



IDEA PART C Annual Performance Report

FFY 2011

July 1, 2011

through

June 30, 2012

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Part C State Annual Performance Report (APR) for FFY 2011

Overview of the Annual Performance Report Development:

This APR is the seventh report of the progress toward the targets established in the State Performance Plan (SPP) on December 2, 2005 and extended on February 1, 2011. The SPP, APR and the performance of each regional site may be found at <http://www.maine.gov/doe/specialed/support/spp/index.html>. This APR reports the progress towards the Measureable and Rigorous Targets established in the SPP for all indicators. Child Development Services (CDS), the governmental entity that serves as an Intermediate Educational Unit (IEU) of the Maine Department of Education (MDOE), provides data and analysis for all of the Part C indicators and some of the Part B indicators due to the symbiotic nature of CDS' relationship with the MDOE, described in state statute: The MDOE Commissioner, "shall establish and supervise the state intermediate educational unit. The state intermediate educational unit is established as a body corporate and politic and as a public instrumentality of the State for the purpose of conducting child find activities as provided in 20 United States Code, Section 1412 (a) (3) for children from birth to under 6 years of age, ensuring the provision of early intervention services for eligible children from birth to under 3 years of age and ensuring a free, appropriate public education for eligible children at least 3 years of age and under 6 years of age." MRSA 20- A§7209(3)

Stakeholder Group Activities:

Maine Advisory Council on the Education of Children with Disabilities (MACECD) is the stakeholder group that provides guidance and support to the MDOE in the implementation of the SPP. The council started its 2011-2012 school year with a two-day meeting on September 15 and 16, 2011, that included a restructuring of committees and their role as the State Interagency Coordinating Council (ICC) and the State Advisory Panel (SAP). Following discussion of the recommended committees the group agreed that the group would move forward with four committees consisting of: Birth to kindergarten, Grades 1 to 8; Grade 9 to exit; and Due Process and Quality and Compliance Monitoring. MACECD's monthly agendas included items for the MACECD membership as well as committee breakout sessions. The committees assess data and then MACECD, in an advisory role, makes recommendations to the Commissioner of Education on unmet needs from the committees' respective subject areas. When applicable the recommendations are integrated into the operations of the MDOE (program review, dispute resolution, funding, technical assistance, professional development, and discretionary programs) to improve support to special education children statewide. Until the time of their last meeting in March 2012, the group provided guidance and support to CDS on the implementation of the SPP. Several opportunities were provided, during the groups meetings, to discuss improvement activities and no recommendations were made.

In March 2012, it was determined by the Governor that the State ICC and the SAP roles would be divided into two separate groups and function independently. At the time of review of this APR, ICC appointments had been made and have reviewed this report. The CDS State IEU has worked closely with the co-chairs and members of the council to educate them on the purpose and expectation of the ICC and the APR/SPP. The council has expressed excitement to work with CDS and have the ability to review and recommend improvement activities for the next report due in February 2014.

Child Development Services System:

Over the last year CDS has again, encountered change. In April 2012 the governance structure of CDS was changed to remove all regional site board of directors. Direct supervision became the responsibility of the CDS State IEU. The CDS State Director remained out on medical leave and in the fall of 2011, the Commissioner of Education named Cindy Brown as acting State Director. In the fall of 2012 Cindy was

appointed as CDS State Director. Within the fiscal year, the Opportunities regional site hired a new site director.

The nine regional site directors meet monthly, at the CDS State IEU located at the MDOE, for a Directors' Council meeting. The regional site directors facilitate the meetings. The meeting agendas include such topics as: procedures; regulations; and problem solving. Regular meetings provide opportunities for regional site directors to support one another. The CDS State IEU staff is invited to provide updates, technical assistance (TA), and answer any questions regional site directors may have.

The CDS State IEU Leadership Team meets regularly to discuss a variety of topics including fiscal, policy, data, human resource and site performance across all areas. The CDS State IEU Leadership Team is made up of the CDS State Director, Deputy Director, Quality Assurance Director, Data Director, Human Resources Director and the Finance Director.

The Case-e system is a web-based, State-level database which all regional sites access to provide the recording of child specific information relating to demographics, assessments, services, team meetings, Individual Family Service Plans (IFSPs), insurance information, and billing. Case-e continues to undergo improvements which support our ongoing oversight of the interrelationship of the fiscal, data, and monitoring systems and supports data gathering for the APR.

CDS State IEU assisted in the development of the State Personnel Development Grant (SPDG) application, which was awarded to Maine in October 2011. Within the grant there are two areas designated to assist in professional development for Part C. Goal 4 which is to increase the percentages of children, age's birth to two, receiving timely, evidence-based early intervention services in their natural environments by qualified personnel, with the objectives, to increase the numbers of IDEA Part C teams and personnel trained in implementing the evidence-based early intervention model and to increase the compliance of School Administrative Units (SAUs) (regional sites) in meeting the required steps/timelines in developing the IFSP. Goal 5 is to increase the percentages of SAU special education and related services personnel who can develop and implement effective, compliant transition plans and activities within timelines. Of the four objectives that span from early intervention to preschool transition and post-secondary transition objective 4 is to improve the percentages of SAUs with effective transition plans and activities for children with disabilities from IDEA Part C to Part B and preschool to kindergarten. Development of plans began in April of 2012 for those goals described above for regional site staff as well as contracted providers.

Alignment with National Technical Assistance Resources:

Maine utilizes technical assistance, professional development and dissemination resources throughout the State to provide scientifically based materials and instruction to educators, parents and interested parties. All contractors providing technical assistance to regional sites in the State are aligned with, and engaging in, the services of national technical assistance centers to provide the most current practice available. CDS contracted with an individual (Part C consultant) to provide TA, encompassing all Part C indicators, to Part C professionals throughout the year. She represented CDS at meetings at various state and national groups, managed Part C process document, assisted in creating the standardized Part C forms, attended training on new Part C regulations, provided training on the Part C process and forms to regional sites, participated in Northeast Early Intervention and Child Welfare Summit, attended CDS Directors' Council meetings, prepared training materials on natural environment, developed information for improving CDS Child Find efforts, and led Part C professional development committee. All work done by contracted individuals must be consistent with Office of Special Education Programs (OSEP) SPP and APR indicators as well as Maine Unified Special Education Regulations (MUSER).

Additionally, CDS has requested assistance in the areas of natural environments for birth to two, eligibility timelines, unmet needs, Expanding Inclusive Opportunities, child outcomes, C to B transition, General Supervision System, APR assistance, and data analysis from the Northeast Regional Resource Center (NERRC), the National Early Childhood Technical Assistance Center (NECTAC), OSEP, Early Childhood Outcomes (ECO) Center, the Infant and Toddlers Coordinators Association (ITCA), and the Data

Accountability Center (DAC). CDS State IEU personnel participate in OSEP, NECTAC, and NERRC teleconferences as frequently as possible.

Improvement Activities:

Improvement Activities have been reviewed and continue to be appropriate at this time. No changes have been made. The ICC will complete a review of the targets and improvement activities for the report due February 2014.

APR Template – Part C (1)

Maine
State

The Part C regulations act 34 CFR §303.702(b) requires each State to report annually to the public on the performance of each Early Intervention Service (EIS) program located in the State on the targets in the State’s state performance plan, “as soon as practicable but no later than 120 days” following the State’s APR submission. The following table is posted online with the APR and serves as public reporting and includes the target and performance of each EIS program for Indicators 1-8 in FFY 2011:

CDS Regional Sites	C1 Target	C2 Target	C3a Target SS1 & SS2		C3b Target SS1 & SS2		C3c Target SS1 & SS2		C4 Target			C5 Target	C6 Target	C7 Target	C8a Target	C8b Target	C8c Target
	100%	95%	53%	41%	60%	27%	53%	38%	91%	91%	91%	0.82%	2.81%	100%	100%	100%	100%
Aroostook County	89%	75%	0%	27%	30%	9%	44%	36%	100%	100%	100%	0.30%	2.38%	56%	85%	100%	52%
CDS Reach	90%	95%	90%	90%	59%	44%	67%	68%	90%	90%	100%	0.75%	2.62%	80%	92%	100%	74%
CDS First Step	99%	89%	35%	33%	44%	19%	46%	33%	NA	NA	NA	0.67%	3.59%	87%	92%	100%	83%
Two Rivers	100%	83%	67%	83%	30%	42%	71%	83%	78%	78%	78%	NA*	1.35%	96%	94%	100%	92%
Midcoast Regional CDS	99%	97%	25%	0%	67%	25%	33%	25%	NA	NA	NA	0.78%	2.57%	95%	94%	100%	87%
Opportunities	97%	75%	42%	55%	35%	21%	53%	35%	100%	100%	100%	0.78%	2.86%	97%	100%	100%	96%
Project PEDS	100%	83%	44%	53%	36%	33%	46%	40%	NA	NA	NA	1.05%	2.00%	94%	90%	100%	84%
Child Development Services Downeast	98%	76%	25%	0%	0%	0%	0%	0%	NA	NA	NA	0.97%	2.90%	96%	91%	100%	64%
York County	99%	95%	17%	14%	29%	14%	67%	14%	NA	NA	NA	0.57%	2.61%	84%	97%	100%	52%
State Totals	97%	88%	40%	50%	39%	26%	51%	43%	88%	88%	94%	.63%	2.49%	88%	94%	100%	77%

NA = data not available, see Indicator 4

NA* = see Indicator 5

Public Reporting for FFY 2008-2011: <http://www.maine.gov/doe/specialed/support/spp/index.html>

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

Measurement:

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

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

FFY	Measurable and Rigorous Target
FFY 2011	100%

Actual Target Data for FFY 2011:

97%

Data were collected from the State database (Case-e) for all children for the reporting period of July 1, 2011 through June 30, 2012. Findings of noncompliance are made based on this data. Two infants and toddlers were excluded from the numerator and denominator due to exceptional family circumstances.

Infants and Toddlers with IFSPs who receive Early Intervention Services in a Timely Manner:

a. Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	1696
b. Total number of infants and toddlers with IFSPs	1746
Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner (Percent = [(a) divided by (b)] times 100)	97%

Reasons for Delay	Count
CDS (no delay reason was given and/or delay was caused by regional site/ staff)	14

No available openings	17
No provider available	18
Provider interruption	1
Total	50
No available openings – Provider is available but has no time available.	
No provider available – No provider is available.	

Public Reporting of APR Data:

Site	% Timely
Aroostook County	89%
CDS Reach	90%
CDS First Step	99%
Two Rivers	100%
Midcoast Regional CDS	99%
Opportunities	97%
Project PEDS	100%
Child Development Services Downeast	98%
York County	99%
State Total	97%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011¹:

Maine did not reach its target and the State has slightly decreased the level of compliance since last year FFY 2010 year (99%). Previous years' data were: the FFY 2006 year (95.4%), the FFY 2007 year (94.5%), the FFY 2008 year (91%), and the FFY 2009 year (92.9%).

Despite continued efforts the data for FFY 2011 show slippage in compliance relative to FFY 2010. The slippage is due to a lack of provider openings and provider availability; also inconsistent data entry.

A variety of activities have occurred at both the State and regional site level to ensure infants and toddlers receive timely services. In addition to the activities listed below, personnel from the CDS State IEU, including some regional site staff and the Part C consultant, participated in national and state focused TA activities. TA was received from NERRC and NECTAC through webinars, phone conversations and review of information posted on websites. Pertinent information was shared with regional site directors via email, at their monthly Director's Council meetings, or through the Lunch and Learn format. Lunch and Learn sessions occur on a weekly basis, are about an hour long, and are available to regional site personnel via teleconference. Each week a different topic is addressed.

¹ In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

Activities initiated or required by the CDS State IEU over the last year included:

- The CDS State IEU reviewed unmet needs reports submitted by the regional sites monthly and compared it to the unmet needs report and data compiled by the CDS State IEU office. If discrepancies were found in the data, a conversation occurred with the regional site director to determine what the conflict was. The reports were also reviewed at the regional site director's monthly council meeting. These reports are used to determine required professional development needs at the regional sites.
- The CDS State Data Manager trains regional site directors and regional site office operation managers (OOMs) on what information is required to be entered into the data system to ensure accurate reports from both the regional site and the State level. For example, training has been provided to emphasize the requirement of tying a service provider to an entered service.
- The CDS State IEU Central Referral Coordinator provides webinar trainings to regional sites on how and where to enter data within the data system.
- In July 2012 at the OSEP Leadership Conference CDS State IEU staff, NERRC and NECTAC representatives met to organize a technical assistance opportunity to regional site directors to address the understanding of OSEP requirements related to verification of correction of noncompliance and corrective action plans and to discuss factors contributing to local and state performance on specific APR indicators. The TA opportunity occurred in August 2012. Focused training occurred on indicators C1, C7, C8, B11 and B12.
- Each regional site that received a finding of noncompliance, or continued to have an open area of noncompliance, was required to submit a Corrective Action Plan (CAP) to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction, the data submitted was reviewed and verified using the data system and/or through a file review. For findings that were child-specific, the CDS State IEU reviewed the child's file through the data system, as well as the file located at the regional site, to ensure the child received the services documented on the IFSP. Each of these regional sites was required to complete a file audit in June 2012.
- To ensure effective implementation of the Evidence Based Early Intervention Model, the CDS State IEU has continued to contract for the Part C consultant position to support and guide regional Part C teams. In addition to the Part C consultant, the CDS State IEU has provided opportunities for national trainers to provide webinars which included how to effectively structure teams and how to determine the proper Primary Provider to ensure children's needs are being met effectively.
- Regional site early intervention teams participated in training on June 4 and 5, 2012 titled Coaching Families and Care Providers in Natural Environments and Working as an Early Intervention Team: Putting it All Together. The training was provided as part of the SPDG. The presenters were Dathan Rush and M'Lisa Shelden. Each Part C early intervention (EI) team was required to agree to follow up activities that included creating and implementing team outcomes. Outcomes and activities were followed up on by the Part C consultant.
- Acknowledging the regional sites' need for uniformity and guidance around the implementation of the Part C Early Intervention regulations, CDS State IEU staff began the process to create a uniform, system wide set of forms and file organization in the fall of 2010. Input was sought from regional site directors, case managers, and the two regional sites who piloted the project. Full implementation of the uniform set of forms and file organization was in September 2011. CDS regional site staff was provided with training. Suggestions for form revisions are solicited from regional site staff on an annual basis. Forms are updated annually as needed. Uniform file organization provides a smooth transfer of educational records when children move between CDS catchment areas. The Part C team leaders and CDS State IEU staff continue to meet to develop Early Intervention Team forms necessary for delivering services in the Primary Service Provider approach. The ongoing forms project moves all CDS regional sites forward in becoming a clear, consistent and conscientious statewide child-serving agency.
- Based on the FFY 2011 APR data all regional sites who receive an FFY 2012 finding will be required to complete an activity with their staff using the local contributing factors documents available through NECTAC and the Investigative Questions in the resources found on the Right

Idea website. They will be required to share their determinations with the CDS State IEU and develop a plan to address their determinations.

Activities completed by regional sites:

- New tracking mechanism to alert case managers on children who are approaching 30 days from determination of services. This has enabled the regional site to correct ongoing noncompliance in timeliness of service and continues to have no children waiting for services on their monthly reports.
- Children are assigned to providers at weekly EI meetings.
- Case managers are required to immediately notify their Part C team leader and regional site director if additional provider options are necessary.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2010 for this indicator: 99_%

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	3
2. Number of FFY 2010 findings the State verified as timely corrected (verified as corrected within one year from the date of notification to the EIS program of the finding)	3
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2010 have been timely corrected.

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Prior to considering any finding from FFY 2010 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each

regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child received services, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Remaining FFY 2009 Findings of Noncompliance (if applicable):

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

1. Number of remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator	0
2. Number of remaining FFY 2009 findings the State has verified as corrected	0
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	0

Verification of Correction of Remaining FFY 2009 findings:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 (if applicable):

1. Number of remaining uncorrected FFY 2007 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator	3
2. Number of remaining FFY 2007 findings the State has verified as corrected	3
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2007 have been subsequently corrected.

Verification of Correction of Remaining FFY 2007 findings

Prior to considering any finding from FFY 2007 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1)

(i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child received services, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State’s Response
<p>OSEP appreciates the State’s efforts and looks forward to reviewing in the FFY 2011 APR, the State’s data demonstrating that it is in compliance with the timely service provision requirements in 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1). Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.</p>	<p>CDS reports on the correction of noncompliance identified in FFY 2010 in the “Correction of FFY 2010 Findings of Noncompliance:” section above.</p>
<p>OSEP is concerned about the State’s failure to correct longstanding noncompliance from FFY 2007. The State must take the steps necessary to ensure that it can report, in the FFY 2011 APR, that it has corrected the remaining three findings identified in FFY 2007. If the State cannot report in the FFY 2011 APR that this noncompliance has been corrected, the State must report in the FFY 2011 APR: (1) the specific nature of the noncompliance; (2) the State’s explanation as to</p>	<p>CDS reports on the correction of noncompliance identified in FFY 2007 in the “Correction of Any Remaining Findings of Noncompliance from FFY 2007:” section above. All longstanding areas of noncompliance have been verified as corrected per the requirements of OSEP Memo 09-02.</p>

<p>why the noncompliance has persisted; (3) the steps that the State has taken to ensure the correction of each of the remaining findings of noncompliance, and any new or different actions the State has taken, since the submission of its FFY 2010 APR, to ensure such correction; and (4) any new or different actions the State will take to ensure such correction.</p>	
<p>When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010 for this indicator, and each EIS program with remaining noncompliance identified in FFY 2007: (1) are correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) have initiated services, although late, for any child whose services were not initiated in a timely manner, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.</p>	<p>CDS reports on the verification of correction of noncompliance identified in FFY2007 and FFY 2010 consistent with OSEP Memorandum 09-02 in the “Correction of Remaining FFY 2007 and FFY 2010 Findings of Noncompliance (if applicable):” sections above.</p>
<p>If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.</p>	<p>Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

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

Measurement:

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

FFY	Measurable and Rigorous Target
FFY 2011	95%

Actual Target Data for FFY 2011:

88%

Data were collected from the State database (Case-e) for 618 reporting on December 1, 2011 and reported on February 1, 2012.

Public Reporting of APR Data:

Site	% Typical
Aroostook County	75%
CDS Reach	95%
CDS First Step	89%
Two Rivers	83%
Midcoast Regional CDS	97%
Opportunities	75%
Project PEDS	83%
Child Development Services Downeast	76%
York County	95%
State Total	88%

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

Maine did not reach its target **and decreased** from FFY 2010 year (91%). Previous years' data were:

the FFY 2006 year (85%), the FFY 2007 year (87%), the FFY 2008 year (90%), and the FFY 2009 year (85%).

Despite continued efforts the data for FFY 2011 show slippage in compliance relative to FFY 2010. The slippage is due to the full implementation and enforcement of the Evidence Based Early Intervention approach across the state.

A variety of activities have occurred at both the State and site level to ensure infants and toddlers are provided services within their natural environments.

Activities initiated or required by the CDS State IEU over the last year have included:

- Maine continues to provide Part C services using the Evidence Based Early Intervention approach, which requires early intervention personnel work with the family, child and caregivers in the context of their everyday routines and activities. When developing an IFSP, teams must provide clear justification as to why a child will not receive their interventions in their natural environment. If a setting outside of the natural environment is determined the team must continue to have conversations on the progress of the child so that the service can be moved into the natural environment as soon as possible.
- To ensure effective implementation of the Evidence Based Early Intervention Model, the CDS State IEU has continued to provide funding for the Part C consultant position to support and guide regional Part C teams. In addition to the Part C consultant, the CDS State IEU has provided opportunities for national trainers to provide webinars which included how to effectively structure teams and how to determine the proper Primary Provider to ensure children's needs are being met effectively.
- Regional site early intervention teams participated in training on June 4 and 5, 2012, titled Coaching Families and Care Providers in Natural Environments and Working as an Early Intervention Team: Putting it All Together. The training was provided as part of the SPDG. The presenters were Dathan Rush and M'Lisa Shelden. Each Part C EI Team was required to agree to follow up activities that included creating and implementing team outcomes. Outcomes and activities were followed up on by the Part C consultant.
- This model continues to be difficult for some stakeholders and professionals to understand. Maine, for many years, had a model of providing numerous services in numerous settings for each child. Outreach and education continues to occur with community groups, physicians, providers and stakeholders.

Activities completed by regional sites:

- EI Teams meet weekly to discuss children and new referrals.
- Provide training to stakeholders on the requirements and importance of providing services to children within their natural environments.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement: Outcomes:

- 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.

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

Measurement for Summary Statement 1:

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

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

Measurement for Summary Statement 2:

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

Target Data and Actual Target Data for FFY 2011:

Targets and Actual Data for Part C Children Exiting in FFY 2011 (2011-12)

Summary Statements	Actual FFY 2010 (% of infants and toddlers)	Actual FFY 2011 (% of infants and toddlers)	Target FFY 2011 (% of infants and toddlers)
Outcome A: Positive social-emotional skills (including social relationships)			
1. Of those infants and toddlers who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program. Formula: $c+d / a+b+c+d$	42%	40%	53%
2. The percent of infants and toddlers who were functioning within age expectations in Outcome A by the time they exited the program. Formula: $d+e / a+b+c+d+e$	52%	50%	41%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
1. Of those infants and toddlers who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program. Formula: $c+d / a+b+c+d$	52%	39%	60%
2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they exited the program. Formula: $d+e / a+b+c+d+e$	33%	26%	27%
Outcome C: Use of appropriate behaviors to meet their needs			
1. Of those infants and toddlers who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program. Formula: $c+d / a+b+c+d$	56%	51%	53%
2. The percent of infants and toddlers who were functioning within age expectations in Outcome C by the time they exited the program. Formula: $d+e / a+b+c+d+e$	48%	43%	38%

Progress Data for Part C Children FFY 2011

A. Positive social-emotional skills (including social relationships):	Number of infants and toddlers	% of infants and toddlers
a. Percent of infants and toddlers who did not improve functioning	13	11%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	36	30%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	11	9%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	22	19%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	37	31%
Total	N= 119	100%
B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):	Number of infants and toddlers	% of infants and toddlers
a. Percent of infants and toddlers who did not improve functioning	12	10%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	53	46%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	21	18%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	21	18%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	9	8%
Total	N= 116	100%
C. Use of appropriate behaviors to meet their needs:	Number of infants and toddlers	% of infants and toddlers
a. Percent of infants and toddlers who did not improve functioning	7	6%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	41	35%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	20	17%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	30	25%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	21	18%
Total	N= 119	100%

Discussion of Summary Statements and a-e Progress Data for FFY 2011:

Data were collected from the State Child Outcome Summary Form (COSF) database for the reporting period of July 1, 2011 through June 30, 2012. Data excludes children with service less than six months, those missing entry or exit dates, children with no information about child’s progress at exit, and situations where entry and exit data generated impossible progress category combinations.

Public Reporting of APR data:

Site	Outcome A		Outcome B		Outcome C	
	SS 1	SS 2	SS 1	SS 2	SS 1	SS 2
Aroostook County	0%	27%	30%	9%	44%	36%
CDS Reach	90%	90%	59%	44%	67%	68%
CDS First Step	35%	33%	44%	19%	46%	33%
Two Rivers	67%	83%	30%	42%	71%	83%
Midcoast Regional CDS	25%	0%	67%	25%	33%	25%
Opportunities	42%	55%	35%	21%	53%	35%
Project PEDS	44%	53%	36%	33%	46%	40%
Child Development Services Downeast	25%	0%	0%	0%	0%	0%
York County	17%	14%	29%	14%	67%	14%
State Total	40%	50%	39%	26%	51%	43%

For Outcome Summary 3a; Summary Statement 1 the data demonstrates a decrease from 42% in FFY 2010 to 40% in FFY 2011.

For Outcome Summary 3a; Summary Statement 2 the data demonstrates a decrease from 52% in FFY 2010 to 50% in FFY 2011.

For Outcome Summary 3b; Summary Statement 1 the data demonstrates a decrease from 52% in FFY 2010 to 39% in FFY 2011.

For Outcome Summary 3b; Summary Statement 2 the data demonstrates a decrease from 33% in FFY 2010 to 26% in FFY 2011.

For Outcome Summary 3c; Summary Statement 1 the data demonstrates a decrease from 56% in FFY 2010 to 51% in FFY 2011.

For Outcome Summary 3c; Summary Statement 2 the data demonstrates a decrease from 48% in FFY 2010 to 43% in FFY 2011.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

Maine has shown slippage in each summary statement for each outcome. It is felt that this is due to the reduction in children who had COSF’s submitted to the CDS State IEU for review and processing. In FFY 2010, 299 children were assessed in Outcomes A and C and 300 were in Outcome B. In FFY 2011, 119 children were assessed in Outcomes A and C and 116 in Outcome B.

A variety of activities have occurred at both the State and regional site level to ensure infants and toddlers demonstrate improved outcomes.

Activities initiated or required by the CDS State IEU over the last year have included:

- CDS State IEU provided training on COSF forms through the training that occurred when the new standardized forms were rolled out.

- COSF's are reviewed at the CDS State IEU. Due to limited staffing in-depth review of forms did not occur as in the past.
- CDS State IEU provided revised Q and A information to the regional sites.
- CDS State IEU will create an internal procedure to aid in reducing the number of children who have missing entry or exit dates, who have no information about progress at exit and to reduce the situations where entry and exit data generate impossible progress category combinations. Once procedure is defined reports will be generated monthly and will be provided to regional sites with action steps for completion.

In an effort to increase the number of children with improved outcomes, CDS State IEU will do an in-depth monitoring of child outcomes during the FFY 2012. Also, CDS State IEU has requested technical assistance through the Early Childhood Outcomes Center to create a professional development plan in the spring of FFY 2012 which may include site specific training to regional sites.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Early Intervention Services In Natural Environments

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

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

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

Measurement:

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

Target Data and Actual Target Data for FFY 2011:

Target Data and Actual Target Data	FFY 2011 Target	FFY 2011 Actual	
<i>A. Know their rights</i>	91%	$[(30) \div (34)] * 100$	88%
<i>B. Effectively communicate their children's needs</i>	91%	$[(30) \div (34)] * 100$	88%
<i>C. Help their children develop and learn</i>	91%	$[(32) \div (34)] * 100$	94%

Maine Parent Federation (MPF) collected data in the spring of 2012. As part of the General Supervision System (GSS) processes for the four regional sites monitored in FFY 2011, all families of children receiving services through those regional sites (Part C and 619) received a parent survey. 432 Part C surveys were sent to families throughout regional sites (25 were returned due to incorrect mailing information) and 34 were returned, yielding a return rate of 8%. This return rate is lower than last year's 18%. In review of the data, the CDS State IEU has determined the response group is representative of the CDS system.

Surveys		
Sent	Received	%
432	34	8

Public reporting of APR Data:

Site	A	B	C
Aroostook	100%	100%	100%
Reach	90%	90%	100%
Two Rivers	78%	78%	78%
Opportunities	100%	100%	100%
State Total	88%	88%	94%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011²:

Maine did not reach the targets for indicator 4A and 4B but did reach its target for 4C. 4A and 4B show slippage and 4C shows an increase for from FFY 2010 year (90%, 92%, 92%). Previous years data are as follows: the FFY 2006 year (76%, 85%, 88%), the FFY 2007 year (85%, 79%, 85%), the FFY 2008 year (88%, 92%, 92%), and the FFY 2009 year (76%, 82%, 82%).

Activities initiated or required by the CDS State IEU over the last year included:

- Maine continued to contract with MPF to conduct the survey for the 2011-2012, due to a lack of sufficient resources within MDOE to complete the survey. Survey results were less than desirable to the CDS State IEU. Three factors contributed the very limited response: 1) a simplified, less expensive, post-card style notification was used to solicit responses; 2) the response mechanism was a combination of direct survey entry by parents online or aid by MPF staff; and 3) MPF was capacity challenged at the time of the survey so staff attention was diverted to an extent.
- In an effort to increase the response rate, CDS State IEU will be conducting the parent surveys for FFY 2012. All families participating in Part C will be provided the opportunity to report on how early intervention services have helped their family know their rights, effectively communicate their child’s needs, and helped their child develop and learn.
- CDS State IEU worked with MACECD in FFY 2011 to review the current survey structure for children B-3 and 3-5 so that recommendations could be made on the survey questions and process to collect meaningful and compliant information. The work had been placed on hold as the final meetings of MACECD shifted their committee focus. It is the intent of the CDS State IEU to recommend to the newly formed ICC for FFY 2012 to continue the work.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 [If applicable]:

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

² In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

Percent = [(# of infants and toddler birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
FFY 2011	0.82%

Actual Target Data for FFY 2011:

0.63%

Data were collected from the State database (Case-e) for 618 reporting on December 1, 2011 and reported on February 1, 2012.

Public Reporting of APR Data:

Site	% Pop
Aroostook County	0.30%
CDS Reach	0.75%
CDS First Step	0.67%
Two Rivers	NA*
Midcoast Regional CDS	0.78%
Opportunities	0.78%
Project PEDS	1.05%
Child Development Services Downeast	0.97%
York County	0.57%
State Total	0.63%
NA* = no infants birth to 1 identified for early intervention	

0.63% = [(82 < 1yr) ÷ (13003 <1 pop)] times 100 compare to 1.02%

Calculation

A. Number of infants and toddlers with IFSP from birth to 1 year	82
B. Total population of infants and toddlers from birth to 1 year	13,003

C. Percentage of infants and toddlers with IFSP from birth to 1 divided by the total population of infants and toddlers from birth to 1 (A/B) x 100	0.63%
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The percent of infants and toddlers birth to 1 with IFSPs in Maine for FFY 2011 is 0.63%, compared to the national average of 1.02%. Maine did not reach its target; and the percentage has increased since the FFY 2010 (0.52%) year. Previous years' performance data are as follows: the FFY 2006 year (0.64%), the FFY 2007 year (0.71%), the FFY 2008 year (0.52%), and the FFY 2009 year (0.64%).

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

Activities initiated or required by the CDS State IEU over the last year have included:

- The CDS State IEU continues to employ a Central Referral Coordinator who manages the intake process. She works closely with regional sites to ensure when the intake call is received, at the regional site, they are collecting the accurate information. The Central Referral Coordinator works collaboratively with a number of community and state agencies who also work with children under the age of 3. Significant work has occurred with the prenatal population and regional hospitals. The Central Referral Coordinator also creates and disseminates information regarding Part C and has attended conferences to ensure Part C information was available to interested persons. The intake form is available on the CDS website and will soon be available to be completed via secure online form.
- CDS State IEU personnel have participated in a variety of stakeholder groups, initiatives, and collaborations that focus on and work with infant and toddlers and shared information about early intervention.
- New documents have been created to describe Early Intervention in Maine. These documents have been provided to a number of agencies and individuals to use as resources or disseminate to families.
- MDOE/ CDS and the Department of Health and Human Services (DHHS) continue to work from the Interagency Agreement signed in October of 2010.
- CDS continues to be a member of the Newborn Hearing Advisory Board that meets quarterly.
- Participated in and assisted in the planning of the Infant-Toddler Awareness Day in the Hall of Flags at the State House to increase the Maine Legislature's and public's awareness of the services available to infants and their families.

Activities completed by regional sites:

- On-going outreach with community agencies and local physicians to help increase identification to children birth to 1 in need of early intervention services.
- Sent Child Find letters to area health providers and community agencies/ facilitates.
- Coordinated efforts with New Born Hearing Program.
- Made contact with pediatricians, Maine Families, and The Community Caring Collaborative. Regional site director serves on the board of the Community Caring Collaborative which is funding two part time positions on a regional EI team. The regional site continues to work collaboratively with the villages of Pleasant Point and Indian Township and health care centers.
- EI team has discussed premature babies, referrals, eligibility, and clinical opinion. Provided presentation on Part C model to pediatricians at Pediatric Associates.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

[If applicable]

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C

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

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

Measurement:

Percent=[(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

FFY	Measurable and Rigorous Target
FFY 2011	2.81%

Actual Target Data for FFY 2011:

2.49%

Data were collected from the State database (Case-e) for 618 reporting on December 1, 2011 and reported on February 1, 2012.

Public Reporting of APR Data:

Site	% Pop
Aroostook County	2.38%
CDS Reach	2.62%
CDS First Step	3.59%
Two Rivers	1.35%
Midcoast Regional CDS	2.57%
Opportunities	2.86%
Project PEDS	2.00%
Child Development Services Downeast	2.90%
York County	2.61%
State Total	2.49%

2.49% = [(982) ÷ (39428) times 100 compare to 2.79%

Calculation

A. Number of infants and toddlers with IFSP from birth to 3	982
B. Total population of infants and toddlers from birth to 3	39,428

C. Percentage of infants and toddlers with IFSP from birth to 3 divided by the population of infants and toddlers from birth to 3 (A/B) x 100	2.49%
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The percent of infants and toddlers birth to 3 with IFSPs in Maine for FFY 2011 is 2.49%, compared to the national average of 2.79%. While Maine did not reach its target, the State shows an increase since the FFY 2010 year (2.37%). Previous years' performance data are as follows: FFY 2006 year (2.51%), the FFY 2007 year (2.38%), the FFY 2008 year (2.29%) and the FFY 2009 year (2.29%).

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

Although not meeting the target, the CDS system has done a great deal of work to ensure the community and public are aware of CDS and the procedure for making referrals to CDS.

Activities initiated or required by the CDS State IEU over the last year have included:

- The CDS State IEU continues to employ a Central Referral Coordinator who manages the intake process. She works closely with regional sites to ensure when the intake call is received, at the regional site, they are collecting the accurate information. The Central Referral Coordinator works collaboratively with a number of community and state agencies who also work with children under the age of 3. Significant work has occurred with the prenatal population and regional hospitals. The Central Referral Coordinator also creates and disseminates information regarding Part C and has attended conferences to ensure Part C information was available to interested persons. The intake form is available on the CDS website and will soon be available to be completed via secure online form.
- CDS State IEU personnel have participated in a variety of stakeholder groups, initiatives, and collaborations that focus on and work with infant and toddlers and shared information about early intervention.
- New documents have been created to describe Early Intervention in Maine. These documents have been provided to a number of agencies and individuals to use as resources or disseminate to families.
- MDOE/ CDS and the Department of Health and Human Services (DHHS) continue to work from the Interagency Agreement signed in October of 2010.
- CDS continues to be a member of the Newborn Hearing Advisory Board that meets quarterly.

Activities completed by regional sites:

- Sent Child Find letters to area health providers and community agencies/ facilitates.
- Continue work with Maine Families, Caring Community Collaborative Early Head Start, local family child cares and college/ university child cares.
- Have attended child health fairs.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

[If applicable]

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

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

FFY	Measurable and Rigorous Target
<i>FFY 2011</i>	<i>100%</i>

Actual Target Data for FFY 2011:

<i>88%</i>

Data were collected from the State database (Case-e) for all children for the reporting period of July 1, 2011 through June 30, 2012. Findings of noncompliance are made based on this data. 59 infants and toddlers had delays attributed to exceptional family circumstances and are included in the numerator and denominator.

Infants Evaluated and Assessed and provided an Initial IFSP meeting Within Part C’s 45-day timeline:

a. Number of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline	872
b. Number of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted	986
Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline (Percent = [(a) divided by (b)] times 100)	88%

Reasons for delay	# of children
CDS (no delay reason was given and/or delay was caused by regional site/ staff)	108
Provider	6

Public Reporting of APR Data:

Site	%
Aroostook County	56%
CDS Reach	80%
CDS First Step	87%
Two Rivers	96%
Midcoast Regional CDS	95%
Opportunities	97%
Project PEDS	94%
Child Development Services Downeast	96%
York County	84%
State Total	88%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011³:

While Maine did not reach its target, the State has increased the level of compliance since the FFY 2010 year (85%). Previous year’s compliance data are as follows: FFY 2006 year (91%), the FFY 2007 year (91.1%), the FFY 2008 year (70%), and the FFY 2009 year (64.9%).

Compared to FFY 2010, six regional sites improved, two regional sites maintained and one regional site decreased their level of compliance.

Although not yet meeting target, CDS as a system has shown significant growth in ensuring timelines are met for infants and toddlers. A variety of activities have occurred at both the State and regional site level to ensure eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline. In addition to the activities listed below, personnel from the CDS State IEU including some regional site staff and the Part C consultant participated in national and state focused TA activities. TA was received from NERRC and NECTAC through webinars, phone conversations, and a review of information posted on websites. Pertinent information was shared with regional site directors via email, at their monthly Director’s Council meetings, or through the Lunch and Learn format. Lunch and Learn sessions occur on a weekly basis, are about an hour long, and are available to regional site personnel via teleconference. Each week a different topic is addressed.

Activities initiated or required by the CDS State IEU over the last year have included:

- The CDS State IEU reviews compliance reports submitted by the regional sites monthly and compares them to the compliance reports and data compiled at the State office. If there are

³In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

- discrepancies in the data, a conversation occurs with the regional site director to determine the conflict. The reports are also reviewed monthly at the regional site director’s council meeting.
- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a CAP to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction, the data submitted were reviewed and verified using the data system or through a file review. For findings that were child-specific, the CDS State IEU reviewed the child’s file through the data system, as well as the file located at the regional site, to ensure the child subsequently had an evaluation/assessment and an IFSP was developed, even though later than the 45-day timeline.
 - In July 2012 at the OSEP Leadership Conference CDS State IEU staff, NERRC and NECTAC representatives met to organize a technical assistance opportunity to regional site directors to address the understanding of OSEP requirements related to verification of correction of noncompliance and CAPs and to discuss factors contributing to local and state performance on specific APR indicators. The TA opportunity occurred in August 2012. Specific focused training occurred on indicators C1, C7, C8, B11 and B12.
 - NERRC provided on-site technical assistance in September 2012 with the CDS State Leadership Team and the regional site directors. Within the two days of conversation a great deal of time was spent on reviewing and assessing the local contributing factors for indicators C7, C8 and B11. The activity will continue through other indicators throughout the year.
 - Acknowledging the uniformity and guidance around the implementation of the Part C Early Intervention regulations, CDS State IEU staff began the process to create a uniform, system wide set of forms and file organization in the fall of 2010. Input was sought from regional site directors, case managers, and the two regional sites who piloted the project.
 - Full implementation of the uniform set of forms and file organization was in September 2011. CDS regional site staff were provided with training. Form revision suggestions are solicited from regional site staff on an annual basis. Forms are updated annually as needed. Uniform file organization provides a smooth transfer of educational records when children move between CDS catchment areas.
 - A very detailed Part C process chart and procedure document has been provided to all regional sites that also indicates where the forms need to be used. A training webinar was conducted to discuss and provide an opportunity for questions and answers on the process and forms.
 - All EI teams are expected to meet weekly to discuss all children and team needs to ensure all children are provided evaluations timely.
 - Based on the FFY 2011 APR data all regional sites who receive an FFY 2012 finding will be required to complete an activity with their staff using the local contributing factors documents available through NECTAC and the Investigative Questions in the resources found on the Right Idea website. They will be required to share their determinations with the CDS State IEU and develop a plan to address their determinations.

Activities completed by regional sites:

- Formal Battelle Development Inventory training was provided to Part C evaluators. The trainings helped to ensure that there were enough trained Part C evaluators to complete evaluations in a timely manner. Part C teams meet every week to review upcoming evaluations needs.
- Two staff members are designated to track referral to evaluation date. One focuses on scheduling and coordinating the multidisciplinary team and the other focuses on entering the information into the data system.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2010 for this indicator: 85%

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	4
2. Number of FFY 2010 findings the State verified as timely corrected (corrected	4

APR Template – Part C (1)

Maine
State

within one year from the date of notification to the EIS program of the finding)	
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2010 have been timely corrected.

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Prior to considering any finding from FFY 2010 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child received an evaluation, assessment and initial IFSP, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Remaining FFY 2009 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2009 findings of noncompliance noted in OSEP’s June	0
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APR Template – Part C (1)

Maine
State

2012, FFY 2010 APR response table for this indicator	
2. Number of remaining FFY 2009 findings the State has verified as corrected	0
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	0

Verification of Remaining FFY 2009 findings:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP's June 2012, FFY 2009 APR response table for this indicator.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP's June 2012, FFY 2009 APR response table for this indicator.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 (if applicable):

1. Number of remaining uncorrected FFY 2007 findings of noncompliance noted in OSEP's June 2011, FFY 2009 APR response table for this indicator	3
2. Number of remaining FFY 2007 findings the State has verified as corrected	3
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2007 have been subsequently corrected.

Verification of Correction of FFY 2007 noncompliance (either timely or subsequent):

Prior to considering any finding from FFY 2007 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child received an evaluation, assessment and initial IFSP, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or

practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State’s Response
<p>The State must demonstrate, in the FFY 2011 APR, that the State is in compliance with the 45-day timeline requirements in 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a). Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.</p>	<p>While CDS data do not demonstrate compliance, they demonstrate progress toward compliance. CDS reports on the correction of noncompliance identified in the “Correction of Remaining Findings of Noncompliance (if applicable):” sections above.</p>
<p>OSEP is concerned about the State’s failure to correct longstanding noncompliance from FFY 2007. The State must take the steps necessary to ensure that it can report, in the FFY 2011 APR, that it has corrected the remaining three findings identified in FFY 2007. If the State cannot report in the FFY 2011 APR that this noncompliance has been corrected, the State must report in the FFY 2011 APR: (1) the specific nature of the noncompliance; (2) the State’s explanation as to why the noncompliance has persisted; (3) the steps that the State has taken to ensure the correction of each of the remaining findings of noncompliance, and any new or different actions the State has taken, since the submission of its FFY 2010 APR, to ensure such correction; and (4) any new or different actions the State will take to ensure such correction.</p>	<p>All longstanding areas of noncompliance have been verified as corrected per the requirements of OSEP Memo 09-02.</p>
<p>When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified FFY 2010 for this indicator, and each EIS program with remaining noncompliance identified in FFY 2007: (1) are correctly implementing 34 CFR §§303.321(e)(2), 303.322(e)(1), and 303.342(a) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data</p>	<p>CDS reports on the verification of correction of noncompliance identified in FFY2007 and FFY 2010 consistent with OSEP Memorandum 09-02 in the “Correction of Remaining FFY 2007 and FFY 2010 Findings of Noncompliance (if applicable):” sections above.</p>

APR Template – Part C (1)

system; and (2) have conducted the initial evaluation, assessment, and IFSP meeting, although late, for any child for whom the 45-day timeline was not met, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.	
If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.	Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

A IFSPs with transition steps and services

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

Measurement:

Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.

FFY	Measurable and Rigorous Target
<i>FFY 2011</i>	100%

Actual Target Data for FFY 2011:

94%

Data were collected from the State database (Case-e) for all children for the reporting period of July 1, 2011 through June 30, 2012. Findings of noncompliance are made based on this data.

Children Exiting Part C who Received Timely Transition Planning:

a. Number of children exiting Part C who have an IFSP with transition steps and services	633
b. Number of children exiting Part C	671
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Percent = [(a) divided by (b)] times 100)	94%

Public Reporting APR Data:

Site	%
Aroostook County	85%
CDS Reach	92%

CDS First Step	92%
Two Rivers	94%
Midcoast Regional CDS	94%
Opportunities	100%
Project PEDS	90%
Child Development Services Downeast	91%
York County	97%
State Total	94%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011⁴:

Maine did not reach its target for FFY 2011 but did increase from FFY 2010 year (87%). Previous year's compliance data are as follows: FFY 2006 year (69%), the FFY 2007 year (83.5%), FFY 2008 year (79%), and FFY 2009 year (86.6%).

A variety of activities have occurred at both the State and regional site level to ensure all children exiting Part C received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including documented transition steps and services within the IFSP. In addition to the activities listed below, personnel from the CDS State IEU, including some regional site staff and the Part C consultant, participated in national and state focused TA activities. TA was received from NERRC and NECTAC through webinars, phone conversations, and review of information posted on websites. Pertinent information was shared with regional site directors via email, at their monthly Director's Council meetings, or through the Lunch and Learn format. Lunch and Learns sessions occur on a weekly basis, are about an hour long, and are available to regional site personnel via teleconference. Each week a different topic is addressed.

Activities initiated or required by the CDS State IEU over the last year have included:

- The CDS State IEU developed an electronic focus audit form specific to transition that is used within monitoring visits. The audit form has also been made available to regional sites to use in staff training, when doing self-assessments, and as a training tool with staff.
- Participated in TA opportunities related to transition, as provided by OSEP.
- Discussed the importance of the transition requirements at the monthly Director's Council meeting. At the Director's Council meetings regional site directors were encouraged to communicate best practice ideas and the barriers they were encountering at their sites.
- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a CAP to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction, the data submitted were reviewed and verified using the data system or through a file review. For findings that were child-specific, the CDS State IEU reviewed the child's file through the data system as well as the file located at the regional site to ensure the child's IFSP had documented transition steps and services.
- In July 2012 at the OSEP Leadership Conference CDS State IEU staff, NERRC and NECTAC representatives met to organize a technical assistance opportunity to regional site directors to

⁴ In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

address the understanding of OSEP requirements related to verification of correction of noncompliance and corrective action plans and to discuss factors contributing to local and state performance on specific APR indicators. The TA opportunity occurred in August 2012. Specific focused training occurred on indicators C1, C7, C8, B11 and B12.

- NERRC provided on-site technical assistance in September 2012 with the CDS State Leadership Team and the regional site directors. Within the two days of conversation a great deal of was spent on reviewing and assessing the local contributing factors for indicators C7, C8 and B11. The activity will continue through other indicators throughout the year.
- CDS State IEU staff provided on site TA to some regional sites on transition requirements as well as provided Lunch and Learns to all regional sites.
- Based on the FFY 2011 APR data all regional sites who receive an FFY 2012 finding will be required to complete an activity with their staff using the local contributing factors documents available through NECTAC and the Investigative Questions in the resources found on the Right Idea website. They will be required to share their determinations with the CDS State IEU and develop a plan to address their determinations.

Activities completed by regional sites:

- Regional site director and team leader provided an in house training to Part C and Part B staff.
- On-going meeting related to Part C to Part B transition process, including a topic-specific training held on January 18, 2012 which included the regional site Part C and Part B therapist, teachers and case managers. Part C and Part B case managers meet at least once a month to maintain consistent communication and effective scheduling for all C to B transitions.
- One sites Part B and Part C teams met to outline duties and responsibilities for individuals to provide a more compliant transition process.
- Regional site specific procedure was created so that Part C is referring children to Part B as soon as the child turns 2.3 years. They also have a dedicated primary service provider who monitors transition on a bi-weekly basis.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2010 for this indicator: 87_%

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	4
2. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	1
3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	3

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	3
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	3
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2010 have been subsequently corrected.

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Prior to considering any finding from FFY 2010 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.148(b)(4), 303.344(h), and 20 U.S.C. 1436(a)(3) and (d)(8) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child within CDS had an IFSP with transition steps and services.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU..

Correction of Remaining FFY 2009 Findings of Noncompliance (if applicable):

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

1. Number of remaining FFY 2009 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator	0
2. Number of remaining FFY 2009 findings the State has verified as corrected	0
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	0

Verification of Correction of Remaining FFY 2009 findings:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 (if applicable):

1. Number of remaining uncorrected FFY 2007 findings of noncompliance noted in OSEP’s June 2011, FFY 2009 APR response table for this indicator	1
2. Number of remaining FFY 2007 findings the State has verified as corrected	1
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2007 have been subsequently corrected.

Verification of Correction of Remaining FFY 2007 findings

Prior to considering any finding from FFY 2007 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.148(b)(4), 303.344(h), and 20 U.S.C. 1436(a)(3) and (d)(8) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child within CDS had an IFSP with transition steps and services.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State’s Response
The State must demonstrate, in the FFY 2011 APR, that the State is in compliance with the IFSP transition content requirements in 34 CFR §§303.148(b)(4) and 303.344(h) and 20 U.S.C.	CDS reports on the correction of noncompliance identified in FFY 2010 in the “Correction of FFY 2010 Findings of Noncompliance:” section above.

<p>1436(a)(3) and (d)(8). Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.</p>	
<p>OSEP is concerned about the State's failure to correct longstanding noncompliance from FFY 2007. The State must take the steps necessary to ensure that it can report, in the FFY 2011 APR, that it has corrected the one remaining finding identified in FFY 2007. If the State cannot report in the FFY 2011 APR that this noncompliance has been corrected, the State must report in the FFY 2011 APR: (1) the specific nature of the noncompliance; (2) the State's explanation as to why the noncompliance has persisted; (3) the steps that the State has taken to ensure the correction of the remaining finding of noncompliance, and any new or different actions the State has taken, since the submission of its FFY 2010 APR, to ensure such correction; and (4) any new or different actions the State will take to ensure such correction.</p>	<p>All longstanding areas of noncompliance have been verified as corrected per the requirements of OSEP Memo 09-02.</p>
<p>When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010 for this indicator, and the EIS program with remaining noncompliance identified in FFY 2007: (1) are correctly implementing 34 CFR §§303.148(b)(4) and 303.344(h) and 20 U.S.C. 1436(a)(3) and (d)(8) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) have developed an IFSP with transition steps and services for each child, unless the child is no longer within the jurisdiction of the EIS program (i.e., the child has exited the State's Part C program due to age or other reasons), consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.</p>	<p>CDS reports on the verification of correction of noncompliance identified in FFY2007 and FFY 2010 consistent with OSEP Memorandum 09-02 in the "Correction of Remaining FFY 2007 and FFY 2010 Findings of Noncompliance (if applicable):" sections above.</p>
<p>If the State does not report 100% compliance in the FFY 2011 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.</p>	<p>Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8B: Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including notification to LEA, if child potentially eligible for Part B;

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

Measurement:
 Percent = [(# of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
<i>FFY 2011</i>	<i>100%</i>

Actual Target Data for FFY 2011:

<i>100%</i>

Data were collected from the State database (Case-e) for all children for the reporting period of July 1, 2011 through June 30, 2012. Findings of noncompliance are made based on this data.

Children Exiting Part C who Received Timely Transition Planning (Notification to LEA):

a. Number of children exiting Part C and potentially eligible for Part B where the notification to the LEA occurred	671
b. Number of children exiting Part C who were potentially eligible for Part B	671
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Notification to LEA) (Percent = [(a) divided by (b)] times 100)	100%

Public Reporting of APR Data:

Site	%
Aroostook County	100%
CDS Reach	100%

CDS First Step	100%
Two Rivers	100%
Midcoast Regional CDS	100%
Opportunities	100%
Project PEDS	100%
Child Development Services Downeast	100%
York County	100%
State Total	100%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011⁵:

Pursuant to OSEP Memo 13-6, Maine is not required to report on progress/slippage or improvement activities for this indicator for FFY 2011 because the state has met its target.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2010 for this indicator: ____100_%

There were no FFY 2010 findings of noncompliance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

⁵ In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

C. Transition conference, if child potentially eligible for Part B.

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

Measurement:

Percent = [(# of toddlers with disabilities exiting Part C where the transition conference occurred 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) divided by the (# of toddlers with disabilities exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition conferences, including reasons for delays.

FFY	Measurable and Rigorous Target
FFY 2011	100%

Actual Target Data for FFY 2011:

77%

Data were collected from the State database (Case-e) for all children for the reporting period of July 1, 2011 through June 30, 2012. Findings of noncompliance are made based on this data. 144 children were excluded from the numerator and denominator based on exceptional family circumstances. 77 children were excluded from the numerator and denominator since contact was not able to be made with the families.

Children Exiting Part C who Received Timely Transition Planning (Transition Conference):

a. Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred	515
b. Number of children exiting Part C who were potentially eligible for Part B	671
Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday (Transition Conference) (Percent = [(a) divided by (b)] times 100)	77%

Reason for Delay	Count
CDS (no delay reason was given)	156

and/or delay was caused by regional site/ staff)	
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Public Reporting of APR Data:

Site	%
Aroostook County	52%
CDS Reach	74%
CDS First Step	83%
Two Rivers	92%
Midcoast Regional CDS	87%
Opportunities	96%
Project PEDS	84%
Child Development Services Downeast	64%
York County	52%
State Total	77%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2011⁶:

Maine did not reach its target for FFY 2011 and had a significant decrease from FFY 2010 (93%). Previous years' data were: the FFY 2006 year (87%), the FFY 2007 year (60%), the FFY 2008 year (56%), and the FFY 2009 year (94.8%).

Despite continued efforts the data for FFY 2011 show slippage in compliance relative to FFY 2010. The slippage is due to an increased expectation of regional sites implementation of the transition regulation within the Part C early intervention teams. In addition, requirements for data entry into the Case-e system were increased. The FFY 2011 data extracted from the data system was verified manually by each regional site.

A variety of activities have occurred at both the State and regional site level to ensure all children exiting Part C received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including having the transition conference for children potentially eligible for Part B at least 90 days but not more than nine months, prior to the toddlers third birthday. In addition to the activities listed below, personnel from the CDS State IEU, including some regional site staff and the Part C consultant, participated in national and state focused TA activities. TA was received from NERRC and NECTAC through webinars, phone conversations, and review of information posted on websites. Pertinent information was shared with regional site directors via email, at their monthly Director's Council meetings, or through the Lunch and Learn format. Lunch and Learns sessions occur on a weekly basis, are about an hour long, and are available to regional site personnel via teleconference. Each week a different topic is addressed.

Activities initiated or required by the CDS State IEU over the last year have included:

⁶ In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

- The CDS State IEU has developed an electronic focus audit form specific to transition that is used within monitoring visits. The audit form has also been made available to regional sites to use in staff training, when doing self-assessments, and as a training tool with staff.
- Participated in TA opportunities related to transition, as provided by OSEP.
- Discussed the importance of the transition requirements at the monthly Director’s Council meeting. At the Director’s Council meetings regional site directors were encouraged to communicate best practice ideas and the barriers they were encountering at their sites.
- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a CAP to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction, the data submitted were reviewed and verified using the data system or through a file review. For findings that were child-specific, the CDS State IEU reviewed the child’s file through the data system as well as the file located at the regional site to ensure the child’s IFSP had a documented transition conference.
- In July 2012 at the OSEP Leadership Conference CDS State IEU staff, NERRC and NECTAC representatives met to organize a technical assistance opportunity to regional site directors to address the understanding of OSEP requirements related to verification of correction of noncompliance and corrective action plans and to discuss factors contributing to local and state performance on specific APR indicators. The TA opportunity occurred in August 2012. Specific focused training occurred on indicators C1, C7, C8, B11 and B12.
- NERRC provided on-site technical assistance in September 2012 with the CDS State Leadership Team and the regional site directors. Within the two days of conversation a great deal of was spent on reviewing and assessing the local contributing factors for indicators C7, C8 and B11. The activity will continue through other indicators throughout the year.
- CDS State IEU staff provided on site TA to some regional sites on transition requirements as well as provided Lunch and Learns to all regional sites.
- Based on the FFY 2011 APR data all sites who receive a FFY 2012 finding will be required to complete an activity with their staff using the local contributing factors documents available through NECTAC and the Investigative Questions in the resources found on the Right Idea website. They will be required to share their determinations with the CDS State IEU and develop a plan to address their determinations.

Activities completed by regional sites:

- Regional site director and team leader provided an in house training to Part C and Part B staff.
- On-going meeting related to Part C to Part B transition process, including a topic-specific training held on January 18, 2012 which included the regional site Part C and Part B therapist, teachers and case managers. Part C and Part B case managers meet at least once a month to maintain consistent communication and effective scheduling for all C to B transitions.
- One sites Part B and Part C teams met to outline duties and responsibilities for individuals to provide a more compliant transition process.
- Site specific procedure was created so that Part C is referring children to Part B as soon as the child turns 2.3 years. They also have a dedicated primary service provider who monitors transition on a bi-weekly basis.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2009 for this indicator: 93 %

1. Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010, through June 30, 2011)	2
2. Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS program of the finding)	1

3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1
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FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
6. Number of FFY 2010 findings <u>not</u> verified as corrected [(4) minus (5)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2010 have been subsequently corrected.

Verification of Correction of FFY 2010 noncompliance (either timely or subsequent):

Prior to considering any finding from FFY 2010 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child in CDS had a transition conference, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Remaining FFY 2009 Findings of Noncompliance (if applicable):

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP’s June 2012, FFY 2009 APR response table for this indicator.

APR Template – Part C (1)

Maine
State

1. Number of remaining FFY 2009 findings of noncompliance noted in OSEP's June 2012, FFY 2010 APR response table for this indicator	0
2. Number of remaining FFY 2009 findings the State has verified as corrected	0
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	0

Verification of Correction of Remaining FFY 2009 findings:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP's June 2012, FFY 2009 APR response table for this indicator.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

There were no remaining uncorrected FFY 2009 findings of noncompliance noted in OSEP's June 2012, FFY 2009 APR response table for this indicator.

Correction of Any Remaining Findings of Noncompliance from FFY 2008 (if applicable):

1. Number of remaining uncorrected FFY 2008 findings of noncompliance noted in OSEP's June 2011, FFY 2009 APR response table for this indicator	1
2. Number of remaining FFY 2008 findings the State has verified as corrected	1
3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2008 have been subsequently corrected.

Verification of Correction of Remaining FFY 2008 findings

Prior to considering any finding from FFY 2008 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child in CDS had a transition conference, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies,

procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Any Remaining Findings of Noncompliance from FFY 2007 (if applicable):

1. Number of remaining uncorrected FFY 2007 findings of noncompliance noted in OSEP's June 2011, FFY 2009 APR response table for this indicator	3
2. Number of remaining FFY 2007 findings the State has verified as corrected	3
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2007 have been subsequently corrected.

Verification of Correction of Remaining FFY 2007 findings

Prior to considering any finding from FFY 2007 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §§303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

Through Case-e, CDS was also able to verify that each child in CDS had a transition conference, although late.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Any Remaining Findings of Noncompliance identified in FFY 2006 (if applicable)

1. Number of remaining FFY 2006 findings noted in OSEP's June 2012 FFY 2010 APR response table for this indicator	1
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APR Template – Part C (1)

Maine
State

2. Number of remaining FFY 2006 findings the State has verified as corrected	1
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2006 have been corrected.

Verification of Correction of Remaining FFY 2006 findings

CDS State IEU has complied with the timely transition conference requirements (34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9))) required in the *OSEP Response to SPP/APR* dated June 15, 2007.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2006:

CDS State IEU has complied with the timely transition conference requirements (34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9))) required in the *OSEP Response to SPP/APR* dated June 15, 2007.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY 2011 APR, that the State is in compliance with the timely transition conference requirements in 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)). Because the State reported less than 100% compliance for FFY 2010, the State must report on the status of correction of noncompliance identified in FFY 2010 for this indicator.	CDS reports on the correction of noncompliance identified in FFY 2010 in the "Correction of Remaining Findings of Noncompliance (if applicable):" section above.
OSEP is concerned about the State's failure to correct longstanding noncompliance from FFY 2008, FFY 2007, and FFY 2006. The State must take the steps necessary to ensure that it can report, in the FFY 2011 APR, that it has corrected the one remaining finding identified in FFY 2008, the remaining three findings identified in FFY 2007, and the remaining one finding identified in FFY 2006. If the State cannot report in the FFY 2011 APR that this noncompliance has been corrected, the State must report in the FFY 2011 APR: (1) the specific nature of the noncompliance; (2) the State's explanation as to why the noncompliance has persisted; (3) the steps that the State has taken to ensure the correction of each of the remaining findings of noncompliance, and any new	All longstanding areas of noncompliance have been verified as corrected per the requirements of OSEP Memo 09-02. CDS reports on the correction of noncompliance identified in FFY 2008, FFY 2007, and FFY 2006 in the "Correction of Remaining FFY 2008 Findings of Noncompliance (if applicable):", "Correction of Remaining FFY 2007 Findings of Noncompliance (if applicable):", and the "Correction of Remaining FFY 2006 Findings of Noncompliance (if applicable):", sections above.

<p>or different actions the State has taken, since the submission of its FFY 2010 APR, to ensure such correction; and (4) any new or different actions the State will take to ensure such correction.</p>	
<p>When reporting on the correction of noncompliance, the State must report, in its FFY 2011 APR, that it has verified that each EIS program with noncompliance identified in FFY 2010 for this indicator, the EIS program with remaining noncompliance identified in FFY 2008, and each EIS program with remaining noncompliance identified in FFY 2007: (1) are correctly implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) have 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, consistent with OSEP Memo 09-02. In the FFY 2011 APR, the State must describe the specific actions that were taken to verify the correction.</p>	<p>CDS reports on the verification of correction of noncompliance identified in FFYs 2007, 2008 and 2010 consistent with OSEP Memorandum 09-02 in the “Correction of Remaining FFYs 2007, 2008, and 2010 Findings of Noncompliance (if applicable):” sections above.</p>
<p>If the State does not report 100% compliance in the FFY 2010 APR, the State must review its improvement activities and revise them, if necessary to ensure compliance.</p>	<p>Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.</p>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

States are required to use the “Indicator C 9 Worksheet” to report data for this indicator.

FFY	Measurable and Rigorous Target
<i>FFY 2011</i>	<i>100%</i>

Actual Target Data for FFY 2011:

69%

INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2010 (7/1/10 through 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 through 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification

APR Template – Part C (1)

1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	3
	Dispute Resolution: Complaints, Hearings			
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			

APR Template – Part C (1)

5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution: Complaints, Hearings			
7. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	4
	Dispute Resolution: Complaints, Hearings			
8. 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;	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	1
	Dispute Resolution: Complaints, Hearings			

APR Template – Part C (1)

<p>8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:</p>	<p>Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other</p>			
<p>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</p>	<p>Dispute Resolution: Complaints, Hearings</p>			
<p>8. The percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:</p>	<p>Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other</p>	<p>2</p>	<p>2</p>	<p>1</p>
<p>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.</p>	<p>Dispute Resolution: Complaints, Hearings</p>			

APR Template – Part C (1)

OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
Sum the numbers down Column a and Column b			13	9
Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.			(b) / (a) X 100 =	69%

Describe the process for selecting EIS programs for Monitoring:

The CDS State IEU monitors all regional sites annually through the state data system. In addition to monitoring through the state data system, the CDS State IEU, members of the Birth to 20 General Supervision System Team (B-20 GSST), complete on-site visits to half of the regional sites per year.

Pursuant to MUSER (Section XIII), "...representatives of the Commissioner shall collect data and report on every SAU program at least once during the six year period of the State's Performance Plan". Regional site compliance visits for FFY2010 included Project Peds, Downeast, Midcoast Regional, First Step, and York; FFY 2011 included Aroostook, Reach, Two Rivers and Opportunities. In the most recent version of MUSER (May 10, 2012) Section XIII-General Supervision System includes five subsections:

1. Department Approval,
2. General Supervision System Priorities,
3. General Supervision System Activities,
4. Approval/ Enforcement, and
5. Public Access.

The rule can be found at <http://www.maine.gov/sos/cec/rules/05/071/071c101.doc>.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2011⁷⁽¹⁾:

The major focus of FFY 2011 was ensuring all regional sites corrected long standing areas of noncompliance. At the beginning of FFY 2011 findings of noncompliance dated as far back as 2006. As of submission of this report all findings from FFY 2006 through FFY 2010 have been corrected. **Due to the focus of correcting long standing noncompliance in accordance with OSEP Memorandum 09-02, slippage occurred during FFY 2011.**

One of the challenges of correcting findings occurred when CDS regional sites were consolidated in July 2010. With guidance from OSEP it was determined that it was the responsibility of receiving sites to correct findings of noncompliance that were previously opened. OSEP required that if a regional site received one or more child(ren) from a regional site that had closed, the finding of noncompliance must be corrected by the receiving regional site. As a result, multiple regional sites may have received the same finding. For example: Site A closed. Those children became the responsibility of Site XYZ and Site ABC. Both Site XYZ and Site ABC must demonstrate correction before the finding from Site A can be considered closed.

A variety of activities have occurred at both the State and regional site level to ensure that general supervision practices are in place. In addition to the activities listed below, personnel from the CDS State IEU, including some regional site staff and the Part C consultant, participated in national and state focused TA activities. TA was received from NERRC and NECTAC through webinars, phone conversations, and review of information posted on websites. Pertinent information was shared with regional site directors via email, at their monthly Director's Council meetings, or through the Lunch and Learn sessions. Lunch and Learns sessions occur on a weekly basis, are about an hour long, and are available to regional site personnel via teleconference. Each week a different topic is addressed. In addition to the TA received from NERRC and NECTAC, the CDS State IEU team had several conversations with its OSEP Part C State Contact.

Activities initiated or required by the CDS State IEU over the last year have included:

- On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC provided on-site technical assistance to CDS State IEU staff. Over the course of the two days, CDS staff and NERRC:
 - o Reviewed all outstanding uncorrected findings of noncompliance (both Part C and B/619)

⁷ In an effort to reduce reporting burden, in the FFY 2011 APR, States: 1) Are not required to provide an explanation of: a) progress; b) no change in actual target data from the data for FFY 2010; or c) slippage if the State meets its target. 2) Are not required to discuss improvement activities for: a) compliance indicators where the State reports 100% compliance for FFY 2011; and b) results indicators where the State has met its FFY 2011 target. 3) May provide one set of improvement activities for the entire APR as long as the Improvement Activities are indexed back to reference the relevant indicators.

- Reviewed correction efforts/corrective actions taken to date with regional sites related to these findings of noncompliance.
- Analyzed the effectiveness of existing correction efforts and corrective actions.
- Explored additional progressively stringent corrective actions/sanctions including those employed by other states.
- Strategized how best to apply these new corrective actions to regional sites with outstanding noncompliance.
- Developed a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to regional sites) to implement new corrective actions with regional sites to ensure correction of all outstanding noncompliance.
- Re-evaluated the process for verifying correction of noncompliance to see what overall improvements could be made to ensure future timely correction of any new findings of noncompliance.
- Convened a conference call with CDS State IEU team, NERRC, representatives from OSEP and the regional site directors and regional site team leaders to discuss the importance of ensuring the correction of noncompliance.

One of the outcomes of the two-day work was a documented plan of action to address remaining areas of noncompliance and to provide continued TA to the CDS State IEU and regional sites.

As part of this two-day meeting, the CDS State IEU Leadership Team, NERRC, and representatives from OSEP spoke with regional site directors and program leads through the scheduled May 3, 2012 "Lunch and Learn" teleconference about the importance of correction of noncompliance and the state's plan for ensuring this happens in a timely manner going forward.

Since the May TA the CDS State IEU and NERRC have had several follow up calls to review data.

- In July 2012 at the OSEP Leadership Conference CDS State IEU staff, NERRC and NECTAC representatives met to organize a TA opportunity to regional site directors to address the understanding of OSEP requirements related to verification of correction of noncompliance and corrective action plans and to discuss factors contributing to local and state performance on specific APR indicators. The TA opportunity occurred in August 2012. Specific focused training occurred on indicators C1, C7, C8, B11 and B12.
- NERRC provided on-site TA in September 2012 with the CDS State IEU Leadership Team and the regional site directors. Within the two days of conversation a great deal of time was spent reviewing and assessing the local contributing factors for indicators C7, C8 and B11. The activity will continue through other indicators throughout the year.
- The CDS State IEU Policy Manager and Data Distinguished Educator (DE) continue to serve as members of the B-20 GSST. The two named persons guide and complete all monitoring activities for the CDS State IEU with assistance from the CDS State IEU Leadership Team when necessary.
- The CDS State IEU has participated in all monthly Director Council meetings and each month has discussed findings of noncompliance and correction of noncompliance procedures; provided guidance on OSEP Memo 09-02; provided information obtained through OSEP TA webinars and OSEP conferences. Regional site directors and staff are more aware of the requirements and expectations of General Supervision.
- Over the last year the Data Distinguished Educator has maintained a database of all areas of noncompliance. The system documents when the finding was made, when it was corrected, and if within a year of identification. The information has been shared with regional site directors and NERRC.
- Maine participated in the Targeting Indicator Improvement (TII) process facilitated by NERRC during the fall of 2011. This intensive two-day structured process helped CDS State IEU staff identify underlying performance drivers and barriers to improvement for this indicator. As a result

of the TII process, specific, prioritized action steps informed by indicator data and contributing factors were created to address the barriers to improved performance. As part of the TII process, progress checkpoints have been created to review action steps and progress will be reported in future APRs. The indicators Maine selected to focus on in this work are C9 and B15. Most of the work and action planning has been specific to CDS due to the make-up of the TII group.

- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a CAP to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction the data submitted were reviewed and verified using the data system or through a file review. For findings that were child-specific, the CDS State IEU reviewed the child’s file through the data system as well as the file located at the regional site to ensure the child was provided the needed requirement.
- As of submission of this report all findings made in FFY 2011 have been timely corrected.

Activities completed by regional sites:

- CAPs were reviewed and discussed a number of times over the course of the year.
- File audits were conducted and an explanation of all child specific noncompliance was determined.
- Completed a file audit in June 2012 to monitor compliance.
- Regional site directors shared Letters of Findings, Letters of Correction, and information distributed by the CDS State IEU to their staff.

Timely Correction of FFY 2010 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified in FFY 2010 (the period from July 1, 2010, through June 30, 2011) (Sum of Column a on the Indicator C9 Worksheet)	13
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column b on the Indicator C9 Worksheet)	9
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	4

Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)	4
5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	4
6. Number of FFY 2010 findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

Verification of Correction for findings of noncompliance identified in FFY 2010 (either timely or subsequent):

Prior to considering any finding from FFY 2010 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing the specific regulatory requirements (IDEA and MUSER) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected

through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

For timeline specific requirements, CDS also verified that the action occurred, although late. For other requirements, CDS verified correction for each child.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2010 have been subsequently corrected.

Correction of Remaining FFY 2009 Findings of Noncompliance (if applicable)

If the State reported less than 100% for this indicator in its FFY 2010 APR and did not report in the FFY 2010 APR that the remaining FFY 2009 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2009 findings noted in OSEP's June 2012 FFY 2010 APR response table for this indicator	0
2. Number of remaining FFY 2009 findings the State has verified as corrected	0
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	0

Correction of Any Remaining Findings of Noncompliance identified in FFY 2008 (if applicable)

If the State reported less than 100% for this indicator in its FFY 2010 APR and did not report in the FFY 2010 APR that the remaining FFY 2008 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2008 findings noted in OSEP's June 2012 FFY 2010 APR response table for this indicator	3
2. Number of remaining FFY 2008 findings the State has verified as corrected	3

3. Number of remaining FFY 2008 findings the State has NOT verified as corrected [(1) minus (2)]	0
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Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2008 have been subsequently corrected.

Verification of Correction of FFY 2008 findings (either timely or subsequent)

Prior to considering any finding from FFY 2008 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing the specific regulatory requirements (IDEA and MUSER) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

For timeline specific requirements, CDS also verified that the action occurred, although late. For other requirements, CDS verified correction for each child.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Any Remaining Findings of Noncompliance identified in FFY 2007 (if applicable)

If the State reported less than 100% for this indicator in its FFY 2010 APR and did not report in the FFY 2010 APR that the remaining FFY 2007 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2007 findings noted in OSEP's June 2012 FFY 2010 APR response table for this indicator	10
2. Number of remaining FFY 2007 findings the State has verified as corrected	10
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2007 have been subsequently corrected.

Verification of Correction of FFY 2007 findings (either timely or subsequent):

Prior to considering any finding from FFY 2007 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

For timeline specific requirements, CDS also verified that the action occurred, although late. For other requirements, CDS verified correction for each child.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs. For all long standing areas of noncompliance found prior to FFY 2010 CDS State IEU provided the regional site with their CAP rather than allowing the regional site to write their own improvement activities. These activities ranged from providing staff training, attending required TA, submitting monthly reports to the CDS State IEU and completing CAP check in calls with the CDS State IEU.

Correction of Any Remaining Findings of Noncompliance identified in FFY 2006 (if applicable)

If the State reported less than 100% for this indicator in its FFY 2010 APR and did not report in the FFY 2010 APR that the remaining FFY 2006 findings were subsequently corrected, provide the information below:

4. Number of remaining FFY 2006 findings noted in OSEP's June 2012 FFY 2010 APR response table for this indicator	1
5. Number of remaining FFY 2006 findings the State has verified as corrected	1
6. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	0

Actions Taken if Noncompliance Not Corrected:

All findings of noncompliance for FFY 2006 have been corrected.

Verification of Correction of Remaining FFY 2006 findings

CDS State IEU has complied with the timely transition conference requirements (34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9))) required in the *OSEP Response to SPP/APR* dated June 15, 2007.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2006:

CDS State IEU has complied with the timely transition conference requirements (34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9))) required in the *OSEP Response to SPP/APR* dated June 15, 2007.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State’s Response
<p>OSEP appreciates the State’s efforts in timely correcting findings of noncompliance identified in FFY 2009. However, OSEP is concerned about the State’s failure to correct longstanding noncompliance from FFY 2008, FFY 2007, and FFY 2006. The State must take the steps necessary to ensure that it can report, in the FFY 2011 APR that it has corrected the remaining three findings identified in FFY 2008, the remaining ten findings identified in FFY 2007, and the one remaining finding identified in FFY 2006. If the State cannot report in the FFY 2011 APR that this noncompliance has been corrected, the State must report in the FFY 2011 APR: (1) the specific nature of the noncompliance; (2) the State’s explanation as to why the noncompliance has persisted; (3) the steps that the State has taken to ensure the correction of each of the remaining findings of noncompliance, and any new or different actions the State has taken, since the submission of its FFY 2010 APR, to ensure such correction; and (4) any new or different actions the State will take to ensure such correction.</p>	<p>All longstanding areas of noncompliance have been corrected.</p>
<p>When reporting in the FFY 2011 APR on the correction of findings of noncompliance identified in FFY 2010, the State must report that it verified that each EIS program with findings of noncompliance identified in FFY 2010: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memo 09- 02. In the FFY 2011 APR, the State must describe the specific</p>	<p>CDS reports on the verification of correction of noncompliance identified in FFY 2010 consistent with OSEP Memorandum 09-02 in the “Correction of Remaining 2010 Findings of Noncompliance (if applicable):” section above.</p>

actions that were taken to verify the correction.	
In addition, in reporting on Indicator 9 in the FFY 2011 APR, the State must use the Indicator 9 Worksheet.	Indicator 9 worksheet used above.
Further, in responding to Indicators 1, 7, 8A, and 8C in the FFY 2011 APR, the State must report on correction of the noncompliance described in this table under those indicators.	Correction of noncompliance for indicators 1, 7, 8A, and 8C are described in the tables and narrative of those indicators.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicators 10 & 11: Pursuant to OSEP Memorandum 13-7, with the accompanying Part C State Performance Plan (SPP) and Annual Performance Report (APR) Part C Indicator Measurement Table and Instructions, Indicators 10 (Complaints) and 11 (Due Process hearings) have been deleted from the SPP/APR, effective with the FFY 2011 submission of the APR. Data related to these two indicators are reported in November to the Department of Education Office of Special Education as part of reporting required under Section 618 of the IDEA. This data may be found at:

<https://www.ideadata.org/PartCData.asp> .

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Table 4, Section C

SECTION C: Due Process Complaints	
(3) Total number of due process complaints filed (for all States)	0
(3.1) Resolution meetings (applicable ONLY for States using Part B due process hearing procedures)	0
(a) Written settlement agreements reached through resolution meetings	0
(3.2) Hearings fully adjudicated (for all States) –	0
(a) Complete EITHER item (1) <u>OR</u> item (2), below, as applicable.	
(1) Decisions within timeline – <u>Part C</u> Procedures	-9”
(2) Decisions within timeline – <u>Part B</u> Procedures	0
(b) Decisions within extended timeline (applicable ONLY if using Part B due process hearing procedures)	0
(3.3) Hearing pending (for all States)	0
(3.4) Due process complaint withdrawn or dismissed (including resolved without a hearing)(for all States)	0

* The notation “-9” indicates that the data are not reported because the state does not have separate Part C procedures to report. Maine follows the same procedures as Part B.

FFY	Measurable and Rigorous Target
FFY 2011	No resolution session

Actual Target Data for FFY 2011:

No cases were initiated

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

No cases were initiated, so result could not be calculated.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

[If applicable]

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

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

Table 4, Section B

SECTION B: Mediation Requests	
(2) Total number of mediation requests received	3
(2.1) Mediations held	1
(a) Mediations held related to due process complaints	0
(i) Mediation agreements related to due process complaints	0
(b) Mediations held not related to due process complaints	1
(i) Mediation agreements not related to due process complaints	1
(2.2) Mediations pending	0
(2.3) Mediations not held	2

FFY	Measurable and Rigorous Target
FFY 2011	82%

Actual Target Data for FFY 2011:

100%

One mediations held = $[(0+1)/1]*100$

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

A single mediation was held resulting in a mediation agreement.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

[If applicable]

Improvement activities have been reviewed by CDS State IEU and MACECD and no changes have been made.

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

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

- a. Submitted on or before due dates (February 1 for child count and settings and November 1 for exiting and dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the “Indicator 14 Data Rubric” for reporting data for this indicator (see Attachment 2).

FFY	Measurable and Rigorous Target
<i>FFY 2011</i>	100%

Actual Target Data for FFY 2011:

100%

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

Data collected for use in the development of this APR are valid and reliable, and collection of those data from sites in the state was timely and confirmed to be accurate using data validation checks. The 618 data submissions for Part C tables 1 – 4 were timely, complete and passed the required data checks. No data notes were required.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

[If applicable]

Part C Indicator 14 - SPP/APR Data			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2
8a	1	1	2
8b	1	1	2
8c	1	1	2
9	1	1	2
12	1	1	2
13	1	1	2
		Subtotal	26
APR Score Calculation	Timely Submission Points - If the FFY 2011 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total - (Sum of subtotal and Timely Submission Points) =		31

618 Data - Indicator 14					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/12	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/1/12	1	1	1	1	4

APR Template – Part C (1)

Maine
State

Table 3 - Exiting Due Date: 11/7/12	1	1	1	N/A	3
Table 4 - Dispute Resolution Due Date: 11/7/12	1	1	1	N/A	3
				Subtotal	14
618 Score Calculation			Grand Total (Subtotal X 2.2) =		31

Indicator #14 Calculation	
A. APR Grand Total	31.00
B. 618 Grand Total	30.80
C. APR Grand Total (A) + 618 Grand Total (B) =	61.80
Total NA in APR	0.00
Total NA in 618	0.00
Base	61.80
D. Subtotal (C divided by Base*) =	1.000
E. Indicator Score (Subtotal D x 100) =	100.0

*Note any cell marked as N/A will decrease the denominator by 1 for APR and 2.2 for 618