSIP Phase I components. The description of the stakeholder involvement in the SSIP, including the infrastructure analysis component, is reviewed in the Data Analysis section earlier in this document and outlined in the Tables attached to Indicator 11 in GRADS 360°. The following activities outline the SSIP Infrastructure Analysis work:

- At its February, 2014 meeting, Grace Kelley used the *SERRC Broad Infrastructure Analysis Template* to begin the discussion of the EarlySteps Infrastructure. The draft of this template was reviewed with stakeholders as well as how it would be used to outline the essential functions of the EarlySteps system within each component area: governance, fiscal, quality standards, professional development, data, technical assistance and accountability.
- Following the meeting, the program manager and SERRC TA consultant updated the tool to crosswalk it with the strategic plan, the 3 SSIP workgroup plans, action items to be addressed by the workgroups, against the previously-identified QA project quality indicators, and against the implementation science framework.
- State staff participated in the May, 2014, ECTA Infrastructure Analysis webinar. Regional staff were asked to review the webinar when the recorded version was posted.
- The program manager and SERRC TA consultant developed a process to conduct the more in-depth infrastructure analysis at the July 2014 workgroup meetings.
 - All workgroup chairs and members were sent the link to the ECTA Infrastructure Analysis webinar and asked to review prior to the July meeting.
 - An Adobe connect meeting/call was held with the chairs to outline activities for the July meeting including review of facilitation questions specific to each workgroup's focus and reviewing the infrastructure analysis tool and the webinar, and the content discussed at the February meeting.
- At the July, 2014 meeting, a brief presentation was made to all workgroup members regarding each workgroup's task for the morning in discussing infrastructure analysis and adding to the information collected in February, as well a brief review of the infrastructure analysis activity. The stakeholders broke into their respective workgroups and completed the activity using the tool as guided by the facilitation questions. Each workgroup recorded their work which was then sent back to the lead agency to compile across the 3 workgroups. The compiled information was sent back out to the workgroup members to confirm that it represented their discussion.
- To elicit additional participation beyond stakeholders who participate at state-level meetings, the regional coordinators used a SWOT analysis approach to look at strengths, weaknesses, opportunities and threats of the system as perceived by the regional stakeholders. A presentation deck was developed to use at their quarterly regional meetings for a brief overview of the SSIP requirements and the contribution of the SWOT activity to its development. The RICC stakeholders addressed the SWOT areas using a

facilitated discussion process addressing the areas of Professional Development and TA, Fiscal, Governance, and Accountability and Quality, and the Data System. Results of the analysis were compiled by component area and region. The compiled results were then reviewed by the members of the 3 SICC workgroups for additional considerations for the State's infrastructure analysis as well as to identify areas to be addressed through the 3 workgroup workplans. In addition, region-specific issues were identified and plans to address those SWOT areas will be addressed by the respective regional coordinators as part of Phase II Infrastructure Development. Activities will include the establishment of local implementation teams to support improvement at the level of the early interventionists in the region to improve practices which will improve child outcomes.

Results of Infrastructure Analysis

Through this activity, Louisiana identified the strengths and weaknesses of its infrastructure in each of the component areas: Governance, Fiscal, General Supervision (Accountability) and Quality, Data, Professional Development and Technical Assistance. The SERRC Infrastructure Analysis Template was adapted to align the Strategic Plan workgroup activities with each of the system infrastructure components. The Infrastructure Analysis is attached separately to Indicator 11 in GRADS 360°.

The infrastructure analysis revealed areas of high performance as the:

- Governance structure across all areas of the state, strong stakeholder involvement, the SICC-Lead Agency joint Strategic Plan. The availability of regional coordinators in each region was also cited as a strength.
- Quality Standards –the lead agency use of a continuous improvement process focused on quality initiatives
- Data support through EIDS allows for robust data resources and opportunities to enhance and revise and develop report capability as needed. The process for measuring child outcomes was also identified as a weakness.
- Training--Provider completion rates (100%) of entry-level training modules greatly improved with the requirement to complete the modules as a condition of enrollment.

The infrastructure analysis revealed areas of low performance:

- Fiscal resources resulting in lack of a professional development model using the Implementation Science Competency driver approach (specifically coaching and mentoring). Currently the system is focused largely on the training function only, and has not supported ongoing coaching to fidelity with the exception of team supports to families of children who have or are at risk of an autism diagnosis, a model which was originally developed and funded through ARRA funds. The lead agency recognizes this component as an area needing state improvement, but with limited revenues, has not been able to reliably sustain this focus or scale it more broadly across the state.
- Accountability/Quality system: the central office quality assurance position has not been filled, requiring these activities to be shared across all staff. Although monitoring activities are ongoing, the loss of the coordinating function provided by the state-level coordinator has an ongoing impact in development and implementing quality initiatives systemically.
- Professional Development system: Due to state budget problems, contracts for training have not been let recently, forcing reliance on online modules and technical assistance focused on monitoring rather than face-to-face training events and other evidence-based

professional development strategies which would better support the implementation competency driver.

- Governance Area: Although cited as an area of infrastructure strength, this area has one aspect identified by the stakeholders that contributes to low performance. This weakness is related to the independent vendor service model which results in service fragmentation despite the focus on team-based service delivery and limited provider participation in activities for which they are not reimbursed.

Following the identification of areas of low performance, the areas were aligned with the relevant workgroup activities or the workgroup activities were added to the groups' workplan address the area needing improvement.

The main areas of focus identified through the Infrastructure Analysis to increase capacity for improved early intervention system outcomes include:

- increased and improved professional development using the Implementation Science competency drivers of selection, training, coaching,
- the organization drivers related to facilitative administration, and
- system intervention for barriers related to funding.

Implementation activities to address the identified issues will include increasing capacity of regional staff in coaching providers. Since staff is in place in each region, enhancing their skills will utilize current capacity to build the sustainability of the competency requirements.

State-Identified Measurable Result(s) (SIMR) for Infants and Toddlers with Disabilities and their Families:

The EarlySteps system will improve child outcomes through supports that are focused on Family Concerns, Priorities, and Resources and provided through a team-based approach

The description of the process for stakeholder involvement in the development of this SIMR is included in the Data Analysis component section above.

Child Outcome Area:

The selection of this SIMR began to emerge as the lead agency presented the trend data for Indicator 3, as part of the data analysis component of Phase I. Staff and stakeholders identified this as a major area of needed improvement for the state. As mentioned earlier, Louisiana's child outcome data is not aligned with results/trends from other states and is also impacted by the low number of exit evaluations available for reporting.

A summary of data analysis and observations of the data from the data analysis component follows:

- Regional differences in child outcome results
- Large numbers of children in progress category a: children who show regression or children who show no progress from entry to exit scores
- Very small numbers of children in progress category b: children who improve their developmental trajectory but not sufficiently to move nearer to typical peers
- Exits results for 27% of children in the program for 6 months for whom exit data is available both statewide and with regional discrepancies.

Although the state had previously identified this as an area for improvement through its strategic planning activities (prior to beginning the work on the SSIP), the potential to align with the Act 3 work specifically, to switch to a similar tool (currently the *Teaching Strategies Gold*) to measure child outcomes to align with the other early care and education programs in the state and with the IDEA, section 619 program, the state had delayed making significant changes to the assessment process or to the measurement process. After working with the LDOE, reviewing the results of the early *Teaching Strategies Gold* data, it was determined that the use of the BDI2 for eligibility determination would

continue, at least in the short term. Improvements to the assessment and measurement process would be addressed through improvement activities identified by the SICC Early Childhood Outcomes workgroup before changes to another tool will be considered and as decisions on the continued use of the *Teaching Strategies Gold* in Act 3 are considered. Louisiana has been working with a BDI-2 community of practice which includes other states who use the tool for outcome measurement and TA consultants to review its business rules for placing children in the progress categories and to consider improvements to its child outcomes measurement process.

Based on Louisiana's past child outcome results process, the lead agency and stakeholders concluded that unless the process for measuring child outcomes is improved, any efforts undertaken in the SSIP to improve the early intervention system practices will not demonstrate improvement in child outcomes.

Through discussion with stakeholders throughout Phase I, the focus for improving the state's use of evidence-based team practices and improved use of the family assessment to develop IFSP outcomes was identified as a way to improve an infrastructure weakness of the state's the independent vendor model. This service model can result in a fragmentation of services and supports to families with providers functioning independently of other team members and resulting in duplication of effort, inconsistency in implementing IFSP outcomes, and lack of effective communication across team members, including families and caregivers in child care.

Selection of Coherent Improvement Strategies

Process for Selection

The Data Analysis component discussion above and attached Tables outline the stakeholder involvement and analysis process used by the lead agency and SICC to address the Phase I components of the SSIP, including selecting the coherent improvement strategies.

Following the September, 2013 state leadership team meeting during which initial data analysis was conducted and the Strategic Plan was reviewed, there was consensus by all participants for the need to improve the process by which the child outcome data is calculated. This became a major focus for SSIP Phase I development and led to the formation of the early childhood outcomes (ECO) workgroup whose task is related specifically to these activities. The other two other workgroup improvement plans (Professional Development and Resource Availability) were already identified as points of focus through previous work conducted as part of the strategic planning and confirmed through data review and infrastructure analysis and identification of other state initiatives for alignment. The alignment of the SIMR with improvement areas already identified in the SICC-Lead Agency Strategic Plan as supported by the activities of addressing the components of Phase 1, led to the state's selection of the coherent improvement strategies which follow. For Louisiana, they are the logical outcome of the quality improvement work initiated by EarlySteps, the SICC, its stakeholders and families beginning in 2008 with the development of its first joint SICC-Lead Agency Strategic Plan.

The reference section which follows at the end of the SSIP, outlines the resources reviewed by stakeholders and/or the lead agency to identify data used in the Phase 1 review as well as evidence for strategies for Louisiana to support its system improvement work, including:

- Louisiana's Indicator 3 data review for which results in the state's performance is considered as an outlier compared to national data,
- Evidence supporting IFSP outcome development using family concerns, priorities, and resources (CPRs),
- Available research on team-based service delivery and decision-making to meet family needs and best practices to identify system resources needed to support children and families,
- Evidence supporting the identification of family needs through family assessments and using results of the assessment to develop outcomes for the IFSP,
- Evidence for judging the quality of IFSPs, and
- Evidence supporting system of professional development using a coaching and mentoring model

The data and infrastructure analysis components of the Phase 1 activities confirmed needs identified by the lead agency and stakeholders as areas for improvement. The timing for these activities fit well with other state initiatives identified in Data Analysis section above. Alignment with these state initiatives will provide support for professional development and infrastructure needs through shared resources. Improvements to the process by which child outcomes are measured will ensure data quality improvements and allow for the planned system improvement strategies to demonstrate improved child

outcomes. Improvements to team-based decision making will ensure that data from child and family assessments are used to determine IFSP outcomes and services thereby improving not only child outcomes, but outcomes for families. Improvements to the professional development system such that competency drivers include coaching to fidelity will support maintenance of the implementation.

Louisiana's Coherent Improvement Strategies

Through its strategic planning process to address quality improvement in the EarlySteps system, three strategic directions have provided the focus for the state's quality improvement work since 2011:

- Improving the System
- Enhancing Services and Accountability
- Improving Efficiency and Access

Each of strategic directions has goals and action steps associated with it to outline activities for improvement through the plan. Through the 2013 review of the activities accomplished to date in the Strategic Plan, review of performance and other system data, and a renewed focus on improvement through the SSIP requirement, Louisiana has identified the following coherent improvement strategies in the 3 focus areas:

Strategies which address Early Childhood Outcomes:

- Through an improved outcomes measurement process, there will be an increase in the number of infants and toddlers exiting the program at or above the level of their typically developing peers
- Through development and implementation of IFSP outcomes which reflect family concerns and priorities, there will be an increase in the number of infants and toddlers exiting the program at or above the level of their typically developing peers

Strategies which address Professional Development:

- Through participation of all EarlySteps providers in a standardized, comprehensive professional development system which focuses on identification of family concerns, priorities and resources and support provided through team-based decision-making practices, there will be an increase in the number of infants and toddlers exiting the program at or above the level of their typically-developing peers and improved family outcomes.

Strategies which address Resource Availability:

- Through the use of effective team-based decision making, early intervention resources will be more effectively identified and available to meet child and family concerns and priorities without regard to area of residence in the state resulting in improved child and family outcomes.

Theory of Action

Development of the Theory of Action

The state's theory of action reflects not only the focus of the stakeholders and lead agency in the Phase I work, but also of the infrastructure components used to assess the state's work. As described in an earlier section regarding the involvement of stakeholders, the 3 workgroups met throughout 2013-14. In October, 2014, the focus for their activities was to finalize the theory of action. To prepare for the activity:

- A presentation deck was developed based on a presentation from the North Central RRC and modified to reflect Louisiana's work. This presentation outlined the concept of the theory of action as part of Phase I and showed a variety of visual representations that could be considered for a theory of action.
- A format was drafted by SERRC staff and modified by the lead agency for the workgroups to consider as the process to address the areas of focus or "tell the story" for their workgroup.
- Each workgroup individualized their *if and then* statements across the component areas (governance, professional development, general supervision, fiscal, and local/regional support).
- Their results were compiled across these components into the "If" statements in the resulting document.
- The workgroups reviewed the final document at the January 2015 SICC meeting to verify that the final version represented their work.
- Approximately 40 stakeholders participated in this activity.

As a result of the ongoing processes utilized to address the Phase I components, the state's Theory of Action is felt to be a logical representation of the work of the stakeholders, the lead agency and the SSIP. The Theory of Action is attached to Indicator 11 in Grads 360°.

References/Resources:

As part of the state's work to address the components of the SSIP and identify evidence-based practices for implementation, staff and/or stakeholders reviewed the following references/materials.

Data Analysis Resources:

APR Indicator Analyses (FFY 2011), *State Performance Plan/Annual Performance Report: Part C*. OSEP IDEAS that Work and TA&D Network.

Early Childhood Risk and Reach in Louisiana. LSU/Tulane Early Childhood Policy and Data Center, Fall 2012.

Hallam, R.A., Rous, B., Grove, J., and LoBianco, T.(March, 2009), Level and Intensity of Early Intervention Services for Infants and Toddlers with Disabilities. *Journal of Early Intervention*, 31(2) 197-196.

2012 Kids Count Data, *Kids Count Data Center*, <http://www.datacenter.kidscount.org>

Resources for Family Assessment/Improving Family Outcomes

Bailey, Jr., DB, Bruder, MB, Hebbeler, K, Carta, J, Defosset, CG, Kahn, L, Mallik, S, Markowitz, J, Spiker, D, Walker, D, and Barton, L, (2006) Recommended Outcomes for Families of Young Children with Disabilities. *Journal of Early Intervention*, 28(4), 227-251.

Dunst, CJ, Bruder, MB, and Espe-Sherwindt. (2014), Family Capacity-Building in Early Childhood Intervention: Do Context and Setting Matter? *School Community Journal*, 24(1), 37-48.

Epley, PH, Summers, JA, and Turnbull, AP. (2011), Family Outcomes of Early Intervention: Families' Perceptions of Need, Services, and Outcome, *Journal of Early Intervention*, 33(3), 201-219.

Turnbull, AP, Summers, JA, Turnbull, R, Brotherson, MJ, Winton, P, Roberts, R, Snyder, P, McWilliam, R, Chandler, L, Schrandt, S, Stowe, M, Bruder, MB, Divenere, N, Epley, P, Hornback, M, Huff, B, Miksch, P, Mitchell, L, Sharp, L, Stroup-Rentier, V, (2007) Family Supports and Services in Early Intervention: A Bold Vision, *Journal of Early Intervention*, 29(3), 187-206.

Resources for Team Based Decision Making/Data-informed decision making.

Case-Smith, J., and Holland, T. (October, 2009), Making Decisions about Service Delivery in Early Childhood Programs. *Language, Speech and Hearing Services in Schools*, 40, 416-423.

Dinnebeil, Hale, L, and Rule, S (1999) Early Intervention Program Practices that Support Collaboration. *Topics in Early Childhood Special Education*. 19(4), 225-235.

Jung, LA, and McWilliam, RA. (2005), Reliability and Validity of Scores on the IFSP Rating Scale. *Journal of Early Intervention*, 27(2), 125-136.

McGonigel, MJ and Garland, CW (1988), The Individualized Family Service Plan and the Early Intervention Team: Team and Family Issues and Recommended Practices, *Infants and Young Children*, 1(1), 10-21.

Rapport, MJ, McWilliam, RA, Smith, BJ, (2004), Practices across Disciplines in Early Intervention: The Research Base. *Infants and Young Children*, 17(1), 32-44.

Winton, PJ, McWilliam, PJ, Harrison, T, Owens, AM, Bailey, Jr, DB, (1992) Lessons Learned from Implementing a Team-based Model for Change. *Infants and Young Children*, 5(1), 49-57.

Younggren, N, (April, 2003) *Multidisciplinary, Interdisciplinary, Transdisciplinary: A Family-Centered Continuum*. Educational and Developmental Intervention Services (EDIS).

Resources for other Early Intervention/Early Childhood Evidence-based practices:

Buyse, V., Wesley, PW (2006), *Evidence-Based Practice in the Early Childhood Field*. Zero to Three Press, Washington, DC.

Dunlap, G, et al (2003) Research Synthesis on Effective Intervention Practices: Executive Summary, Tampa, Florida: University of South Florida, Center for Evidence-Based Practice: Young Children with Challenging Behavior.

Smith, BJ, Strain, PS, Snyder, P, Sandall, SR, McLean, ME, Ramsey, AB, and Sumi, WC. (2002), DEC Recommended Practices: A Review of 9 Years of EIIECSE Research. *Journal of Early Intervention*, 25(2), 108-119.

Wolery, M. Bailey, Jr., DB (2002), Early Childhood Special Education Research. *Journal of Early Intervention*, 25(2), 88-99.

Workgroup on Principles and Practices in Natural Environments, OSEP TA Community of Practice: Part C Settings (2008, March). *Seven Key Principles: Looks Like/Doesn't Look Like*. Retrieved from <http://www.ectacenter.org/~pdfs/topics/families/Principles LooksLike Doesn'tLookLike3 11 08.pdf>

Resources for Implementation Sciences Materials/Tools

From Research to Practice: Professional Development, Technical Assistance and Implementation Science, *early developments*, 2013 (14:2)

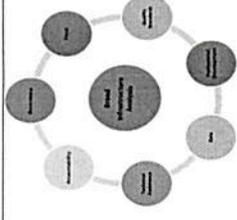
Halle, T, Metz, A, and Martinez-Beck I. (2013) *Applying Implementation Science in Early Childhood Programs and Systems*. Paul H. Brookes Publishing, Baltimore.

Implementation Science Resources (Modules, Tools, Frameworks, etc.) available at
<http://implementation.fpg.unc.edu/> and
<http://ectacenter.org/implementprocess/implementprocess.asp>

Metz, A, Bartley. (2012), Active Implementation Frameworks for Program Success. *Zero to Three*,
March, 2012.

Infrastructure Analysis Template

State Systemic Improvement Plan Phase 1



Section A: Broad Infrastructure Analysis

Initially, a broad analysis of the state infrastructure is completed to determine systemic issues that may be a barrier to the performance of children and youth with disabilities. This broad analysis occurs simultaneously or immediately following the broad data analysis and prior to the identification of the focus area for improvement. The purpose of the broad analysis is to identify and document systemic issues that will be investigated further by conducting an in-depth analysis of the state's infrastructure (Section B- In-depth Infrastructure Analysis) and will lead to the identification of a focus area for improvement for the SSIP.

State: Louisiana
Dates Completed: February 12, 2014/July 9, 2014
Analysis Team:
Name: SSIP Small Workgroup; SSIP Ad-Hoc Workgroups
Positions: Workgroup members, Lead Agency Staff, Regional Coordinators, COSS, SICC members, family members, providers
The Stakeholder Involvement list indicates name, role, and participation activity
For this activity and other Phase 1 components.

Please complete an initial broad scan for each of the infrastructure components. Workgroups identified that each Component listed below will be required to address the SIMR. (ECO) indicates early childhood outcomes, (RA) indicates resource allocation, and (PD) indicates professional development workgroups.

SSIP Components	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
ECTA System Framework Components Implementation Driver SICC-ES Workplan				
1. Governance Organization Drivers	Part C housed in DHH, OCDD – Lead agency for Part C Program includes 4 central office staff	1. Guidance Documents will be	High performance: strong stakeholder	Equity Objective 1, Objective 2, Activity 2.7

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SSIP Components ECTA System Framework Components Implementation Driver SICC-ES Workplan	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
<p>Leadership Drivers EarlySteps workplan: Equity</p>	<p>ICC , Governor's office of Community Programs – advises and assists the lead agency – staff person Lead Agency-SICC have shared Strategic Plan which includes shared vision and strategic directions. Regional Staff--9 Regional ICC's – do not directly mirror state ICC- local/regional input , communication loop between state and regional SICC Stakeholder Structure—committees, workgroups Families (COSs) involved in decision making, training, etc. Provide information on regional resources, address system concerns/issues, training/TA Administrative structure: independent vendor model for services delivery SPOEs and FSC agencies are regionally based therefore covering all areas of their region.(RA) State Statute 28:461-470 Federal Statute Part C IDEA Bylaws of SICC- revised July 2010 EarlySteps Policies and Procedures Practice Manual OSEP and State-level Guidance documents</p>	<p>revised to reflect any changes. 2. Use of regional ICCs as TA mechanism may be enhanced 3. Coordination with Act 3 Early Childhood system redesign activities 4. Coordination with OCDD system transformation activities 5. Policies and guidance documents posted on website for easy access.</p>	<p>involvement since program began. <u>High:</u> Regional staff, SPOEs, FSC agencies available to reach all geographic areas of their region therefore covering the state.(RA) <u>Low:</u> independent vendor model contributes to service fragmentation despite focus on team-based service delivery. EIS' self-designate coverage area, resulting in areas of support needs. (RA) <u>Low:</u> Providers don't attend RICC meetings where updates, information, training take place (RA)</p>	
<p>2. Fiscal ECTA Framework: SC2, Q11b</p>	<p>Federal Part C State General Funds State Allocation – Medicaid Match Self-generated – Family Cost Participation</p>	<p>Funding for the program has been an ongoing issue and will be a factor for any costs associated with</p>	<p><u>1.Low</u> performance: lack of funds for professional development results in inconsistent</p>	<p>Equity Workplan: Activity 2.8 Add to Equity Workplan:</p>

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SSIP Components ECTA System Framework Components Implementation Driver SICC-ES Workplan	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
	<p>Lead agency – manages the federal and state funds</p> <p>DHH- Office of Fiscal Managements – manages Medicaid state and federal funds</p> <p>ICC funds managed by Governor’s office</p> <p>Provide contracts reimbursement through DHH</p> <p>Transportation costs paid to families to assist in accessing services in shortage areas (RA)</p>	<p>activities needed to implement the SSIP.</p> <p>SICC has Fiscal Management committee which researched possible funding mechanisms.</p>	<p>performance.</p> <p>2. <u>Low</u>: Manual scoring of BDI-2 (less costly) yields scoring/interpretation errors.</p> <p>3. <u>Low</u>—funding to support coaching(ECO)</p>	<p>1. “Travel team” used for outreach to rural/shortage areas.</p> <p>2. Temporary provider assigned to support team with less frequent visits.</p> <p>3. Incentives for providers to participate in SSIP</p>
3. Quality Standards	<p>Reports submitted re performance standards</p> <p>Part C performance indicators</p> <p>OCDD uses CQI approach across its systems</p> <p>Quality measure for Part C kids entering DD system</p> <p>Supplemental Performance Indicators</p> <p>OCDD Performance Indicators(ECO)</p> <p>Monitoring</p> <p>Professional expected to maintain licensing and certification related to their professional requirements</p> <p>Providers complete training modules on basic information on EI prior to receiving contract</p> <p>Availability of providers</p>	<p>Using supplemental performance indicators to set priorities and identify targets and measures for proposed SSIP activities.</p>	<p>Anticipated to contribute to High Performance as program quality would improve.</p>	<p>Indicator of Improvement: # IFSPs with No Provider Available will decrease(RA)</p> <p>Increased number of providers available in shortage areas(RA)</p>
4. Data Performance Assessment --data support fidelity of implementation	<p>Covansys CSC is contractor for the data system</p> <p>SPOE Contracts—manage all data entry into the data system</p> <p>All available data accessible at state level and at</p>	<p>1. Data “drill down” to further analyze components for Phase 1 work.</p>	<p>High: Data system is well-developed, detailed to capture many components</p>	<p>Use provider availability data to project future needs and plan for those(RA).</p>

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SSIP Components ECTA System Framework Components Implementation Driver SICC-ES Workplan	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
Organization Driver --Decision Support --Data System --Systems intervention EarlySteps Workplan: Equity	regional level. Monitoring data Valid and reliable	<ol style="list-style-type: none"> 2. Will need to determine potential changes/additions for data collection to implement SSIP 3. Will possibly need to develop mechanisms for data coordination across systems. 4. Will need standard process to share results of implementation at all levels and across systems. 5. Use of IFSP Data for analysis of ECO (ECO) 	Low: measure for calculating child outcomes needs revision	Use of data-based decision making by IFSP teams.(ECO)
5. Monitoring/ Accountability --Competency Driver --Performance Assessment (fidelity) Organization Driver -Systems intervention	Complaints filed Monitoring on site, Chart review EIDS and MIMIS data reviews Supervision and onsite TA Corrective Action Plans	Measures for program quality and implementation success will be developed and measured. Performance assessment and adherence to practice to ensure fidelity will have to be built.	<u>High:</u> Data system makes some data easily accessible and triggers need for follow up even with lack of manpower. <u>Low:</u> QA coordinator left and position not filled requiring redistribution of personnel resources and reduced ability to conduct onsite	Equity Workplan: Activity 2.6

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SSIP Components ECTA System Framework Components Implementation Driver SICC-ES Workplan	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
6. Professional Development Competency Driver --Training --Coaching	On line modules Licensure requirements for Professional area TA provided through regional coordinators who are the point person in every region who provides training and TA Central and Regional Staff have longevity with program. Some providers have longevity with program. Professional Development Contractors-training to evaluators (ECO)	Any system changes will require use of all competency drivers. 1. Department of Ed—Early Childhood 2. DHH-OCDD 3. DHH-OPH possible 4. Early Head Start grantees(ECO) 5. Selection process for initial training(ECO).	activities. Low: QA process to review evaluators/evals(ECO) High: Training contractors locally- based and knowledgeable—work closely with state staff. Low: All formal events handled through contracts which have been cut due to expenses exceeding revenue. Limited PD available resulting in performance slippage and inconsistency. Limited ongoing training which supports SISEP model(ECO) Low: mostly use “one- time” training model with limited follow up support.(RA) Low: Fee for service system impacts provider availability for training (RA)	Web-based training with follow up by Regional Coordinator(RA) System to support coaching/monitoring implementation(ECO): -Use of reflective questioning(ECO) -RBI embedded interactions(ECO) -coaching providers to coach families to support child outcomes (ECO) -supervision and support system for coaching(PD)
7. Technical Assistance Competency Driver --Training	TA provided through regional coordinators who are the point person in every region who provide training and TA	Ongoing TA will be required to ensure implementation	High: ● Onsite regional	New providers mentored by more experienced providers

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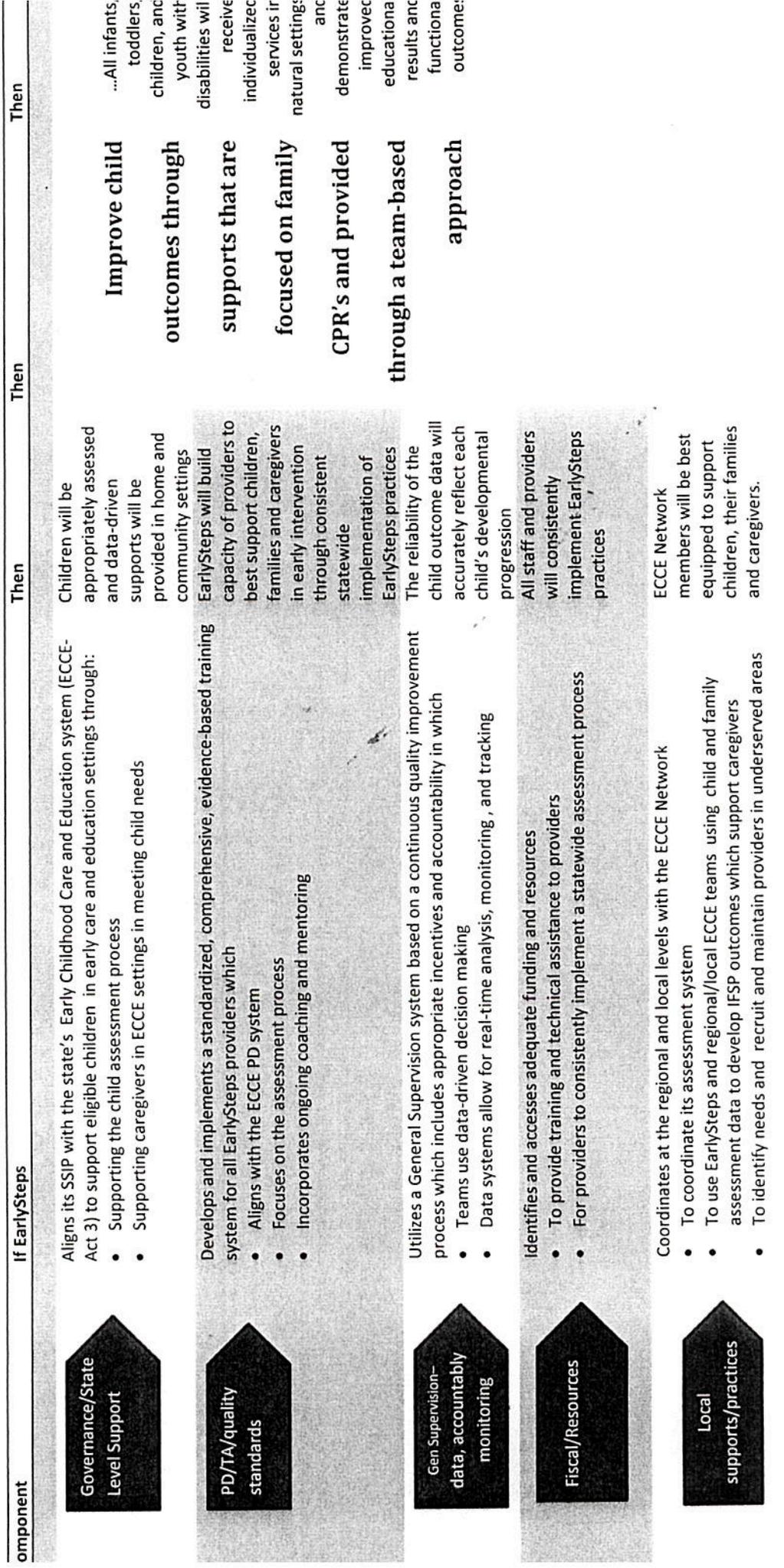
SSIP Components ECTA System Framework Components Implementation Driver SICC-ES Workplan --Coaching	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
	<p>Provided at state and regional level Informal and formal</p> <p>Access TA from regional, national TA providers</p> <p>Seven required modules available for new providers with completion timelines(PD)</p> <p>Limited training based on need provided through contracts(PD)</p> <p>TA to evaluators by Regional Coordinators(ECO) Family Survey(ECO) Data input for evals at SPOE(ECO)</p> <p>New Early Learning Standards available to support providers regarding child development and working in early learning settings.</p> <p>Connect Model teams(PD)</p>	<p>fidelity. The state will need TA to develop, implement and maintain system changes to make sure OSEP's expectations are met.</p> <p>--DOE-Act 3 training (PD)</p> <p>--Colleges/Universities have the 6 online modules to incorporate into courses.(PD)</p>	<p>staff available for TA and follow up after group professional development events.</p> <ul style="list-style-type: none"> • SERRC providing intensive support and very knowledgeable about Louisiana. <p>Low:</p> <ul style="list-style-type: none"> • Limited process to build in TA in a way which ensures implementation fidelity with independent provider model • Current TA staff would require training. • Online training modules don't have follow up component built in (PD) • No ongoing, consistent TA provided across the state (PD) 	<p>--develop core competencies for all providers(PD) --develop and implement ei certification/credential (PD)</p>

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SSIP Components ECTA System Framework Components Implementation Driver SICC-ES Workplan	Essential Functions	If yes, how? Describe Systems Coordination	Indicate if this component contributes to High/Low Performance	Propose Strategies to support SIMR/Workplan connection
			<ul style="list-style-type: none"> Mandatory training for all eis on all topics (PD) 	

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Theory of Action



...All infants, toddlers, children, and youth with disabilities will receive individualized services in natural settings; and demonstrate improved educational results and functional outcomes: