

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:**

Broad Stakeholder Input. Montana's lead agency, The Developmental Disabilities Program (DPP) of the Department of Health and Human Services engaged in a variety of activities to ensure broad stakeholder input.

- DDP staff was informed of the SPP requirements, including stakeholder input.
- DDP and other Part C technical assistance representatives informed the Family Support Services Advisory Council (FSSAC – Montana's ICC), regional Part C agency staff, Montana's Comprehensive System of Personnel Development (CSPD) including their subcommittee of early childhood professional development, Parents Let's Unite for Kids (PLUK – Montana's Parent Training and Information Center), Montana Council On Developmental Disabilities, and other groups concerned with early intervention services about the new IDEA, SPP requirements for accountability and how they can provide input and/or review drafts of the SPP.
- The DDP and FSSAC formed a Part C Work Group to address the SPP, the new IDEA 2004, and Part C improvements. This group includes representatives of the FSSAC, each regional Part C agencies, Part C Coordinator, DDP monitoring staff and a Part C technical assistant provider/Part C GSEG Director. Most of this group had worked on the last Part C APR. The group reviewed the SPP requirements, previous APRs, other early intervention data for preparation of a draft SPP.
- Dr. Kathy Hebbeler of the ECO Center consulted with the Part C Coordinator and Part C GSEG Director on several occasions and directly worked with the Part C Work Group on components of the SPP draft.
- The Part C Work Group directly provided input and assisted in the development of the draft of the SPP.
- The draft SPP was disseminated to the FSSAC members, discussed at the November 2005 FSSAC meeting where additional input was provided.
- The Part C Coordinator and Part C GSEG Director worked directly with PLUK staff (who receive or received in the past Part C services) to review and provide input for the SPP draft and final SPP.
- The Director of the Montana Council On Developmental Disabilities discussed the Part C SPP and shared with them a Part C SPP draft at their November meeting, and informed the members how they could provide feedback to the Part C Coordinator.
- The regional Part C agencies informed their boards or directors and advisory boards about the draft SPP and how they could provide input for the final SPP.
- The Part C Coordinator and Part C technical assistance provider reviewed all stakeholder input as part of the development of the final SPP.

Dissemination of Montana's Part C SPP to the Public include:

- Announcement of the Part C SPP and how to obtain a copy in Montana's major newspapers.
- The Part C SPP will be on the following websites: DDP/FSSAC; <http://www.dphhs.mt.gov/fssac>; Office of Public Instruction (OPI) Special Education; PLUK; Montana Council On Developmental Disabilities; regional Part C agency.
- Availability of the Part C SPP has been discussed and will be disseminated to the members of the FSSAC, Special Education Advisory Panel, Montana Council On Developmental Disabilities, Board of Directors for the regional Part C agencies, and CSPD.
- Other advisory councils and planning groups associated with young children and people with disabilities will be made aware of the Part C SPP and how to obtain a copy.
- PLUK will disseminate the Part C SPP through their weekly electronic newsletter, which is also available in print.

- Montana State Library will have copies available to send out to other state libraries throughout Montana. On their website they will have a link, so that it can be accessed through the web. They will also include it in their electronic database catalog.

(The following items are to be completed for each monitoring priority/indicator.)

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

Measurement:

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

Account for untimely receipt of services.

Overview of Issue/Description of System or Process:

Brief overview of Part C services in Montana. Part C services are provided through contracts with seven independent nonprofit Part C agencies in five service regions covering all areas of the state. These services are monitored by the Developmental Disabilities Program's (DDP) Part C Coordinator and other DDP state level staff as well as DDP staff in offices in each of the regions (See Indicator 9 for an overview of the DDP supervision and monitoring for Part C services).

Early intervention services have been designed to maximize family competency and minimize family dependency on service agencies. Parents have the opportunity to write their own service measurable result/outcomes and objectives and are the primary decision makers for the Individual Family Service Plan (IFSP). The system recognizes and respects the variety of "family roles" which families may choose to play in developing, implementing and evaluating early intervention services for themselves and their children. The services are designed to meet the diverse individual needs of families. Family education and support services include: (1) Child-focused and family-focused education. The child-focused instruction includes development and monitoring of learning programs that the family may implement with their child in the natural settings of their home and community and within the normal context of their daily routine. Family-focused instruction includes assisting family members to learn skills they must possess to become the primary change agent and an effective advocate for their child. (2) Direct child instruction consists of direct "hands-on" teaching provided to the child by the Family Support Specialist (FSS) or other Part C service provider. (3) Family support includes services and resources to assist the family to develop in areas that are beneficial to the child and the family as a whole. These services may include providing equipment from loan libraries; social and emotional support; general education information; information regarding available community and statewide resources and making referrals to appropriate agencies; and follow-along services. (4) The FSS assumes an active role as service coordinator and family advocate in accessing services and provides instruction to the family to enable them to someday assume the role of support coordinator and, if desired, to access services on their own. Part C services in Montana are home-based, no matter where families live in the state. At times, families may choose to have home visits or meetings occur in some other community setting (e.g., a rural family will be shopping etc. in the community where the Part C agency is located, so the family may choose to work with their FSS at a setting of their choice).

Once a child is determined eligible for Part C Services a FSS is assigned and necessary activities are started to develop the child and family's initial IFSP within 45 calendar days after a referral. The focus of planning for services is the completion of assessments, information gathering, and development of the IFSP with parents and other IFSP team members. Services and supports identified in the IFSP can be provided once the IFSP is completed and written parental consent has been obtained. The IFSP includes all the information required by Part C of the IDEA. Given that the FSS provides services identified on the IFSP, IFSP services are usually initiated immediately, sometimes right after the IFSP has been approved. The family and FSS must review the child and family's IFSP monthly or more frequently if conditions warrant or if the family request review. The IFSP is a dynamic document and following appropriate procedures can be changed to reflect new priorities concerning services.

Part C Personnel in Montana. Family Support Specialist (FSS) are required to go through a rigorous certification process. The purpose of this is to insure that they are qualified and competent to provide Part C services within their local agencies and the State. The FSS must exhibit and maintain understanding of the skills necessary for the 10 early intervention competencies. The competencies insure that FSSs have a broad array of knowledge and skills required to assist children with disabilities and their families. The competencies are based on recommendations made by professional organizations (e.g., DEC of CEC), researchers in the field of early intervention and university faculty involved in professional development in early intervention. The certification system includes two levels. New FSSs must meet minimum certification requirements required for the first level of certification, which cover their first two years of employment. During that time period, new FSSs receive training, coaching and mentoring in providing Part C early intervention services. Further, the new FSS develops a portfolio that documents they possess the skill and knowledge for each of the 10 FSS competencies. The portfolio's are reviewed and evaluated by a state FSS Certification Panel made up of the Part C Coordinator, parents who have or are receiving Part C services, an early intervention university faculty member, a fully certified FSS and director of one of the regional Part C agencies. After an FSS's portfolio is evaluated, the FSS is interviewed by the Panel concerning any competencies the Panel did not find sufficient supporting documentation in the FSS's portfolio. The Panel then determines if the FSS meets full certification, needs to provide further documentation, or needs to seek further training for a particular competency(s).

The DPP requires that for other early intervention professionals providing Part C services meet Montana's highest established certification or licensing qualifications for their individual occupations. With the advent of Part C services in Montana, the state developed, implemented, and maintains a system of personnel qualifications that requires the use of state-credentialed paraprofessionals and professionals to provide a broad range of Part C services to eligible children and their families. The following personnel must meet State Board of Occupational Licensing's highest requirements for each entry level position in order to provide Part C early intervention services to Part C eligible children and their families: Audiologist, Speech/Language Pathologist, Physical Therapist, Occupational Therapist, Psychologist/Family Therapist, Registered Professional Nurse, Registered Dietitian/Licensed Nutritionist, Physicians/Pediatrician, Social Worker, Mobility Training Specialist, Vision Specialists (including ophthalmologists and optometrists).

Montana's Comprehensive System of Personnel Development (CSPD): The DPP has participated in Montana's CSPD that was developed under Part B of the IDEA and is continued, while not required by the new IDEA for Part B, by Montana's SEA, the Office of Public Instruction. The CSPD directly relates to pre-service and in-service educational activities for early intervention professional service providers identified in Part C including: FSSs, Special Educators, Speech and Language Pathologists, audiologists, occupational therapists, pediatricians and other physicians, physical therapists, psychologists, social workers, nurses, registered dietitians, vision specialists orientations and mobility specialists, and family therapists. In addition, educational opportunities are made available to other professionals, such as childcare providers, Early Head Start staff, and preschool staff who provide direct or related early intervention services. The CSPD assures professional development include:

Technical assistance and support for pre-service and in-service training to be conducted on an interdisciplinary basis when appropriate.

Technical assistance and support for training a variety of personnel needed to meet the requirements of Part C, including public and private providers, primary referral sources, paraprofessionals, families, and persons who will serve as support coordinators.

The early intervention education activities cover:

- Understanding the basic components of early intervention services available in the state, including Part C Services referral processes,
- Meeting the interrelated social or emotional health, developmental, and educational needs of eligible children with research based early intervention practices;
- Assisting families in enhancing the development of their children and participating fully in the development and implementation of IFSPs.

The early intervention education activities may also relate to:

- Implementing innovative strategies and activities for recruitment and retention of early intervention service providers;
- Promoting the preparation of early intervention providers who are fully and appropriately qualified to provide early intervention services under Part C.

Part C General Supervision/Monitoring and Data Reporting: Please refer to Indicator 9 for a description of Montana's Part C general supervision and monitoring of Part C services as well as the plan for reporting the state APR and APR's for each of the seven regional Part C agencies.

Part C System Improvement Comprehensive Strategic Plan: The DDP, FSSAC and regional Part C agencies have established a Part C System Improvement Comprehensive Strategic Plan to direct improvement outcomes, objectives and activities across all facets of Part C services, including the activities listed for each Indicator in the SPP. The plan is routinely updated for the status of each outcome and objective, to make any additions or changes, and it is reviewed for input with the FSSAC, DDP and regional Part C agencies. The Part C Coordinator and Part C Work Group with designated partners implement the objectives and activities for each outcome. This plan ensures that the various improvement strategies are coordinated and systemically tracked.

Baseline Data for FFY 2004 (2004-2005):

100% of infants and toddlers with IFSPs receive early intervention services on their IFSPs in a timely manner.

Discussion of Baseline Data:

Definition of Timely Services: The definition of "timely" of services is within 30 days of the parent (s) signing the IFSP, Part C service(s) schedule to be provided within the first 30 days are provided.

Given the role of FSSs in Montana they not only coordinate services provided by other early intervention service providers, but also directly provide child and family focused services, it is routine that Part C services on the child's and family's IFSP are provided immediately or very soon after the parent(s) sign the IFSP.

Baseline Data Collection: As part of DDP's monitoring of Part C services, each of the seven Part C agencies, covering the whole state, were required to randomly select from all the Part C eligible children with IFSPs, 5 children/families representative of all Part C children/families in their particular region. The files were reviewed for each child/family selected to determine if services were provided according to the definition of timely services, and recording: (1) if the Part C service(s) were provided in a timely manner, and if not, (2) the number of days over the timely definition for each child if services scheduled were not provided within the 30 days after the IFSP was signed and (3) the reason the services were not provided (e.g., child was sick, winter weather prevented travel, service

provider canceled). The definition and procedures/instructions were developed by the Part C Coordinator and the Part C Work Group (with representatives from each of the regional Part C agencies) to ensure uniform implementation of the data collection. The seven regional Part C agencies reported the data to the Part C Coordinator who compiled the data for the SPP. Each of the Part C agencies will keep in their SPP record for this indicator, including the identification of the children/families randomly selected, so that the DDP during the annual monitoring visit will be able to verify the accuracy (reliability and validity) of the data reported.

Other Data Related to Timely Provision of Part C Services:

Other data gathered as part of Montana's general supervision and monitoring processes address factors that promote the timely delivery of early intervention services. See Indicator 9 for a description of those processes. One monitoring activity is annually reviewing each regional Part C agency by DDP staff that includes reviewing a random sample of 5 files for children in Part C services using MONTANA'S COMPREHENSIVE EVALUATION PROCESS FOR FAMILY EDUCATION AND SUPPORT SERVICES TOOL. Results related to Indicator 1 for Fiscal Year (FY) 2004-2005 include:

- Thirty- five out of thirty- five (100%) files reviewed indicated that services were provided without delay and according to Part C requirements for children/family.
- Thirty-five out of thirty-five (100%) files reviewed showed that each agency provided coordination services for each eligible child and family review.
- Thirty-five out of thirty-five (100%)files documented that resources and support services as identified on the IFSP are provided to each eligible child and family.
- Thirty-five out of thirty-five (100%) files reviewed that IFSPs are in place within 45 days of the referral date.
- Thirty-five out of thirty-five (100%) files reviewed documented contacts with families for the purpose of providing support coordination, direct services, or to provide supervision and consultation to subcontracted personnel.
- Monitoring indicated that for each agency there was a timely assignment of a Family Support Specialist to each child and family.

The following data is from the monitoring of seven regional Part C agencies in FY 2002-2003 and FY 2003-2004. This data indicates a strong trend in providing timely services.

- Thirty-five out of thirty five (100%) files reviewed indicated that services were provided without delay and according to Part C requirements for children/families eligible for Part C Services. (FY 2002-2003, 100%, FY 2003-2004, 100%)
- Thirty-five out of thirty five (100%) files reviewed showed that each agency provided coordination services for each eligible child and family in the file review. (FY 2002-2003, 100%, FY 2003-2004,100%)
- Thirty-five out of thirty-five (100%) files documented that resources and support services as identified on the IFSP are provided to each eligible child/family. (FY 2002-2003, 100%, FY 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed showed that agency cooperated/coordinated with other community service agencies in meeting child and family needs for the files reviewed. (FY 2002-2003, 100%, FY 2003-2004,100%)
- Thirty-five out of thirty-five (100%) files reviewed documented contacts with families for the purpose of providing support coordination, direct services, or to provide supervision and consultation to subcontracted personnel. (FY 2002-2003, 100%, FY2003-2004, 100%)

SPP Template – Part C (3)

Montana
State

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2006 (2006-2007)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2007 (2007-2008)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2008 (2008-2009)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2009 (2009-2010)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.
2010 (2010-2011)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Biannually Montana will continue to refine the tool, Montana's Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State's data collection process for this indicator.	(1) January 1, 2006 to June 30, 2006 (2) July 1, 2007 to June 30, 2008 (3) July 1, 2010 to June 30, 2011	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.
2. Provide initial and annual training for the Quality Improvement Specialists.	(1) July 1, 2006- June 30, 2007 (2) July 1, 2007- June 30, 2008 (3) July 1, 2008- June 30, 2009 (4) July 1, 2009- June	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.

SPP Template – Part C (3)

Montana
State

	30,2010 (5) July 1, 2010- June 30,2011	
3. DDP will monitor programs for compliance with this indicator. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop, implement and monitor an improvement Plan or Corrective Action.	(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.
4. Regional Part C agencies will train new FSSs on the Part C requirements and competences related to Indicator 1.	(1) January 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011	Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.
5. Provide in-service training and resources concerning research-based practices for evaluation and assessment of infants and toddlers.	January 1, 2006 to December 31, 2007	Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.
6. Biannually assess personnel development needs concerning early intervention practices associated with Indicator 1.	(1) January 1, 2006 to June 30, 2006 (2) July 1, 2007 to June 30, 2008 (3) July 1, 2010 to June 30, 2011	Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.

SPP Template – Part C (3)

Montana
State

7. Montana will develop a uniformed IFSP to be used statewide.	September 30, 2009 to June 30, 2010	Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.
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Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:**

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.

Changes to Indicator 2's language as of 04/09/10:

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

Measurement:

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

Overview of Issue/Description of System or Process:

All seven regional Part C agencies focus on providing early intervention services in natural environments. The majority of infants and toddlers receive services in the home. Montana's Part C services and the other Developmental Disability Program's (DDP) children and family services are home-based. As noted in Indicator 1, Family Support Specialist (FSS) not only provide service coordination, but also provide direct child and family focused early intervention services. Further, Montana strongly supports childcare settings that are inclusive of all children. The Child and Family Services Division of the Department of Health and Human Services has worked closely with Part C of DDP and The University of Montana Rural Institute's Child Care Plus (a program that has had a series of demonstration and training projects for child care providers to serve all children funded by OSEP) to support child care providers with training, technical assistance and subsidies to provide child care services to young children with developmental delays and disabilities. Further, Montana was selected by OSEP and the U.S. Department of Health and Human Services to participate in a national effort to promote full inclusion of young children with delays and disabilities being coordinated by NECTAC. In addition to services provided in the home and community settings, a number of the agencies offer playgroups or parent training groups in their center, to offer families the opportunity to network with other parents and for their children to interact with other peers with and without disabilities.

The DDP monitors the seven regional Part C agencies annually. This is part of the Quality Assurance Process, which is described in more detail in Indicator #9. This process looks at IFSPs to see where services are being provided. When early intervention services are not provided in natural environments, the IFSP and files must include an appropriate justification as to why they are not.

The December 1, 2004 618 data were compiled by the seven regional Part C agencies data managers according to DDP's training and instructions. The information is then submitted to the DDP's Part C Coordinator to analyze all of the data statewide and for each agency. The DDP reviews the compiled data from the seven regional Part C agencies and will do follow up on information that may need some clarification.

The data and information collected through these processes are reported to each regional Part C agency, the DDP regional office administrators, Part C coordinator, DDP state level administrators, and the Family Support Service Advisory Council (ICC). The Part C Coordinator and other DDP staff analyze the data and report findings to the above groups for purposes of program monitoring and improvement planning.

Baseline Data for FFY 2004 (2004-2005):

December 1, 2004, Child Count: 93% of infants and toddlers with IFSPs primarily receive early intervention services in the home or programs for typically developing children.

- Home: 89%
- Programs for typically developing children: 4%

December 1, 2004 Child Count Data Table

FY 2003-2004	Numbers Served	Percent Served
Total number of children in December 1 child Count	677	
Home	600	89%
Program designed for typically developing children	24	4%
Program designed for children with developmental delay	18	3%
Hospital (inpatient)	4	1%
Residential	0	0%
Service Provider	27	4%
Other Settings	4	1%

Primary Settings by age:

- 160 infants, zero to one (94%), receive services in the home or program designed for typically developing children.
- 204 toddlers ages one to two (93%), receive services in the home or programs designed for typically developing children.
- 260 toddlers two to three (91%), receive services in the home or programs designed for typically developing children.

Discussion of Baseline Data:

The child count data concerning services being primarily provided in natural environment is consistent with 618 and other data from previous years. As noted, Montana strongly supports the delivery of Part C and other services for children with delays and disabilities in natural environments. Through Part C/DDP monitoring, IFSPs and files are reviewed to ensure that services are provided in natural environment and when not, appropriately explained in the IFSP and the child’s file. If it appears to be a systemic issue with

SPP Template – Part C (3)

Montana
State

an agency as identified through the 618 data, monitoring or other means, the Part C Coordinator will address the issue with the regional Part C agency. See the below table for trend data.

Child Count Data from 1999 – 2004 Table

	1999	2000	2001	2002	2003	2004
Total number of children in December 1 Child Count	580	574	600	574	628	677
Program designed for typically developing children	13 (2%)	30 (5%)	17 (3%)	20 (3%)	16 (3%)	24 (4%)
Home	525 (91%)	520 (91%)	551 (92%)	527 (92%)	559 (89%)	600 (89%)
Percent of infants and Toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children	93%	96%	95%	95%	92%	93%
Program designed for children with developmental delay	8 (1.4%)	2 (0%)	0 (0%)	1 (0%)	22 (4%)	18 (3%)
Hospital (inpatient)	3 (1%)	4 (1%)	0 (0%)	5 (1%)	0 (0%)	4 (1%)
Residential	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Service Provider	31 (5%)	15 (3%)	31 (5%)	20 (3%)	29 (5%)	27 (4%)
Other Settings	0 (0%)	3 (1%)	1 (0%)	1 (0%)	2 (0%)	4 (1%)

* % were rounded to whole #'s, in rounding the % to whole numbers, the % may be lesser or greater than 100%.

The data was collected from the Federal Child Count on Settings for the FY 1999, 2000, 2001, 2002, 2003, and 2004 which indicates that 92-96% of Part C services are provided either in the family's home or programs designed for typically developing children. This is a much higher rate than the national average for this data (Ranges from 1999, 73% to 2002, 83%, data found in OSEP/Westat Part C/B State Data Profiles 2005). Services provided primarily in the home setting have increased 1% from the FY 2003. Of the 8% (53/677) of children who receive services in settings other than home or program for typical developing children, 4% of the 8% of these children were served in Service Providers in the community and locations where children with or without disabilities would receive services. The majority of these children are involved in a regional Part C agency that is part of a school district that conducts a special education preschool readiness program for toddlers. The DDP will work with the agency to make the program inclusive of all children and not just toddlers with delays or disabilities. However, the parents are supportive of the program and made the choice to enroll their toddlers in the program as noted on their IFSPs and in their files. The other situations where children are not served in their natural environments occurred because the specific services were not available in natural settings in their communities.

FFY	Measurable and Rigorous Target
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SPP Template – Part C (3)

Montana
State

2005 (2005-2006)	93% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children.
2006 (2006-2007)	93% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children.
2007 (2007-2008)	94% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children
2008 (2008-2009)	94% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children
2009 (2009-2010)	95% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children
2010 (2010-2011)	95% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children

Improvement Activities/Timelines/Resources:

Activity	Timeline	Resources
1. Based on each regional Part C agencies 618 data and monitoring data, work with the regional Part C agencies and the Quality Improvement Specialist to continue to promote utilization of appropriate community settings and programs for typically developing children in which services are delivered.	(1)February 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011	Seven regional Part C agencies, Part C Coordinator, Quality Improvement Specialist.
2. Collaborate with the Child and Family Services Division for providing training and technical assistance for the support of early childhood childcare settings that serve all children with appropriate high quality services.	(1)February 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011	Seven regional Part C agencies, Part C Coordinator, Child and Family Service Division, and Child Care Plus, Child Care Regional Resource Centers and child care providers.

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<p>3. Analyze the outcomes of Activity 2 above and plan with the Child and Family Services Division for providing training and technical assistance for the support of early childhood child care settings that serve all children with appropriate high quality services.</p>	<p>(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>Seven regional Part C agencies, Part C Coordinator, Child and Family Service Division, and Child Care Plus, Child Care Regional Resource Centers and child care providers.</p>
<p>4. Based on Activity 3 above collaborate with the Child and Family Services Division for providing training and technical assistance for the support of early childhood childcare settings that serve all children with appropriate high quality services.</p>	<p>(1) January 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>Seven regional Part C agencies, Part C Coordinator, Child and Family Service Division, and Child Care Plus, Child Care Regional Resource Centers and child care providers.</p>
<p>5. Annually review 618 data and monitoring data for state and each regional Part C agency and provide focused training and technical assistance for regional Part C agency staff/Family Support Specialists, Quality Improvement Specialist on 618 settings definitions and data collection requirements, monitoring requirements for Indicator 2.</p>	<p>(1) January 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>Seven regional Part C agencies, FSSAC, and Part C coordinator.</p>

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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

Measurement:

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

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improve functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- c. 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.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

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

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- c. 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.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.

c. 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.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

Overview of Issue/Description of System or Process:

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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

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

Measurement:

B. Positive social-emotional skills (including social relationships):

- d. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at 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 improve functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- f. 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.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

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

- d. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at 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 improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- f. 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.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

- a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
- b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
- c. 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.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

Overview of Issue/Description of System or Process:

Overview in the 2005 SPP:

The DDP and FSSAC formed a Part C Work Group to address the SPP, the new IDEA 2004, and Part C improvements. This group includes representatives of the FSSAC, each regional Part C agencies, Part C Coordinator, DDP monitoring staff and a Part C technical assistant provider/Part C GSEG Director. Most of this group had worked on the last Part C APR. In addition, Dr. Kathy Hebbeler from the ECO Center directly assisted the work group in making decisions about how to approach data collection for Indicator 3. The following components were part of Indicator 3 data collection system during the first child outcomes data collection time period (4-1-06 through 9-30-06 for the 2007 APR):

- All infants and toddlers who were at least six months of age were included in the data collection. Exceptions were: (1) toddlers who enter Part C services within six months of turning three years old, and (2) children (any age) who were in the program less than six months before they moved or exited Part C services.
- Data collection occurred during the development of the initial IFSP and for FFY 2006, with the development of subsequent IFSPs, and at or near exit or transition.
- The data sources included data form evaluations and assessments and the judgment of IFSP team members, including parents. Parents were involved in whatever ways they felt most comfortable providing their observations of their child's progress/development. Thus, parents could be directly involved in deciding for each sub-indicator if their child met the criteria for a, b, or c, or parents choose to provide the Family Support Specialist (FFS) or whole IFSP team their observations concerning their child's progress/development and the FSS use that information in the measurement process. For infants and toddlers who unexpectedly exit Part C services, the FSS collected the most recent data available for the child to make the decisions concerning the early childhood sub-indicators.
- Evaluations and assessments used both norm-referenced and curriculum/criterion-referenced instruments. Based on a survey from FSSs concerning instruments they used to develop a current IFSP for each Part C child they served and the most recent research-based early intervention practices for evaluations and assessments, a list of instruments has been finalized for measurement of Indicator 3. In addition, the final lists of instruments were developed with recommendations from the ECO Center.
- The Part C Work Group developed the initial list of approved instruments with the assistance of Dr. Hebbeler. The approved instruments include: Early Learning Accomplishment Profile (ELAP); Developmental Profile II; Alpern-Boll (DP-III); Hawaii Early Learning Profile (HELP); Battelle Developmental Inventory (Battelle); Developmental Assessment of Young Children

(DAY-C); Infant Toddler Developmental Assessment (IDA); Carolina Curriculum for Infants and Toddlers with Special Needs (Carolina); Vineland Adaptive Behavior Scales (Vineland); and Portage Growing Birth to Three (Portage 1-3). In addition, The Ounce of Prevention Scale (OUNCE) is also being considered.

- Montana adopted the ECO Center's Child Outcome Summary Form, their procedures for the form, their criteria for "same-aged peers, and other ECO resources designed for this process (e.g., instrument crosswalks). As noted above, input was based on IFSP team member's (including parents', FSS and other team members) observations and assessment data.
- Montana's Part C Work Group developed all the specific measurement activities and procedures for reporting by each FSS and each regional Part C agency. Each FSS was responsible for completing the measurement activities and entering the data into the appropriate form. Following the uniform procedures, each agency completed Indicator 3 Part C Agency Reporting Form and submitted the form to the Part C Coordinator and their regional DDP staff member responsible for monitoring their agency. The Part C Coordinator compiles the data for the APR.
- In addition, regional DDP staff responsible for each regional Part C agency will monitor these steps. The steps will be outlined in the DDP monitoring tool and procedures (see Indicator 9 for an overview of DDP's monitoring system for the regional Part C agencies). DDP staff will be provided training and technical assistance in monitoring for this Indicator.
- The DDP, Montana Part C GSEG Project and ECO Center will conduct training on the data collection system for regional Part C agency staff and DDP monitoring staff. Further, training will continue on research-based early intervention practices for evaluation and assessment, specifically focusing on the instruments for Indicator 3 data collection as well as for development of IFSP child-focused outcomes and programs to be carried out in natural environments and during infants' and toddlers' normal routines and activities.
- The data concerning Indicator 3 was used to create early intervention practice improvements at the levels of individual FSSs, regional Part C agency, and DDP/FSSAC. In conjunction with Montana's Part C GSEG, the DDP developed guidelines for using this data to identify individual FSS's and agency training needs concerning early intervention practices, and identify areas where system improvements may be needed (e.g., FSS orientation, data collection procedures) at a regional Part C agency and/or the DDP state level.
- Indicator 3 data was collected from April 1, 2006 through September 30, 2006 for the entry data to be reported for Indicator 3 on the February 1, 2007 APR.
- Montana developed the Early Child Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Manual. Montana's Director of the GSEG gave a presentation on Montana's process and manual at the NECTAC and ECO National Conference on Child and Family Outcomes Conference held in Albuquerque, NM. Montana's manual has also been posted on ECO's webpage and other states have used the document to base their child outcome process on.
- All of the steps of the Indicator 3 data collection system will be evaluated and forms and procedures will be revised accordingly, and training and technical assistance will be provided.

Approaches added after 2005 SPP Submission:

All the above criteria and child outcomes/COSF procedures continue to be applied to Montana's approach for Indicator 3 Child Outcomes.

- Montana made a modification to the child outcomes/COSF procedures. Originally infants under six months of age at entry into Part C services did not have their baseline child outcomes/COSF completed until they were at least six months of age. Now all infants entering Part C services have their baseline child outcomes/COSF completed after their first IFSP is completed. Montana will track infants who have their baseline child outcomes/COSF completed before turning six months of age and compare their progress with children older than six months when their baseline child outcomes/COSF are completed. Montana was concerned that many infants with

disabilities development is very similar to same-aged peers without disabilities and that the child outcomes/COSF measurement will not reflect the progress they have made, especially for those infants with established conditions associated with significant developmental delays.

- Montana updated the Early Childhood Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Collecting Outcomes Data- October 1, 2006 to June 30, 2007. The updated manual includes all the ECO Center updates that were provided on their website or by ECO staff. This version includes instructions for all Child Outcomes measures at annual IFSP meetings and transition/exits, in addition to the baseline measurement. The manual covers the Child Outcome data collection for the APRs submitted in 2008 and 2009. The manual provides a foundation for quality assurance for implementing the childhood outcomes
- system in Montana. This system utilizes the Early Childhood Outcomes Center's and Montana's Early Childhood Outcomes documents guidelines and process for completing the COSF(s) to determine children's functioning is accordance with OSEP's requirements for the three early childhood outcomes.
- To ensure the quality of the data collected, Montana developed quality assurance procedures and manual for individually reviewing each COSF to determine if the COSF was completed in accordance with Montana's and the ECO Center's guidelines. These procedures provide steps to (1) review each COSF, (2) record each COSF item as correct or having an issue with the entry (e.g., entry of COSF summary information for a rating was technically correct but could have been improved) and (3) summarize all the COSF review data on a COSF verification form for each regional Part C agency. In addition, information concerning how the local teams determined early childhood outcomes levels of functioning for each child and outcomes is also collected. On a quarterly basis, all of this information is shared with and used to assist the regional Part C agencies in improving the accuracy and quality of the data reported on the COSF(s).
- The Part C work group requested that there be a condense version of the Early Child Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Manual that Part C staff could use as a quick reference guide during COSF determination meetings for completing the COSF for a child. The quick reference child outcome manual was developed, reviewed by the Part C work group, revised, disseminated and is being used during COSF determination meetings. The Early Child Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Manual is used as a reference guide and for training with Part C staff.
- Montana used a "train the trainers" model for implementing the child outcomes/COSF system. The Part C work group members included supervisors and senior Family Support Specialist (FSS). As noted previously, these people participated in the development of Montana's approach for child outcomes and the development of all guidance manuals. In addition, they received training from Dr. Hebbeler of the ECO Center. In turn, these people trained the FSSs and other Part C staff in their agencies as well as new staff starting after the initial training. Further, they provide refresher training to their staff on a regular basis. Often the refresher training occurs after each regional Part C agency receives their quality assurance data for the COSFs completed during a previous quarter. On an annual basis, the Part C work group participates in refresher training with the Part C Coordinator and Part C GSEG Director.
- Montana created an electronic database to enter all COSF(s) data to be able to extract the data that is needed for future APRs and analysis of the child outcome/COSF data. Montana 's Part C Coordinator and GSEG Director continue to review each COSF(s) submitted by each of the seven regional Part C agencies on a quarterly basis to ensure that the data is valid and reliable. If there is an issue with a COSF, the Part C Coordinator will clarify the issue with the appropriate regional Part C agency. The Part C Coordinator will enter the COSF data into the database and check for correct entry.

- Montana continues to consult with the ECO Center on a regular basis and participate in their and OSEP's conference calls and national meetings. Montana GESG director presented during a net-conference call about Montana's process in reviewing the COSF(s) to ensure that the state is receiving valid and reliable data. The Part C Coordinator and GESG director also presented at ECO's annual National meeting on the process of ensuring reliable and valid data with the COSF(s) that are submitted to the state. Montana's the Early Child Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Manual and Quality Assurance Manual continues to be disseminated through the ECO Center's/NECTAC's website.

SPP update for FFY 2008

- Dr. Kathy Hebbeler provided training on February 24, 2009 to the Part C Coordinator and the contracted Technical Assistant provider from the University of Montana-Rural Institute (the GESG Project Director at that time) on analyzing the data from the seven regional Part C providers and to analysis the data to see what trends may be occurring and to see if the data the state is getting is reliable. Part C Coordinator and TA provider from the University of Montana- Rural Institute reviewed the data to look at the agencies that appeared to have outliers to the state data and investigate what might cause the outliers.
- Dr. Hebbeler then provided training and technical assistance (TA) to the trainers of the seven regional Part C agencies in Helena on February 25th and 26th. During this training/TA she reviewed what the Federal Reporting Categories were for child outcomes data, what was happening nationally, COSF refresher, and reviewed the data from the seven regional Part C agencies in terms of data quality issues and using the data for program improvement.
- Montana's Part C Coordinator and Technical Assistant (TA) provider from the University of Montana-Rural Institute continued to review each COSF(s) submitted by each of the seven regional Part C agencies on a quarterly basis to ensure that the data is valid and reliable. If there was an issue with a COSF, the Part C Coordinator clarified the issue with the appropriate regional Part C agency. The Part C Coordinator entered the COSF data into the database and checked for correct entry.
- The TA provider from the University of Montana-Rural Institute on a quarterly basis provided each of the seven regional Part C agencies with feedback on quality of their COSF data, any COSF entry details that might need improvement, and the same data combined across all the regional Part C agencies for a statewide comparison.
- The Part C Coordinator and the TA from the University of Montana-Rural Institute provided technical assistance to two agencies to ensure compliance to the COSFs instructions and how to use MT COSF resources for detailed decisions concerning data entry.
- The TA provider from the University of Montana-Rural Institute and Part C Coordinator ,with feedback from the workgroup, revised the Early Child Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Manual and Quick Reference Guide into two new documents with all ECO Center's COSFs guidance updates, **Early Childhood Outcomes: Part I – Foundations for Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers** and **Early Childhood Outcomes: Part II - COSF Teams Guide For Collecting and Reporting Outcomes Data**.
- Montana continued to participate in ECO's and OSEP's conference calls and national meetings.

. **Baseline Data for FFY 2007** (2007-2008):

This is NOT baseline data. Child outcomes data reported in 2010 will be considered baseline data. The progress data for children exiting in 2007 – 2008 is presented in the tables below.

A. Positive social-emotional skills (including social relationships):	Number of children	% of children and (calculation)
a. Percent of infants and toddlers who did not improve functioning	3	1% (3/277 x 100= 1.08%)
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	75	27% (75/277 x 100= 27.07%)
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	49	18% (49/277 x 100= 17.68%)
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	84	30% (84/277 x 100= 30.32%)
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	66	24% (66/277 x 100= 23.82%)
Total	277	100%

C. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children and (calculation)
a. Percent of infants and toddlers who did not improve functioning	3	1% (3/277 x 100= 1.08%)
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	75	27% (75/277 x 100= 27.07%)
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	60	22% (60/277X100= 21.66%)
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	100	36% (100/277 x 100= 36.10%)
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	39	14% (39/277 x 100= 14.07)
Total	277	100%

C. Use of appropriate behaviors to meet their needs:	Number of children	% of children and (calculation)
a. Percent of infants and toddlers who did not improve functioning	1	0.36% (1/277 x 100= .36%)
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	57	21% (57/277 x 100=20.57%)
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	70	25% (70/277 x 100= 25.27%)
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	103	37% (103/277 x 100= 37.18%)

e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	46	17% (46/277 x 100= 16.60%)
Total	277	100% **

[** Due to rounding decimal numbers up to the next whole number the whole number percents may not add up to exactly 100%]

Discussion of Baseline Data:

Child outcomes data reported in 2010 will be considered baseline data.

Montana collected progress data for all infants and toddlers who (1) had baseline COSFs completed, (2) were in services at least six months, and (3) had an exit COSF completed in the reporting period of 07/01/07 to 06/30/08. Progress data (exit COSFs) were completed for 277 children during the reporting year. Montana had an increase of 225 children from the last reporting period which reported 52 children with exit data for the FFY 2006-2007.

The child outcome data were collected following the procedures and guidelines outlined in the Indicator 3 Overview section and contained in Montana’s Early Childhood Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Collecting Outcomes Data. As noted, Montana has adopted the ECO Center’s COSF 7 point scale, system for determining child outcomes, and definition for comparison to same-aged peers. Each COSF was completed by a COSF team convened for the child in each regional Part C agency. Each regional Part C agency accumulated all their COSFs completed for a quarter, reviewed the COSFs for accuracy, and sent the COSFs to the Part C Coordinator. Further, the Part C Coordinator and Part C GSEG Project Director reviewed each COSF for quality assurance (validity and reliability) of the COSF data. If issues/errors were found, they were corrected with the appropriate Regional Part C agency. Once all COSFs quality assurance reviews were completed for a regional Part C agency for a quarter, and a report was completed. The report was sent to the agency if necessary, the agency was provided further technical assistance/training to improve the quality of their COSF data.

The child outcome data reported for the 07/01/07 to 06/30/08 is a snapshot of the number of infants and toddlers that have participated in Part C services. This report includes infants and toddlers who participated in Part C services for at least six months but not more than two years. It will take several years before Montana’s child outcome data represents all the children participating in Part C services.

Baseline Data for FFY 2008 (2008-2009):

Child outcomes baseline data for children exiting in 2008 – 2009 are presented in the tables below.

Table 3.1 Progress Data for Infants and Toddlers Exiting 2008-2009

A. Positive social-emotional skills (including social relationships):	Number of children	% of children and (calculation)
a. Percent of infants and toddlers who did not improve functioning	1	0.4% (1/265 x 100= .37%)
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	75	28% (75/265 x 100= 28.3%)
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers	41	15% (41/265 x 100= 15.47%)

but did not reach		
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	83	31% (83/265 x 100= 31.32%)
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	65	25% (65/265 x 100= 24.50%)
Total	265	100% **

B. Acquiring and Using Knowledge and Skills	Number of children	% of children and (calculation)
a. Percent of infants and toddlers who did not improve functioning	1	0.4% (1/265 x 100= .37%)
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	79	30% (79/265 x 100= 29.81%)
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	61	23% (61/265 x 100= 23.01%)
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	78	29% (78/265 x 100= 29.43%)
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	46	17% (46/265 x 100= 17.35%)
Total	265	100% **

C. Taking Appropriate Action to Meet Needs	Number of children	% of children and (calculation)
a. Percent of infants and toddlers who did not improve functioning	2	0.8% (2/265 x 100= .75%)
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	57	22% (57/265 x 100= 21.50%)
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach	62	23% (62/265 x 100= 23.39%)

d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	76	29% (76/265 x 100= 28.67%)
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	68	26% (68/265 x 100= 25.66%)
Total	265	100% **

[** Due to rounding decimal numbers up to the next whole number the whole number percents may not add up to exactly 100%]

Table 3.2 Summary Statements for FFY 2008
Baseline Data for Infants and Toddlers Exiting 2008-2009

Summary Statements	% of children FFY 08
Outcome A: Positive social-emotional skills (including social relationship)	
1. Of those children who entered the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program.	62.0%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.	55.8%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	
1. Of those children who entered the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.	63.5%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	46.8%
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who entered the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program.	70.1%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	54.3%

Discussion of Baseline Data:

Montana collected progress data to establish a baseline for setting targets for all infants and toddlers who (1) had a baseline COSFs completed, (2) were in services at least six months, and (3) had an exit COSF completed in the reporting period of 07/01/08 to 06/30/09. Baseline data using exit COSFs were completed for 265 children during this reporting year. These data are for all children in Part C that met the above criteria from all of the regional Part C agencies in Montana. Montana had a decrease by twelve children from the last reporting period which reported 277 children with exit data for the FFY 2007-2008. Montana had an increase of 225 children from the FFY 2006-2007 reporting period which reported 52 children with exit data. Montana used ECO's [Summary Statement Calculator](#) to produce the data for the **Table 3.2 Summary Statements for FFY 2008** and the statements below.

A. Social Emotional Skills

- 99.6% (75(b) + 41 (c)+ 83 (d)+ 65(e)=264/265*100= 99.6% [Table 3.1]) of infants and toddlers participating in Montana's Part C services for the FFY 08 made progress in their social relationships while they were enrolled. The 0.4% (percentage from a) of children who did not make progress included children with the most severe disabilities and/or degenerative conditions.
- 25% (percentage from category A.e Table 3.1) of the infants and toddlers participating in Montana's Part C services for the FFY 08 were functioning at age expectations at entry and at exit in this outcome area. 55.8% (percentage from statement A.2 Table 3.2) of the children were functioning at age expectations in this outcome area when they exited the program. (31.3% [55.8% - 24.5= 31.3%] started out behind and caught up, 25% entered and exited at age expectations.)
- 62% (percentage from statement A.1 Table 3.1) of the children who entered the program below age expectations made greater than expected gains, made substantial increases in their rates of growth (i.e. changed their growth trajectories).

D. Acquiring and Using Knowledge and Skills

- 99.6% (79(b) +61 (c) + 46(e) = 264/265*100=99.6% [Table 3.1]) of infants and toddlers participating in Montana's Part C services for the FFY 08 made progress in their acquiring and using knowledge and skills while they were enrolled. The 0.4% of children who did not make progress included children with the most severe disabilities and/or degenerative conditions.
- 17.4% (percentage from category B.e Table 3.1) of the infants and toddlers participating in Montana's Part C services for the FFY 08 were functioning at age expectations at entry and at exit in this outcome area. 46.8% (percentage from statement B.2 Table 3.2) of the children were functioning at age expectations in this outcome area when they exited the program. 29.4% (46.8-17.4= 29.4%) started out behind and caught up, 17.4% entered and exited at age expectations).
- 63.5% (percentage from statement B.1 Table 3.2) of the children who entered the program below age expectations made greater than expected gains, made substantial increases in their rates of growth. i.e. changed their growth trajectories.

E. Taking Appropriate Action to Meet Needs

- 99.2% (57(b)+ 62(c)+ 76(d)+ 68(e) = 99.2% [Table 3.1]) of infants and toddlers participating in Montana's Part C services for the FFY 08 made progress in their taking appropriate action to meet their needs while they were enrolled. The 0.8% of children who did not make progress included children with the most severe disabilities and/or degenerative conditions.
- 25.5% (percentage from category C.e Table 3.1) of the infants and toddlers participating in Montana's Part C services for the FFY 08 were functioning at age expectations at entry and at exit in this outcome area. 54.3 % (percentage from statement C.2 Table 3.2) of the children were functioning at age expectations in this outcome area when they exited the program. (28.8% [54.3-25.5= 28.8%] started out behind and caught up, 25.5% entered and exited at age expectations).
- 70.1% (percentage from statement C.1 Table 3.2) of the children who entered the program below age expectations made greater than expected gains, made substantial increases in their rates of growth. i.e. changed their growth trajectories.

Table 3.3 Comparison of FFY 2007 and 2008 Summary Statement Data Baseline Data for Infants and Toddlers Exiting 2007-2008 and 2008-2009

Summary Statements	% of children FFY 08	% of children FFY 07
Outcome A: Positive social-emotional skills (including social relationship)		
1. Of those children who entered the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program.	62.0%	63%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.	55.8%	54.2%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1. Of those children who entered the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program.	63.5%	67.2%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	46.8%	50.2%
Outcome C: Use of appropriate behaviors to meet their needs		
1. Of those children who entered the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program.	70.1%	74.9%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	54.3%	53.8%

Children who entered Part C below age expectations in positive social-emotional skills, substantially increased their rate of growth in positive social-emotional skills by the time they exited, was 62% in FFY 08 compared to 63% in FFY 07. The percent of children who were functioning within age expectations in social-emotional skills, by the time they exited was 55.8% for FFY 08 compared to 54.2% for FFY 07.

Children who entered Part C below age expectations in acquisition and use of knowledge and skills, substantially increased their rate of growth in Acquisition and use of Knowledge and Skills by the time they exited, was 63.5% in FFY 08 compared to 67.2% in FFY 07. The percent of children who were functioning within age expectations in Acquisition and use of Knowledge and Skills, by the time they exited was 46.8% for FFY 08 compared to 50.2% for FFY 07.

Children who entered Part C below age expectations in use of appropriate behaviors to meet their needs, substantially increased their rate of growth in use of appropriate behaviors to meet their needs by the time they exited, was 70.1% in FFY 08 compared to 74.9% in FFY 07. The percent of children who were functioning within age expectations in use of appropriate behaviors to meet their needs, by the time they exited was 54.3% for FFY 08 compared to 53.8% for FFY 07.

As reported in the **SPP update for FFY 2008**, Montana engaged in a variety of activities to improve the COSF process in each of the regional Part C agencies and improve the quality of the early childhood

outcome data. Montana’s child outcome data were collected following the procedures and guidelines outlined in the Indicator 3 Overview section and contained in Montana’s Early Childhood Outcomes: Demonstrating and Reporting the Results of Early Intervention Services for Infants and Toddlers Collecting Outcomes Data. As noted, Montana has adopted the ECO Center’s COSF 7 point scale, system for determining child outcomes, and definition for comparison to same-aged peers. Each COSF was completed by a COSF team convened for the child in each regional Part C agency. Each regional Part C agency accumulated all their COSFs completed for a quarter, reviewed the COSFs for accuracy, and sent the COSFs to the Part C Coordinator. Further, the Part C Coordinator and TA provider from the University of Montana-Rural Institute reviewed each COSF for quality assurance (validity and reliability) of the COSF data. If issues/errors were found, they were corrected with the appropriate Regional Part C agency. Once all COSFs quality assurance reviews were completed for a regional Part C agency for a quarter, and a report about their COSF reporting was completed for each agency. The report was sent to the agency, and if necessary, the agency was provided further technical assistance/training to improve the quality of their COSF data. For analysis of COSF data, Montana used ECO Centers recommendations and analysis tools which helped greatly in identifying COSF determination and data collections issues concerning the quality of the early childhood outcome data. As noted in the **SPP update for FFY 2008**, the ECO Center provided assistance in looking at Montana’s data and provided technical assistance to staff from the regional Part C agencies’ staff responsible for monitoring and training for early childhood outcomes and the COSF system.

FFY	Measurable and Rigorous Target	
2005 (2005-2006)	Targets to be set on the 2-1-10 Annual Performance Report for each of the three sub-indicators.	
2006 (2006-2007)	Targets to be set on the 2-1-10 Annual Performance Report for each of the three sub-indicators.	
2007 (2007-2008)	Targets to be set on the 2-1-10 Annual Performance Report for each of the three sub-indicators.	
2008 (2008-2009)	Targets to be set on the 2-1-10 Annual Performance Report for each of the three sub-indicators.	
2009 (2009-2010)	Outcome A: Positive social-emotional skills (including social relationships)	Targets for FFY 2009 (% of children)
	1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	58%
	2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	52%
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	60%
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	43%	
2. The percent of children who were functioning within age		

	expectations in Outcome A by the time they turned 3 years of age or exited the program.	
	Outcome C: Use of appropriate behaviors to meet their needs: 1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	66%
	2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	51%
2010 (2010-2011)	Outcome A: Positive social-emotional skills (including social relationships) 1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	Targets for FFY 2010 (% of children) 59%
	2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	53%
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy) 1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	61%
	2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	44%
	Outcome C: Use of appropriate behaviors to meet their needs: 1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	67%
	2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	52%

The child outcome data reported for the 07/01/07 to 06/30/08 was a snapshot of the number of infants and toddlers that have participated in Part C services. This report includes infants and toddlers who

participated in Part C services for at least six months but not more than two years. It will take several years before Montana's child outcome data represents all the children participating in Part C services. This makes it difficult to set targets because with such a small population of children exiting Part C each year who meet the criteria for reporting early childhood outcomes data, Montana does not know how representative any one year might be in comparison to data for Indicator 3 collected over a several year span. Further, as noted in the **Overview of Issue/Description of System or Process** section, Montana did not initially collect baseline data on infants until they were at least six months of age. While this was modified as reported, the child outcome data for this year may not be representative of Montana's Part C children because some of the children transitioning at or near 36 months may not have had their baseline COSF completed until they were six months of age. For instance, if a child with an established condition, that typically indicates substantial negative impact on their development, entered Part C at one month of age, their initial COSF/developmental status may look like most typical one month infants and get a 6 or 7 rating on the COSF for each outcome. However, if this child entered Part C during the time period that the COSF was not completed until the child reached six months of age, their initial COSF ratings might be significantly lower because their areas of developmental delay could be very evident and their initial COSF ratings might be much lower, for example 2 or 3. At 36 months this child transitions out of Part C and their final COSF ratings are 2 or 3. This difference in baseline rating will influence the Table 3.1 a. through e. category for early childhood outcomes and the summary statement data. Thus, until the infants who entered the first 18 months of COSF data collection transition out of Part C, Montana will not really know how well the current early childhood outcomes data reflects all children in Part C, since now baseline data is taken for all infants when they enter Part C. Further, being a small population state, it does not take too many young children who have a significant delay or too many children who are almost up to age level, to influence the overall early childhood outcomes data for the state.

Montana discussed target setting for Indicator 3 with the FSSAC, regional Part C agencies, DDP staff and the TA provider at the University of Montana. Montana developed a document that included two options for setting targets for Indicator 3. Both options utilized all of Montana's data collected for Indicator 3 since April 1, 2006, but primarily data for FY 2007 and 2008. As explained above, it was not surprising that with four Summary Statements the 2008 data decreased in comparison to the 2007 data. The average decrease across those four Summary Statements was 3.23%. For the two Summary Statements where there was an increase from 2007 to 2008, the average increase was 1.05%. This information was explained in the target setting document. The strategies for target setting also utilized strategies that Montana's Office of Public Instruction, Montana's Part B IDEA lead agency, used for target setting in their SPP. The document was disseminated to the FSSAC and regional Part C agencies. The Part C Coordinator, the Disabilities Services Division Administrator (lead agency for Part C) and the TA provider at the University of Montana had a conference call with members of the FSSAC and the regional Part C agencies to set targets for Indicator 3. After reviewing the data and proposed target setting options, the participants unanimously selected an option that set the 2010 targets 3% below the baseline data for 2008 and set the 2011 targets 1% higher than the 2010 targets. The participants concluded that the targets reflect the only trend data Montana has for Indicator 3. The group also discussed moving toward developing targets using statistical methods for determining confidence intervals for targets.

SPP Template – Part C (3)

__Montana__

Activities	Timelines	Resources
<p>1. Annually, Montana will continue to refine the tool, Montana's Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State's "related" data collection process for this indicator.</p>	<p>January 1, 2008 to June 30, 2008</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: Montana reviewed the Montana Comprehensive Evaluation Tool with stakeholders involved with children services to begin making changes on how the questions are being asked and turning them into statements. The process is also ensuring that Montana is using Part C language within the tool when collecting data, as recommend by OSEP during the verification visit. Montana continues to collect additional information from the tool that may not be reported to OSEP for programmatic improvement for all children services. This includes information obtained directly from families through an interview process about a family's satisfaction with Part C services and impact of services on the child and family. Montana uses a spread sheet program that was created to separate the information, so when looking at the data being collect it protects the identity of which children receiving services were reviewed.</p>		
<p>2. Provide initial and annual training for the Quality Improvement Specialists concerning child outcomes, the COSF process and data collection related to child outcomes.</p>	<p>January 31, 2008- June 30,2008</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: QIS's at a quarterly meeting discuss and review the process of using the monitoring tool to ensure that Part C statues, rules, and regulations are implemented uniformly by QIS and when doing their monitoring of the regional Part C agencies.</p>		
<p>3. DDP will monitor programs for compliance with this indicator and related requirements. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop and implement improvement Plan or Corrective Action.</p>	<p>January 31, 2008- June 30,2008</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: Each regional Part C agency was monitored and provided feedback on their review. The review was presented in a spread sheet and reported to the Director of Developmental Disabilities, the Bureau Chief of Community Services, Part C Coordinator, Waiver Coordinator, Regional Managers, and the agency that was monitored. For FFY 2007, the State did not provide any additional training due to noncompliance.</p>		

SPP Template – Part C (3)

__Montana__

<p>4. Regional Part C agencies will train new FSSs on the Part C requirements, competences, and child outcomes/COSF system procedures related to Indicator 3.</p>	<p>January 31, 2008- June 30,2008</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: Each regional Part C agency has an orientation and initial training program that includes a comprehensive introduction to all Part C requirements and related evidence-based practices, including those related to Indicator 3. This is also verified through the Family Support Specialist (FSS) Comprehensive Certification process that occurs twice a year. Each FSS provides a training log of what trainings they have completed and develops a portfolio of service records that demonstrate their implementation of services according to Part C requirements and evidenced-based practices. The process is also verified by the Part C Coordinator and GSEG Director reviewing each COSF and providing feedback to the regional Part C agencies on a quarterly basis.</p>		
<p>5. Conduct quality assurance reviews of child outcomes COSFs and data, develop and disseminate quality assurance reports for each regional Part C agency, and when necessary, provide additional agency specific technical assistance and training.</p>	<p>January 31, 2008- June 30,2008</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: The Part C Coordinator and GSEG Director reviewed all COSF from each of the seven regional Part C agencies. Each agency was provided their quarterly data and the State's over all data for the quarter. T.A. calls were provided to those agencies that were in need of assistance.</p>		
<p>6. Provide in-service training and resources concerning research-based practices for evaluation and assessment of infants and toddlers.</p>	<p>January 31, 2008- June 30,2008</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: For FFY 2007, the State did not conduct state-wide in-service training, but the State is planning to conduct a survey to evaluate what regional Part C agencies administrators and FSS feel they need training in and then priorities by the responses. Further, each agency provided in-service training to further their FSSs' knowledge and skills concerning evaluation and assessment.</p>		

<p>7. Biannually assess statewide personnel development needs concerning early intervention practices associated with Indicator 3.</p>	<p>January 31, 2008 - June 30, 2009</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: Montana did not survey the seven regional Part C agencies or the FSS to see what trainings they would like to receive. We will do this in the upcoming year.</p>		
<p>8. Provide training concerning early intervention practices associated with Indicator 3 identified in activity 7 (above)</p>	<p>January 31, 2008 - June 30, 2009</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: Montana did not survey the seven regional Part C agencies or the FSS to see what trainings they would like to receive. We will do this in the upcoming year.</p>		
<p>9. Annually review and update all Montana manuals and resources concerning child outcomes, the COSF process and data collection related to child outcomes.</p>	<p>January 31, 2008- June 30,2008</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>Status: The Part C Coordinator and GSEG Director have annualized and reviewed the COSF process along with the seven regional Part C agencies on how to improve the COSF system.</p>		

Note that the Montana State Improvement Plan includes improvement activities from the SPP/APR activities for the 13 indicators applicable to Montana.

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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.

Overview of Issue/Description of System or Process:

The DDP and FSSAC formed a Part C Work Group to address the SPP/APR, the new IDEA 2004, and Part C improvements. This group includes representatives of the FSSAC, each regional Part C agencies, Part C Coordinator, DDP monitoring staff and a Part C technical assistant provider/Part C GSEG Director. Most of this group had worked on the last Part C APR (2004). In addition, Dr. Kathy Hebbeler from the ECO Center directly assisted the work group in making decisions about how to approach data collection for Indicator 4 and ECO Center's survey questions for Indicator 4. The following components were part of the Indicator 4 data collection system:

- All families whose children had an IFSP and participated in Part C services were surveyed about the three sub-indicators for Indicator 4.
- Data collection occurred during each regional Part C agency's parent survey process, which occurs on an annual basis, and initiated according to each agency's timeline.
- Parents provided the data concerning Indicator 4 by completing identical Indicator 4 sub-indicator items on each regional Part C agencies parent survey. This was done through a mailings or directly delivered survey or through a telephone or in-person interview. The parents or interviewer submit the survey data anonymously. If parents wanted to submit the data with their name, they could, it was their choice.
- Montana adopted the ECO Center's Family Outcomes Survey items for Indicator 4.
- The Indicator 4 data were collected by each regional Part C agency. Following uniform procedures, each agency completed the Indicator 4 Part C Agency Reporting Form and submitted the form to the Part C Coordinator and their regional DDP staff member (Quality

- improvement Specialist - QIS) responsible for monitoring their agency. The Part C Coordinator compiled the data for the APR.
- Montana's Part C Work Group developed all the specific measurement activities and procedures for reporting by each family and each regional Part C agency. Further, this group addressed procedures to ensure a good survey response from parents involved in the survey.
 - In addition, regional DDP staff responsible for each regional Part C agency monitored the regional Part C agency's parent survey process. The steps are outlined in the DDP monitoring tool and procedures (see Indicator 9 for an overview of DDP's monitoring system for the regional Part C agencies). In addition, DDP staff will be provided further training and technical assistance in monitoring for Indicator 4 during interviews with families as part of the Part C monitoring process.
 - The DDP, Montana Part C GSEG Project and ECO Center conducted training on the data collection system for regional Part C agency staff and DDP monitoring staff.
 - Further, training will continue on research-based early intervention practices.
 - The data concerning Indicator 4 will also be used to create early intervention practice improvements at the levels of individual FSSs, regional Part C agency, and DDP/FSSAC. In conjunction with Montana's Part C GSEG, the DDP will develop guidelines for using these data to identify FSS and agency training needs concerning early intervention practices, and identify areas where system improvements may be needed (e.g., FSS orientation, providing family-centered services) at a regional Part C agency and/or the DDP state level.
 - Indicator 4 data collection began January 30, 2006 through September 30, 2006 for the baseline data.

All of the steps of the Indicator 4 data collection system will continued to be evaluated and forms and procedures will be revised accordingly, and training and technical assistance will be provided. Further, the FSSAC and Part C Work Group will consider utilizing additional statewide survey items for future parent surveys.

Baseline Data for FFY 2005 (2005-2006):

Baseline Data for FFY 2005 for regional Part C agencies using ECO Center's Family Outcomes Survey Items:

- 87.6%= (163/186*100), reported that early intervention services have helped the family help their children develop and learn
- 87.1%= (163/187), reported that early intervention services have helped the family effectively communicate their children's needs
- 81.0%= (175/216*100), reported that early intervention services have helped the family help their children develop and learn

Baseline Data including all seven regional Part C agencies using either ECO Center's Family Outcome Items or one agencies items related to Indicator 4, A., B., and C. sub-indicators:

- 87.5%= (210/240*100), reported that early intervention services have helped the family know their rights
- 90.1%= (229/254*100), reported that early intervention services have helped the family effectively communicate their children's needs
- 84.5%= (236/279*100), reported that early intervention services have helped the family help their children develop and learn

Discussion of Baseline Data:

All seven regional Part C agencies conducted a parent survey for the FFY 2005 (2005-2006).

Six out of the seven regional Part C agencies were able to incorporate ECO Center's three questions on Family Outcomes and use the rating scale as a way to measure family's response. One agency was unable to use ECO Center's questions and rating scale for the FFY 2005 APR due to having in place early in FFY 2005 a survey contractor, agency survey and contracted timeline for completion of their survey. It would have been a financial hardship for the agency to have completed an additional survey. It also may have been confusing to parents who just responded to the agency's survey. The Part C Coordinator and the technical assistance/GSEG director looked at the agency's survey items to identify questions that would apply to this outcome. There were six items that applied to the three Indicator 4 sub-indicators, two items per sub-indicator and they were on a five point scale with scale descriptor three being a positive statement. These items were very similar to items on the NCSEAM family survey. For FFY 2006, this regional Part C agency will be able to provide the Family Outcome data using ECO Center's survey questions and rating scale next reporting period.

The first set of Baseline data using the ECO Center's Family Outcomes items does not include the one agency that was unable to use these items for FFY2005. The baseline data were reviewed by the Part C Coordinator:

- How many total responses each regional Part C agency received for the total survey.
- How many total responses each of the regional Part C agencies received for each question in response to Family Outcomes.
- All responses that were five and below were collected as "no" responses.
- Those were then totaled for the state using only six of the seven regional Part C agencies.
- All questions answered with a 5-7 were "yes" responses.
- Those were then totaled for the state using only six of the seven regional Part C agencies.
- Those questions that no responses were provided were not included in the baseline data.

The second set of Baseline data includes the results from the regional Part C agencies that used the ECO Center's Family Outcomes survey items and results of the six items related to the three sub-indicators for Indicator 4. The baseline data were reviewed by the Part C Coordinator according to the steps below and then combined with the data from the other regional Part C agencies:

- How many total responses the regional Part C agency received for the total survey.
- How many total responses the regional Part C agencies received for each of the six questions in responding to Family Outcomes sub-indicators.
- All responses that were 2 and below were collected as "no" responses for each item for a sub-indicator.
- Those were then totaled for each sub-indicator for the regional Part C agency.
- All questions answered with a 3-5 were "yes" responses for each item for a sub-indicator.
- Those were then totaled for each sub-indicator for the regional Part C agency.
- Those questions that no responses were provided were not included in the baseline data.
- These data were combined with the data from the other regional Part C agencies data.

In addition, part of Montana's monitoring is to review all Consumer/Parent Survey Results for each of the seven regional Part C agencies.

- Seven out of seven (100%) regional Part C agencies consumer satisfaction surveys documented those families were extremely satisfied or satisfied with the Part C serves that they received.
- Seven out of seven (100%) regional Part C agencies consumer satisfaction surveys documented that those families were aware of procedural safeguards, including ways to make a complaint and resolve service issues.

FFY	Measurable and Rigorous Target
2006 (2006-2007)	A. 89% will report that early intervention services has helped the family help their children develop and learn B. 89%, will report that early intervention services has helped the family effectively communicate their children's needs C. 84%= will report that early intervention services has helped the family help their children develop and learn
2007 (2007-2008)	A. 89% will report that early intervention services has helped the family help their children develop and learn B. 89% will report that early intervention services has helped the family effectively communicate their children's needs C. 84% will report that early intervention services has helped the family help their children develop and learn
2008 (2008-2009)	A. 91% will report that early intervention services has helped the family help their children develop and learn B. 91%will report that early intervention services has helped the family effectively communicate their children's needs C. 86% will reported that early intervention services has helped the family help their children develop and learn
2009 (2009-2010)	A. 91% will report that early intervention services has helped the family help their children develop and learn B. 91% will report that early intervention services has helped the family effectively communicate their children's needs C. 86% will report that early intervention services has helped the family help their children develop and learn
2010 (2010-2011)	A. 93% will report that early intervention services has helped the family help their children develop and learn B. 93% will report that early intervention services has helped the family effectively communicate their children's needs C. 88% will report that early intervention services has helped the family help their children develop and learn

Improvement Activities/Timelines/Resources:

Improvement Activities/Timelines/Resources (New for SPP):

New SPP Activities	Timelines	Resources
<p>8. Biannually, Montana will continue to refine the tool, Montana’s Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State’s data collection process for this indicator.</p>	<p>(1) July 1, 2007 to June 30, 2008 (2) July 1, 2010 to June 30, 2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>9. Provide initial and annual training for the Quality Improvement Specialists.</p>	<p>(1) July 1, 2006- June 30, 2007 (2) July 1, 2007- June 30, 2008 (3) July 1, 2008- June 30, 2009 (4) July 1, 2009- June 30, 2010 (5) July 1, 2010- June 30, 2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>10. DDP will monitor programs for compliance with this indicator. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop, implement and monitor an improvement Plan or Corrective Action.</p>	<p>(1) July 1, 2006- June 30, 2007 (2) July 1, 2007- June 30, 2008 (3) July 1, 2008- June 30, 2009 (4) July 1, 2009- June 30, 2010 (5) July 1, 2010- June 30, 2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>

<p>11. Regional Part C agencies will train new FSSs on the Part C requirements and competences related to Indicator 4.</p>	<p>(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>12. Montana’s Part C workgroup will continue:</p> <ul style="list-style-type: none"> a. To review data b. Discussing issue/problem solving issues related to family outcomes. c. Review and refine the approach to receiving a good survey response. 	<p>(1) July 1, 2006 to June 30, 2007 (2) July 1, 2007 to June 30, 2008</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>13. Biannually assess personnel development needs concerning early intervention practices associated with Indicator 4.</p>	<p>(1) July 1, 2006 to June 30, 2007 (2) July 1, 2008 to June 30, 2009 (3) July 1, 2010 to June 30, 2011</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>7. Provide in-service training and resources concerning research-based practice for improvement with child development and child outcomes for infants and toddlers.</p>	<p>(1) July 1, 2006-June 30,2007</p>	<p>Regional Part C agency managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>

Note that the Montana State Improvement Plan includes improvement activities from the SPP/APR activities for the 13 indicators applicable to Montana.

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Changes to Indicator 5's language as of 04/09/10:

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

Measurement:

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

Overview of Issue/Description of System or Process:

The Developmental Disabilities Program in conjunction with the Family Support Services Advisory Council (FSSAC, Montana's ICC) and regional Part C agencies, coordinate the Part C comprehensive public awareness and child find system designed to identify infants and toddlers with disabilities who may be eligible for Part C services. The system and state policies and procedures comply with the Part C IDEA statutes and rules and regulations for public awareness and child find systems. The system includes: public awareness including all primary referral sources, child find procedures, coordination of child find activities across state and local agencies, referral procedures of potentially eligible children to qualified Part C provider agencies, and responsive eligibility determination procedures. The Part C comprehensive child find system is implemented in cooperation with, and is consistent with, Office Public Instruction's (OPI) Part B of IDEA child find program. Parents Let's Unite for Kids, Montana's Parent Training and Information Center, serves as the central directory for Part C and is directly involved in public awareness and child find efforts.

The system includes multiple ways for making timely referrals to regional Part C agencies by primary referral sources. Rigorous standards are in place for appropriately identifying infants and toddlers who may benefit from Part C services and referring potentially eligible infants and toddlers for services. Child find procedures reach out to all children, including infants and toddlers with disabilities who are receiving services from or attending public or private health and human service programs, hospitals and clinics, child care programs, Early Head Start and Head Start or schools. The Development Disabilities Program, with the assistance of the FSSAC, implements the comprehensive public awareness and child find system which assures that all infants and toddlers who may be eligible for Part C services are identified, located, and evaluated. This system is conducted in

cooperation and coordination with all other similar statewide and major child find screening (e.g., newborn hearing) efforts. The seven regional Part C agencies are responsible for coordinating and cooperating with child find efforts in their regions and for evaluating eligibility for Part C services. This includes programs like Child and Family Protective Services (under CAPTA) that have policies and procedures for the referral for early intervention services of all children under the age of three who are involved in a substantiated case of child abuse or neglect; or is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Further the DDP and regional Part C agencies coordinate public awareness and child find with various Tribal services for Native Americans living on or off of Indian Reservations. In addition, public awareness activities are designed by each regional Part C agency to specifically reach out to populations that might be difficult to reach through broad-based public awareness activities. These activities have been augmented by the successful implementation of the Dynamic Community Connections Projects (OSEP funded Child Find demonstration Project) in rural communities in each of the five DPP service regions.

The DDP is responsible for the seven regional Part C agencies child find efforts through monitoring (1) contractual agreements with the regional part C agencies, and (2) state and local interagency agreements. The DDP implements a continuous data collection system designed to determine which infants and toddlers are receiving Part C services and to determine the extent to which primary referral sources disseminate information on the availability of Part C early intervention services and make referrals for services. Pamphlets, brochures and other public awareness materials and activities are disseminated by the seven regional Part C agencies to physicians' offices, hospitals, neonatal hospitals, child care resource and referral agencies, homeless family shelters, public health departments, Child and Family Services, WIC offices and other appropriate primary referral source locations. The states central directory, Parent's Lets Unite for Kids, also disseminates information about Part C services and referral.

Baseline Data for FFY 2004 (2004-2005):

- (Measurement a.1, New Narrow Eligibility Criteria data, Table 8-4a for the data and Table 8-3c for the new list of Narrow states) Montana's December 1, 2004, child count data (618) indicates 1.58% of Montana's infants are served compared to .92% for the other 16 states with the New Narrow Eligibility Criteria.
- (Measurement a.2, Old Narrow Eligibility Criteria data, Table 8-4a for the data and Table 8-3a for the old list of Narrow states) Montana's December 1, 2004, child count data (618) indicates 1.58% of Montana's infants are served compared to .97% for the other 8 states with the Old Narrow Eligibility Criteria.
- (Measurement b., National data, Table 8-4a) Montana's December 1, 2004, indicates 1.58% of Montana's infants are served compared to .98% National baseline.

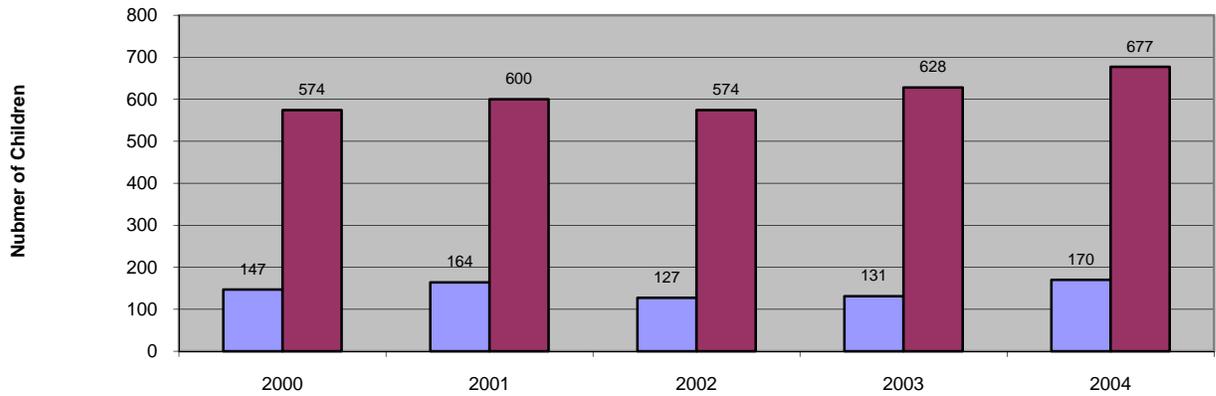
Discussion of Baseline Data:

Montana's public awareness and child find efforts are very successful in identifying and serving infants in Part C. Montana serves 1.58% of all infants in the state, which is a higher rate than the average percent, served for states with a narrow eligibility criteria like Montana (compared to both the old and new list of states as well as the National baseline rate). However, Montana will continue to thoroughly evaluate public awareness and child find activities and data to ensure that Part C is identifying infants who might be eligible for Part C as soon as possible.

Additional Child Count Data and Comparisons:

Also see additional data for Indicator 6.

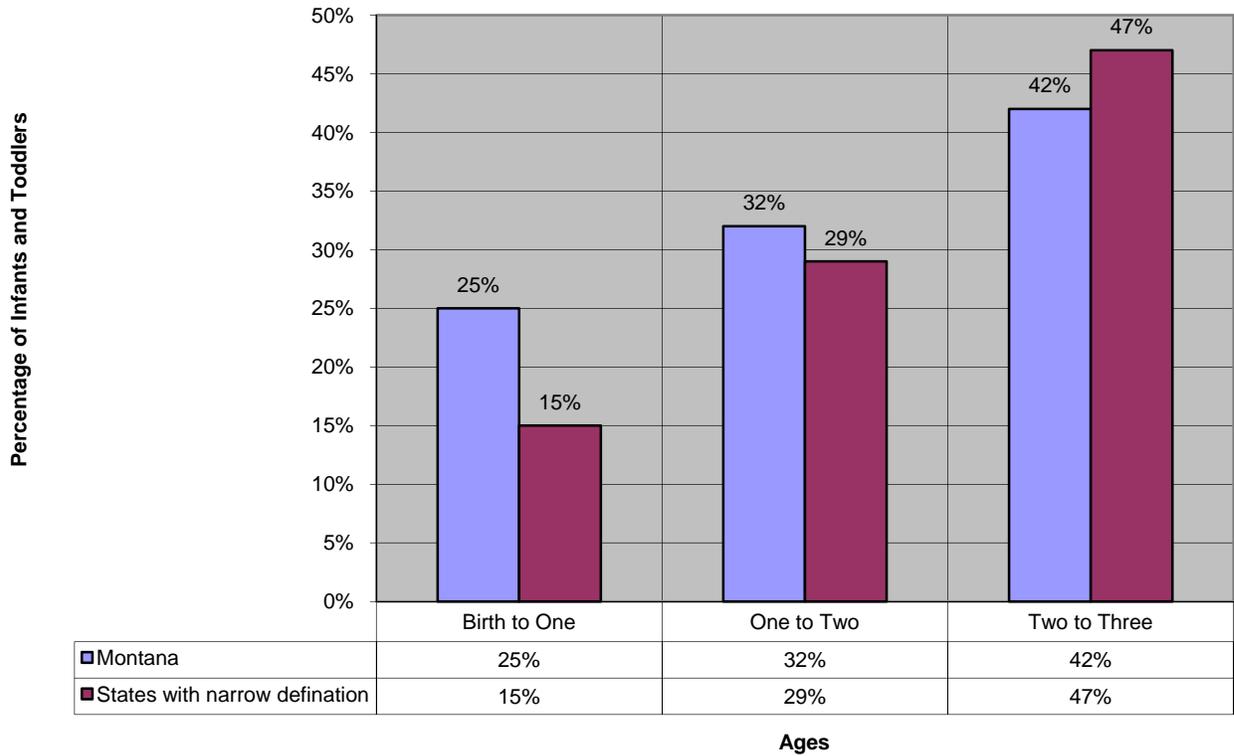
Number of Birth to One Infants, Being Served in Early Intervention in Montana for the Years from December 2000 through December 2004



	Dec-00	Dec-01	Dec-02	Dec-03	Dec-04
■ Birth to One	147	164	127	131	170
■ Total Served	574	600	574	628	677

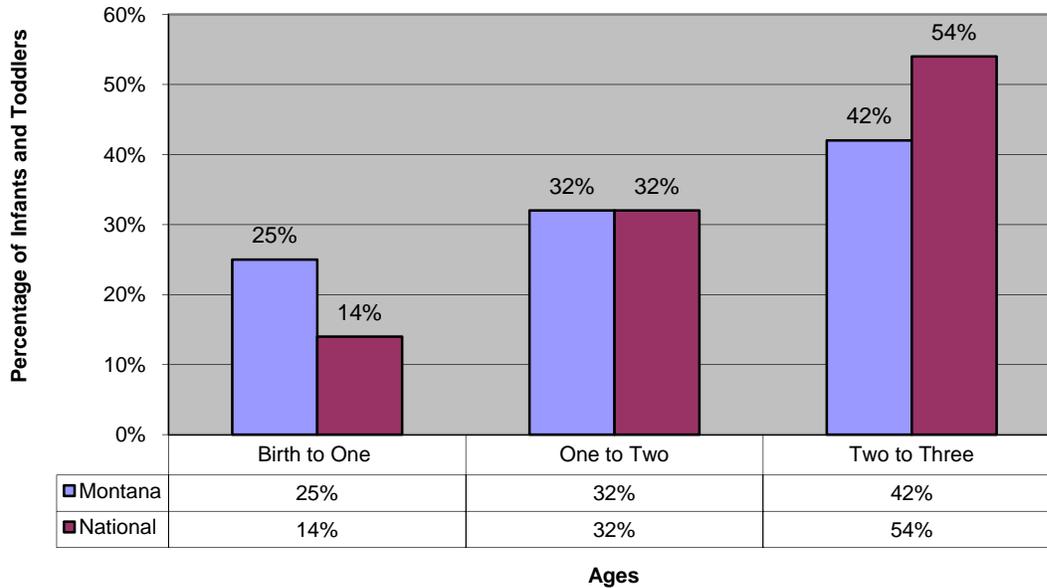
- December 1, 2000, 147 of 574 (26%) are children, birth to one.
- December 1, 2001, 164 of 600 (28%) are children, birth to one.
- December 1, 2002, 127 of 574 (22%) are children, birth to one.
- December 1, 2003, 131 of 628 (21%) are children, birth to one.
- December 1, 2004, 170 of 677 (25%) are children, birth to one.

Percentage of Infants and Toddlers (0-3) Served by Age in Montana Compared to the New Narrow Definition States on December 1, 2004 Child Count (source WESTAT website, Table AH1)



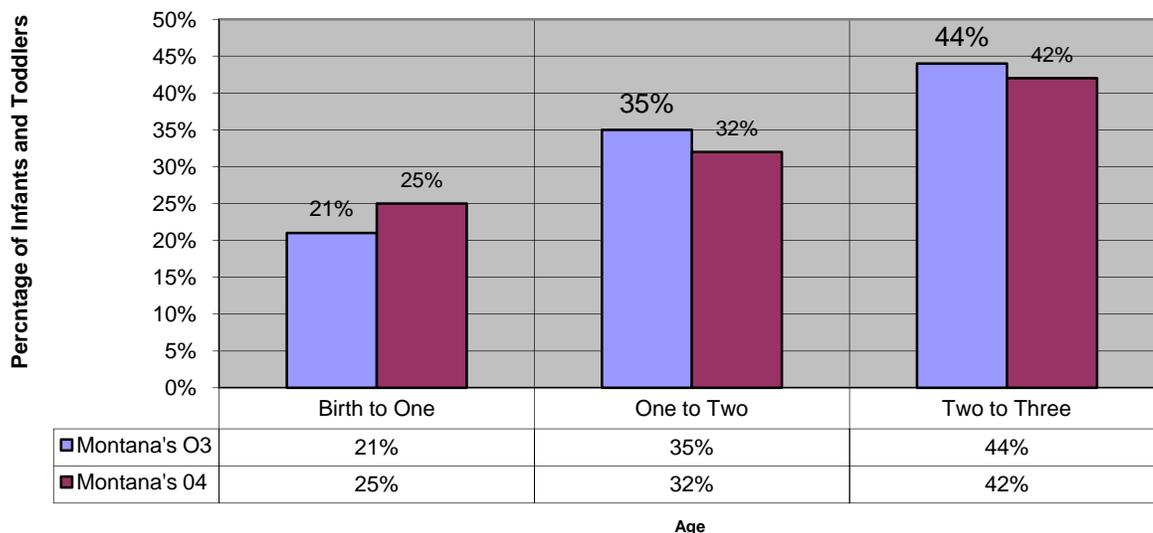
- On December 1, 2004 Child Count, Montana reported 170 infants (birth to one) of 677 total infants and toddlers in Part C. Infants represent 25% of all children being served in Part C early intervention in Montana. States with the new narrow definition reported by OSEP had a total of 4,916 infants (0-1) of 34,002 children in Part C. Infants, with the new narrow eligibility criteria definition, represent 15% of all children served in Part C early intervention with this definition.
- Montana shows 10% more infants (0-1) being served compared to other states with the new narrow definitions in early intervention services.

Percentage of Infants and Toddlers (0-3) Served By Age in Montana Compared to National Data on December 1, 2004 Child Count (source WESTAT website, Table AH1)



- On December 1, 2004 Child Count, Montana reported 170 infants (birth to one) of 677 total infants and toddlers in Part C. Infants represent 25% of all children being served in Part C early intervention in Montana. The OSEP National data indicated 38,192 (birth to one) of a total of 275,484 children in Part C in the United States, which represents 14% of all children served in Part C early intervention.
- On the December 1, 2004 Child Count, Montana shows 11% more Birth to One Infants being served in Montana as compared to the OSEP’s National data.

Comparison of Percentage of Infants and Toddlers (0-3) Served By Age on Montana's December 1 Child Count for 2003 and 2004



- Montana’s 2003 and 2004 Child Count data for infants (birth to one), has an increase of 4%.

Montana is revising the SPP targets for percent of infants served for FFY 2009 and 2010. The key justification is that Montana used a limited set of data for setting the original SPP targets that only covered several years and provided an inaccurate reflection of percent of infants of served over a longer period of time. In reviewing the data described above and gaining a better understanding of the dynamic nature of population change, it became clear that Montana’s SPP targets for percent of infants served were very ambitious and did not reflect more realistic targets for performance improvements. Historically, the increments of improvement in percent of infants served when there was an increase were never as great as the increments for improvement used in the original SPP targets for Indicator 5.

The State, FSSAC and regional Part C agencies reviewed all of the above data, narrow definition states’ SPP targets, narrow definition states’ actual data, Montana’s average infant percentage served since 1995 and Montana’s improvement increment for each year that Montana served a higher percent of infants then the previous year. Several options for setting new targets were considered. After thoughtful review of the options, the decision was to base the revised percent of infants served on the combination of Montana’s average percent infants served since 1995 and the average improvement increment for each year the percent infants served increased from the previous year. The new target for FFY 2009-2 is 1.29% and for FFY 2010, 1.39%. The stakeholders believe that the new targets better reflect the actual data of percent of infants served in Montana yet apply realistic improvement targets. The new targets are significantly higher then either the average of the SPP targets (0.95%) or actual performance data (0.93%) for states with narrow eligibility definitions. Revised SPP documents will be submitted to OSEP for Indicator 5; Montana’s SPP will be revised and disseminated to the public.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Part C in Montana will serve 1.58 % of all infants in the state.
2006 (2006-2007)	Part C in Montana will serve 1.58 % of all infants in the state.
2007 (2007-2008)	Part C in Montana will serve 1.62 % of all infants in the state.
2008 (2008-2009)	Part C in Montana will serve 1.62 % of all infants in the state.
2009 (2009-2010)	Part C in Montana will serve 1.62 % of all infants in the state. Change: Part C in Montana will serve 1.29%
2010 (2010-2011)	Part C in Montana will serve 1.68 % of all infants in the state. Change: Part C in Montana will serve 1.39%

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Annually review child find data by state and regional Part C agency to determine steps needed to improve child find efforts.	(1) January 1, 2006- June 30, 2007 (2) July 1, 2007- June 30, 2008 (3) July 1, 2008- June 30, 2009 (4) July 1, 2009- June 30, 2010 (5) July 1, 2010- June 30, 2011	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.
2. Annually review, revise (when needed), develop and disseminate child find materials and activities.	(1) January 1, 2006- June 30, 2007 (2) July 1, 2007- June 30, 2008 (3) July 1, 2008- June 30, 2009	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.

	(4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011	
3. Disseminate child find materials and conduct public awareness activities with targeted medical staff in clinics and hospitals on an ongoing basis and analyze impact and revise strategies and materials biannually.	(1) July 1, 2006- June 30,2008 (2) July 1, 2008- June 30,2010 (3) July 1, 2010- June 30,2011	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.
4. Montana will review the TRACE recommendations that are relevant to the state's child find system and determine how to implement the ones that fit the child find system and state demographics.	July 1, 2006 to June 30, 2009	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.
5. Annually review to ensure linkage of Part C early intervention to other local early childhood health and human services with specific emphasis on programs and providers serving infants.	(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.
6. Review annually and enhance linkages of Part C early intervention with the Department of Public Health and Human Services statewide programs for infants, toddlers and young children and their screening and child find programs.	(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.
7. Review and update annually, Montana's Central Directory concerning Part C	(1) July 1, 2005-June 30, 2006 (2) July 1, 2006 – June 30, 2007	FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.

SPP Template – Part C (3)

__Montana__

Services.	(3) July 1, 2007 – June 30, 2008 (4) July 1, 2008 – June 30, 2009 (5) July 1, 2009 – June 30, 2010 (6) July 1, 2010 – June 30, 2011	
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Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

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

Changes to Indicator 6's language as of 04/09/10:

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

Measurement:

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

Overview of Issue/Description of System or Process:

The Developmental Disabilities Program in conjunction with the Family Support Services Advisory Council (FSSAC, Montana's ICC) and regional Part C agencies, coordinate the Part C comprehensive public awareness and child find system designed to identify infants and toddlers with disabilities who may be eligible for Part C services. The system and state policies and procedures comply to the Part C IDEA statutes and rules and regulations for public awareness and child find systems. The system includes: public awareness including all primary referral sources, child find procedures, coordination of child find activities across state and local agencies, referral procedures of potentially eligible children to qualified Part C provider agencies, and responsive eligibility determination procedures. The Part C comprehensive child find system is implemented in cooperation with, and is consistent with, Office Public Instruction's (OPI) Part B of IDEA child find program. Parents Let's Unite for Kids, Montana's Parent Training and Information Center, serves as the central directory for Part C and is directly involved in public awareness and child find efforts.

The system includes multiple ways for making timely referrals to regional Part C agencies by primary referral sources. Rigorous standards are in place for appropriately identifying infants and toddlers who may benefit from Part C services and referring potentially eligible infants and toddlers for services. Child find procedures reach out to all children, including infants and toddlers with disabilities who are receiving services from or attending public or private health and human service programs, hospitals and clinics, child care programs, Early Head Start and Head Start or schools. The Development Disabilities Program, with the assistance of the FSSAC, implements the comprehensive public awareness and child find system which assures that all infants and toddlers who may be eligible for Part C services are identified, located, and evaluated. This system is conducted in

cooperation and coordination with all other similar statewide and major child find efforts. The seven regional Part C agencies are responsible for coordinating and cooperating with child find efforts in their regions and for evaluating eligibility for Part C services. This includes programs like Child and Family Protective Services (under CAPTA) that have policies and procedures for the referral for early intervention services of all children under the age of three who are involved in a substantiated case of child abuse or neglect; or is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Additionally, the DDP works with new-born screening programs in Montana like the Newborn Hearing Screening Program. Representatives from these programs are on the Family Support Services Advisory Council. Further the DDP and regional Part C agencies coordinate public awareness and child find with various Tribal services for Native Americans living on or off of Indian Reservations. In addition, public awareness activities are designed by each regional Part C agency to specifically reach out to populations that might be difficult to reach through broad-based public awareness activities. These activities have been augmented by the successful implementation of the Dynamic Community Connections Projects (OSEP funded Child Find demonstration Project) in rural communities in each of the five DPP service regions.

The DDP is responsible for the seven regional Part C agencies child find efforts through monitoring (1) contractual agreements with the regional part C agencies, and (2) state and local interagency agreements. The DDP implements a continuous data collection system designed to determine which infants and toddlers are receiving Part C services and to determine the extent to which primary referral sources disseminate information on the availability of Part C early intervention services and make referrals for services. Pamphlets, brochures and other public awareness materials and activities are disseminated by the seven regional Part C agencies to physicians' offices, hospitals, neonatal hospitals, child care resource and referral agencies, homeless family shelters, public health departments, Child and Family Services, WIC offices and other appropriate primary referral source locations. The states central directory, Parent's Lets Unite for Kids, also disseminates information about Part C services and referral.

Baseline Data for FFY 2004 (2004-2005):

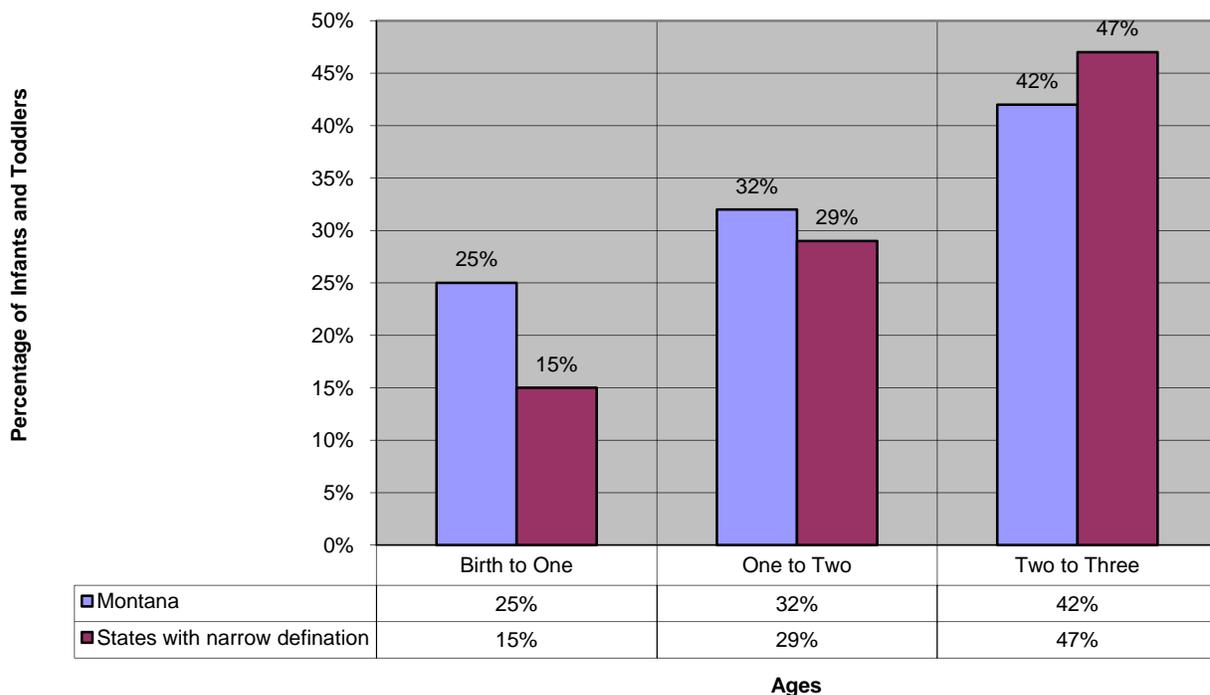
- (Measurement a.1, New Narrow Eligibility Criteria data from Table 8-3c.) Montana's December 1, 2004 child count data (618) indicates 2.13% of Montana's infants and toddlers are served compared to 1.8% for the other 16 states with the New Narrow Eligibility Criteria.
- (Measurement a.2, Old Narrow Eligibility Criteria data from Table 8-3a) Montana's December 1, 2004, child count data (618) indicates 2.13% of Montana's infants and toddlers are served compared to 1.8% for the other 8 states with the Old Narrow Eligibility Criteria.
- (Measurement b, National data, Table 8-3a) Montana's December 1, 2004, child count data (618) indicates 2.13% of Montana's infants and toddlers are served compared to 2.30% for the national average of all states, including states serving "at risk" infants and toddlers.

Discussion of Baseline Data:

Montana's public awareness and child find efforts are very successful in identifying and serving infants and toddlers in Part C. Montana serves 2.13% of all infants and toddlers in the state which is a higher rate than the average percent served for states with a narrow eligibility criteria like Montana (compared to both the old and new list of states). However, Montana will continue to thoroughly evaluate public awareness and child find activities and data to ensure that Part C is identifying infants and toddlers who might be eligible for Part C as soon as possible. Further, child count data indicate that infants and toddlers receiving Part C services are demographically and ethnically representative of Montana. Approximately 8% of Montana's population is Native American, which is the largest non-white population. Native American infants and toddlers make up nearly 21% of the children in Part C.

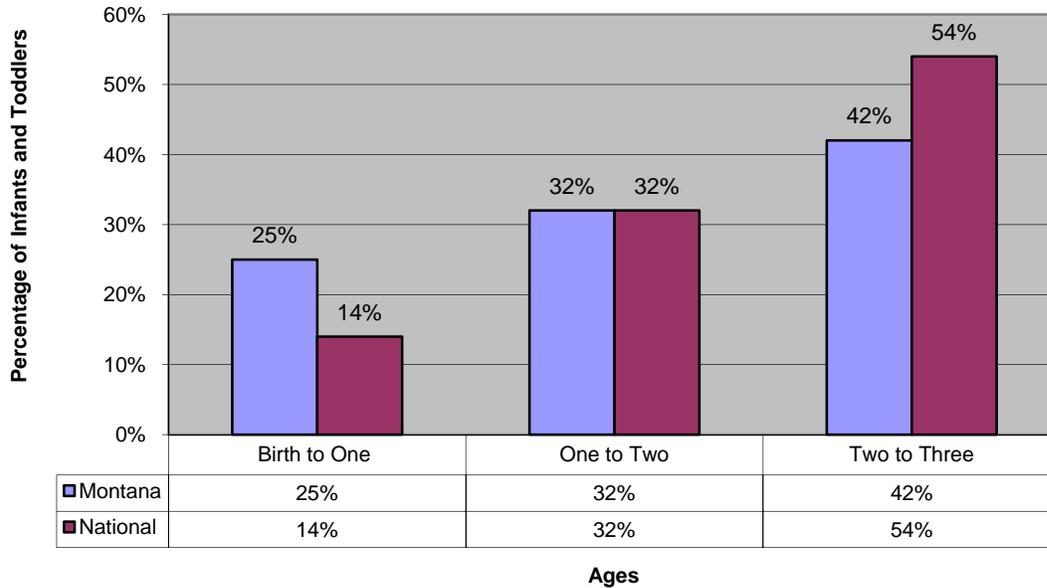
Additional Child Count Data and Comparisons:

Percentage of Infants and Toddlers (0-3) Served by Age in Montana Compared to the New Narrow Definition States on December 1, 2004 Child Count (source WESTAT website, Table AH1)



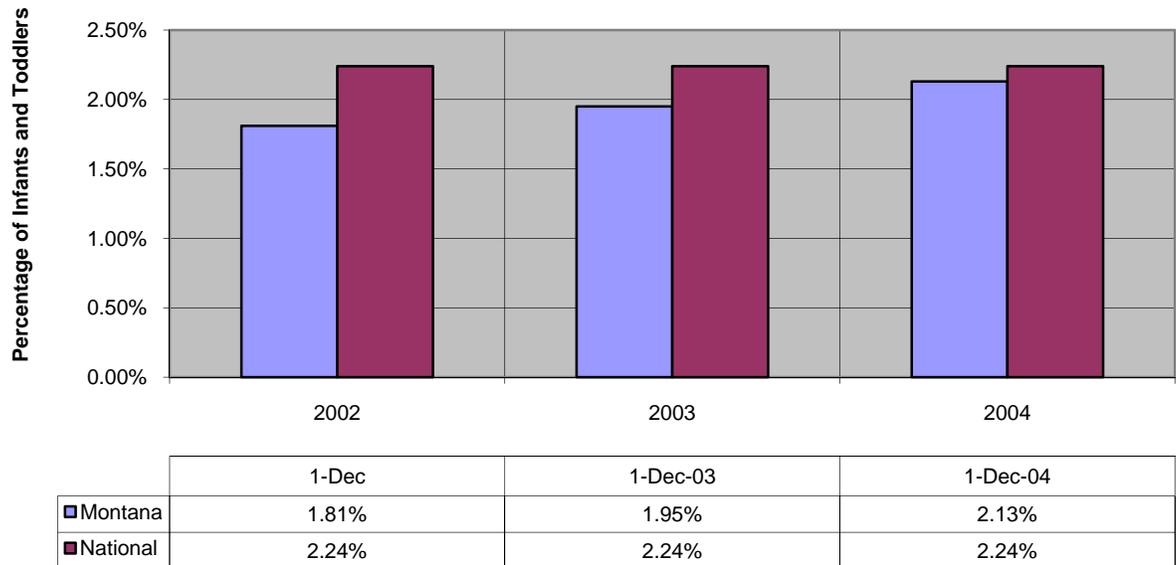
- On December 1, 2004 Child Count, Montana reported 170 infants (birth to one) of 677 total infants and toddlers in Part C. Infants represent 25% of all children being served in Part C early intervention in Montana. States with the new narrow definition reported by OSEP had a total of 4,916 infants (0-1) of 34,002 children in Part C. Infants, with the new narrow eligibility criteria definition, represent 15% of all children served in Part C early intervention with this definition.
- On December 1, 2004 Child Count, Montana reported 220 children (1 -2) of 677 total infants and toddlers in Part C. This age range represents 32% of all children being served in Part C early intervention in Montana. States with the new narrow definition reported by OSEP had a total of 9,826 children (1-2) of 34,002 children in Part C. Toddlers (1-2), with the new narrow eligibility criteria definition, represent 29% of all children served in Part C early intervention with this definition.
- On December 1, 2004 Child Count, Montana reported 287 children (2-3) of 677 total infants and toddlers in Part C. This age range represents 42% of all children being served in Part C early intervention in Montana. States with the new narrow definition reported by OSEP had a total of 16,107 children (2-3) of 34,002 children in Part C. Toddlers (2-3), with the new narrow eligibility criteria definition, represent 47% of all children served in Part C early intervention with this definition.

Percentage of Infants and Toddlers (0-3) Served By Age in Montana Compared to National Data on December 1, 2004 Child Count (source WESTAT website, Table AH1)



- On December 1, 2004 Child Count, Montana reported 170 infants (birth to one) of 677 total infants and toddlers in Part C. Infants represent 25% of all children being served in Part C early intervention in Montana. The OSEP National data indicated 39,021(birth to one) of a total of 269,596 children in Part C in the United States, which represents 14% of all children served in Part C early intervention.
- On December 1, 2004 Child Count, Montana reported 220 children (one to two) of 677 total infants and toddlers in Part C. Children in this age range represent 32% of all children being served in Part C early intervention in Montana. The OSEP National data indicated 85,218(one to two) of a total of 269,596 children in Part C in the United States, which represents 32% of all children served in Part C early intervention.
- On December 1, 2004 Child Count, Montana reported 287 children (two to three) of 677 total infants and toddlers in Part C. Children in this age range represent 42% of all children being served in Part C early intervention in Montana. The OSEP National data indicated 145,357 (two to three) of a total of 269,596 children in Part C in the United States, which represents 54% of all children served in Part C early intervention.

Total Percentage of Infants and Toddlers (0-3) Receiving Early Intervention Services in 2002, 2003, and 2004



December 1st Child Count

- On December 1, 2002, Montana served 1.81% of all infants/toddlers in the state as compared to the National average of 2.24%.
- On December 1, 2003, Montana Served 1.95% of all infants/toddlers in the state as compared to the National average of 2.24%.
- On December 1, 2004, Montana served 2.13% of all infants/toddlers in the state as compared to the National average of 2.24%.
- Between December 2002-2004, Montana had an increase of .32% of the total infants and toddlers receiving, Part C early intervention services.
- On December 1, 2004 Child Count, Montana served 186 (27%) of the 677 children served in Part C, are non-white.
- On December 1, 2004 Child Count, Montana served 144 (21%) of the 677 children served in Part C, are American Indian or Alaska Native.
- That is well over the percentage of those children in the general population. Thus, our public awareness and child find activities are reaching out to all Montana’s population groups. Further, county-by-county data indicates that we are reaching the most rural areas of Montana.

For the FY 2004-2005 the seven regional Part C agencies coordinated with and /or jointly conducted child find events with the following programs listed in the table below.

Number of Collaborative Child Find Events by Type of Program and FFY Year

Programs	Number of Child Find Events - FFY 2004-2005	Number of Child Find Events - FFY 2003-2004
Schools	164	195
Head Start/Early Head Start	20	28
Public Health	28	35
EPSDT	4	2
Other- clinics, daycares, and private schools	58	40

For the FY 2004-2005, the total number of referrals that the seven Part C agencies received from primary referral sources is listed in the table below.

Number and Percent of Total Referrals by Program to FFY Year

Primary Referral Sources	Number of Infants/Toddlers Referred	% by Referral Source FFY 2004-2005	% by Referral Source FFY 2003-2004
Hospitals	171	14%	13%
Physicians	221	18%	16%
Parents	262	22%	23%
Daycare Providers	17	1%	2%
Schools	85	7%	6%
Public Health	64	5%	8%
Child Protective Service	127	11%	7%
Other Social Services	70	6%	5%
Other Health Care Providers	65	5%	10%
Other	121	10%	10%

- Montana had an increase in five of the primary referral source.
- Child Protective Service referrals increased as Part C/CAPTA referral procedures were improved.

Montana is revising the SPP targets for percent of infants and toddlers served for FFY 2009 and 2010. The key justification is that Montana used a limited set of data for setting the original SPP targets that only covered several years and provided an inaccurate reflection of percent of infants and toddlers served over a longer period of time. In reviewing the data described above and gaining a better understanding of the dynamic nature of population change, it became clear that Montana’s SPP targets for percent of infants and toddlers served were very ambitious and did not reflect more realistic targets for performance improvements. Historically, the increments of improvement in percent of infants and toddlers served when there was an increase were never as great as the increments for improvement used in the original SPP targets for Indicator 6.

The State, FSSAC and regional Part C agencies reviewed all of the above data, narrow definition states’ SPP targets, narrow definition states’ actual data, Montana’s average infant and toddler percentage served since 1995 and Montana’s improvement increment for each year that Montana served a higher percent of infants and toddlers then the previous year. Several options for setting new targets were considered. After thoughtful review of the options, the decision was to base the revised percent of infants and toddlers served on the combination of Montana’s average percent infants and toddlers served since 1995 and the average improvement increment for each year the percent infants served increased from the previous year. The new target for FFY 2009 is 2.04% and for FFY 2010, 2.14%. The stakeholders believe that the new targets better reflect the actual data of percent of infants and toddlers served in Montana yet apply realistic improvement targets. The new targets are higher then the average of the actual target data (2.02%) for states with narrow eligibility definitions. Revised SPP documents will be submitted to OSEP for Indicator 6; Montana’s SPP will be revised and disseminated to the public.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Part C in Montana will serve 2.13% of all infants and toddlers in the state.
2006 (2006-2007)	Part C in Montana will serve 2.13% of all infants and toddlers in the state.
2007 (2007-2008)	Part C in Montana will serve 2.26% of all infants and toddlers in the state.
2008 (2008-2009)	Part C in Montana will serve 2.26% of all infants and toddlers in the state.
2009 (2009-2010)	Part C in Montana will serve 2.26% of all infants and toddlers in the state. Change: Part C in Montana will serve 2.04% of all infants and toddlers in the state.
2010 (2010-2011)	Part C in Montana will serve 2.39% of all infants and toddlers in the state. Change: Part C in Montana will serve 2.14% of all infants and toddlers in the state.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
<p>1. Annually review child find data by state and regional Part C agency to determine steps needed to improve child find efforts.</p>	<p>(1)January 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>
<p>2. Annually review, revise (when needed), develop and disseminate child find materials and activities.</p>	<p>(1)January 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>
<p>3. Disseminate child find materials and conduct public awareness activities with targeted medical staff in clinics and hospitals on an ongoing basis and analyze impact and revise strategies and materials biannually.</p>	<p>(1)July 1, 2006- June 30,2008 (2)July 1, 2008- June 30,2010 (3)July 1, 2010- June 30,2011</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>
<p>4. Montana will review the TRACE recommendations that are relevant to the state’s child find system and determine how to implement the ones that fit the child find system and state demographics.</p>	<p>July 1, 2006 to June 30, 2009</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>
<p>5. Annually review to ensure linkage of Part C early intervention to other local early childhood health and</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>

<p>human services with specific emphasis on programs and providers serving infants.</p>	<p>(3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	
<p>6. Review annually and enhance linkages of Part C early intervention with the Department of Public Health and Human Services statewide programs for infants, toddlers and young children.</p>	<p>(1)March 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>
<p>7. Review and update annually, Montana’s Central Directory concerning Part C Services.</p>	<p>(1) July 1, 2005-June 30, 2006 (2) July 1, 2006 – June 30, 2007 (3) July 1, 2007 – June 30, 2008 (4) July 1, 2008 – June 30, 2009 (5) July 1, 2009 – June 30, 2010 (6) July 1, 2010 – June 30, 2011</p>	<p>FSSAC, regional Part C agency managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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

Measurement:

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

Account for untimely evaluations.

Changes to measurement of Indicator 7's language as of 04/09/10:

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reason for delay.

Overview of Issue/Description of System or Process:

Brief Overview of Part C Services in Montana. See Indicator 1 for an introduction of how Part C services are provided in Montana and the role of the Family Support Specialist (FSS) in the planning and implementation of services.

Policies and Procedures Promote the Completion of Evaluations, Assessments and Development of IFSPs Within the 45-Day Timeline.

- Montana's policies and procedures require that eligibility evaluations, eligibility determination processes, assignment of a FSS, and development of the initial IFSP be completed within 45 days of referral to a regional Part C agency. For children with an established condition that makes the child eligible for Part C services, their eligibility can be determined and documented in a very short time (e.g., one week or less). For children requiring a multidisciplinary evaluation, the eligibility determination process will usually take longer, unless evaluations were completed prior to referral (e.g., evaluation completed as result of a screening process). However, Part C agencies provide timely evaluations for eligibility. During this process, the Intake Specialist will cover Part C services, procedural safeguards/rights, etc. and start to gather information that is not only needed for determining eligibility but may be used in IFSP planning. An FSS is immediately assigned to a child and family after eligibility is determined and the FSS immediately schedules a home visit with the family. The FSS follows the families lead in determining their priorities for their child and family, and with the family determines what other assessments may need to be completed and information gathered to develop the

IFSP. Further, they determine with the family who should be involved with the development of their IFSP.

- If for any reason the 45-day time frame is not or will not be met, there must be documentation in the child and family's record, to include reasons for the extension, and initiation of the development of an interim IFSP. The timeline is monitored within the provider agencies and validated through the monitoring system of general supervision described for Indicator 9.
- Montana requires every FSS to complete certification, which includes competencies for the gathering of family information, conducting child evaluations and assessments, the development of IFSPs, and skills necessary to promote collaboration and teaming.
- FSSs and other appropriate Part C providers receive training in the areas of family information, conducting child evaluations and assessments, the development of IFSPs, and skills necessary to promote collaboration and teaming, as well as other necessary early intervention practices.

Part C General Supervision/Monitoring and Data Reporting: Please refer to Indicator 9 for a description of Montana's Part C general supervision and monitoring of Part C services as well as the plan for reporting the state APR and APR's for each of the seven regional Part C agencies.

Baseline Data for FFY 2004 (2004-2005):

100% ($35/35 = 1 \times 100 = 100\%$) of eligible infants and toddlers with IFSPs had evaluation and assessment completed and an initial IFSP meeting within Part C's 45-day timeline.

Discussion of Baseline Data:

Data from State monitoring (See Indicator 9 for description of monitoring):

- The 45-day timeline is monitored within the provider agencies and validated in the Montana's Comprehensive Evaluation Process for Family Education and Support Services. The Quality Improvement Specialist monitors the agencies to assure that timelines are being met. All seven regional Part C agencies were monitored for the FY 2004-2005.
- Each of the seven regional Part C agencies were monitored for the FY 2004-2005. The DPP conducted a file review of 5 randomly selected children and families with IFSPs in Part C services for each agency. A total of 35 files were reviewed during the monitoring process.
- The monitoring indicated evaluations and assessments were completed and an IFSP written within 45 days for each of the 35 files reviewed (100%).
- This data follows the trend of past APR data for this indicator.

Other Data Related to Timely Provision of Part C Services:

- Data collected through this process indicates that child and family needs are identified within 45 days of entering into services.
- Data collected continues to ensure that evaluations and assessments, both for children who are found eligible for Part C and those who are found ineligible, are individualized and multidimensional.
- Thirty-five out of thirty-five (100%) IFSPs reviewed are consistent with each of the requirement. (FY 2002-2003, 100%, 2003-2004, 100%)

- Thirty-five out of thirty-five (100%) files reviewed showed that families were the primary decision makers. (FY 2002-2003, 100%, 2003-2004, 100%)

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of all infants and toddlers eligible for Part C services will have completed evaluation(s) and assessment(s) and an initial IFSP meeting conducted within Part C's 45-day timeline.
2006 (2006-2007)	100% of all infants and toddlers eligible for Part C services will have completed evaluation(s) and assessment(s) and an initial IFSP meeting conducted within Part C's 45-day timeline.
2007 (2007-2008)	100% of all infants and toddlers eligible for Part C services will have completed evaluation(s) and assessment(s) and an initial IFSP meeting conducted within Part C's 45-day timeline.
2008 (2008-2009)	100% of all infants and toddlers eligible for Part C services will have completed evaluation(s) and assessment(s) and an initial IFSP meeting conducted within Part C's 45-day timeline.
2009 (2009-2010)	100% of all infants and toddlers eligible for Part C services will have completed evaluation(s) and assessment(s) and an initial IFSP meeting conducted within Part C's 45-day timeline.
2010 (2010-2011)	100% of all infants and toddlers eligible for Part C services will have completed evaluation(s) and assessment(s) and an initial IFSP meeting conducted within Part C's 45-day timeline.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Montana will continue to refine the tool, Montana's Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State's data collection process for this indicator.	January 1, 2005 to June 30, 2006	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.
2. Provide initial and annual training for the	(1)July 1, 2006- June	FSSAC, Providers Managers, Part C

<p>Quality Improvement Specialists.</p>	<p>30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>technical assistance and trainers, and the Part C Coordinator.</p>
<p>3. DDP will monitor programs for compliance with this indicator. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop and implement improvement Plan or Corrective Action.</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>4. Regional Part C agencies will train new FSSs on the Part C requirements and competences related to Indicator 7.</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>5. Provide in-service training and resources concerning research-based practices for evaluation and assessment of infants and toddlers.</p>	<p>January 1, 2006 to December 31, 2007</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>

<p>6. Biannually assess personnel development needs concerning early intervention practices associated with Indicator 7.</p>	<p>(1) January 1, 2006 – June 30, 2006 (2) July 1, 2007 - June 30, 2008 (3) July 1, 2010 – June 30, 2011</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>7. Provide training concerning early intervention practices associated with Indicator 7 identified in activity 6 (above)</p>	<p>(1) January 1, 2006 – June 20, 2006. (2) July 1, 2007 - June 30 2008 (3) July 1, 2010- June 30, 2011</p>	<p>Regional Part C agency Managers and supervisors, Part C technical assistance and trainers, and the Part C Coordinator.</p>

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / Effective Transition

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

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

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

Measurement:

- A. Percent = # of children exiting Part C who have an IFSP with transition steps and services divided by # of children exiting Part C times 100.
- B. Percent = # of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.
- C. Percent = # of children exiting Part C and potentially eligible for Part B where the transition conference occurred divided by the # of children exiting Part C who were potentially eligible for Part B times 100.

Overview of Issue/Description of System or Process:

Brief Overview of Part C Services in Montana. See indicator 1 for an introduction of how Part C services are provided in Montana and the role of the Family Support Specialist (FSS) in the planning and implementation of services.

Montana has adopted policies and procedures in compliance with Part C statutes, rules and regulations to ensure a smooth transition for all children, including toddlers, in Part C services as they move into preschool, school and other appropriate services. Materials have been developed to explain all transition policies and procedures to all parties concerned, including materials developed specifically for parents and family members (**First Steps**) developed by Part C staff, Part 619/B staff and FSSAC in conjunction with Montana's Parent Training and Information Center, PLUK. The issue of transition is discussed with all new families enrolling in Part C services and at IFSP review and IFSP development meetings. Each regional Part C agency provides transition policies and procedures training to all new Family Support Specialist (FSS) and routine "refresher" training on transition to all FSSs, including the latest research based early intervention practices concerning transition. Further, transition policies, procedures and practices are one of the main competencies required for FSS certification and all FSSs must demonstrate competence in this area.

Interagency agreements with Part C and Part B.

- All seven regional Part C agencies have interagency agreements with the school districts in which they work with to comply with regulations regarding transition.
- At the State level there is an interagency agreement between the Office of Public Instruction (OPI) and the Developmental Disabilities Program (DPP), including Part C to 619 Part B services. Further collaboration with Part B is facilitated by the membership of

the Part B 619 Coordinator and a local Special Education Director on Montana's Family Support Service Advisory Council (FSSAC – Montana's ICC) and the FSSAC Chair is also a representative for Part C on OPI's Special Education Advisory Panel.

- DDP and OPI have a good working relationship. The Part C Coordinator and OPI's 619 Coordinator review each individual transition case that is brought to the State level by a parent, Part C provider or Local Education Agency.

Part C General Supervision/Monitoring and Data Reporting: Please refer to Indicator 9 for a description of Montana's Part C general supervision and monitoring of Part C services as well as the plan for reporting the state APR and APR's for each of the seven regional Part C agencies.

Baseline Data for FFY 2004 (2004-2005):

- A. 100% (35/35=1X100=100%) of children exiting Part C had an IFSP with transition steps and services.
- B. 89% (31/35=1X100=89%) of children exiting Part C and potentially eligible for Part B had notification sent to the LEA.
- C. 77% (27/35=1X100=77%) of children exiting Part C and potentially eligible for Part B had the transition conference occur.

Discussion of Baseline Data:

Baseline Data Collection:

As part of DDP's monitoring of Part C services, each of the seven Part C agencies, covering the whole state, were required to randomly select from all the Part C eligible children who were over the age of 24 months with IFSPs, 5 children/families representative of all Part C children/families in their particular region. The files were reviewed for each child/family selected to determine if (1) transition steps and services were on the IFSP, (2) Notification to LEA, if the child was potentially eligible for Part B, (3) and if a transition conference were held 90 days prior to 3rd birthday, if the child was potentially eligible for Part B. If the following steps did not occur, an explanation was provided. The seven regional Part C agencies reported the data to the Part C Coordinator who compiled the data for the SPP. Each of the Part C agencies will keep in their SPP record for this indicator, including the identification of the children/families randomly selected, so that the DDP during the annual monitoring visit will be able to verify the accuracy (reliability and validity) of the data reported.

Explanation of Baseline Data:

- Thirty-five out of thirty-five (100%) files reviewed, documented that the IFSPs had transition steps and services in place.
- Thirty-one out of thirty-five (89%) files reviewed documented that notification to the LEA was provided, if a child was potentially eligible for Part B.
 - One family did not want a referral to local LEA, but wanted a referral for Head Start.
 - Two children moved and release of information was signed and referral was made to a local Part C agency.
 - One child the family did not want to be referred.
- Twenty-seven out of thirty-five (77%) files reviewed documented that transition conferences were held if the child was potentially eligible for Part B.
 - Four families declined school services
 - One family the school rescheduled meeting.

- One family relocated to another state.
- Two children were not referred until they were 2 years, 10 months and 2 years, 9 months.

Other Data Related to Transition:

Other data gathered as part of Montana's general supervision and monitoring processes address factors dealing with transition. See Indicator 9 for a description of those processes. One monitoring activity is annually reviewing each regional Part C agency by DDP staff that includes reviewing a random sample of 5 files for children in Part C services using MONTANA'S COMPREHENSIVE EVALUATION PROCESS FOR FAMILY EDUCATION AND SUPPORT SERVICE TOOL. Results related to Indicator 8 for Fiscal Year (FY 2004-2005) include:

- Thirty-five out of thirty five (100%) files documented that the agency cooperated and coordinated with other community service agencies in meeting child and family needs.
- Thirty-five out of thirty-five (100%) files reviewed included documentation that let parents know that their child would be exited from Part C Services when they become three years of age.
- Seven out of seven agencies notified the regional office about changes in services to individual children on a client status sheet.
- Seven out of seven agencies where children were at transition age, there was documentation that the families were made aware of the differences and similarities between Part C and Part B services.
- Seven out of the seven agencies, which support smooth transitions for children and families to preschool services, had formal or informal interagency agreements in place with local education agencies.

The following data is from the monitoring of seven regional Part C agencies in FY 2002-2003 and FY 2003-2004. This data indicates a strong trend in providing transition services.

- Thirty-five files were reviewed and documentation was provided that IFSPs had transition steps and services. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five files were reviewed and documentation was provided that notification to LEA, was given if a child was potentially eligible for Part B. If the LEA was notified an explanation was provided. (FY 2002-2003, 91%, 2003-2004, 97%.)
 - The number of school districts being notified of children turning three dropped by 8%, because families were choosing not to notify the LEA.
- Thirty-five files were reviewed and documentation was provided that a transition conference was convened 90 days prior to the 3rd birthday, if a child was potentially eligible for Part B. (FY 2002-2003, 83%, 2003-2004, 77%.)
 - The number of transition conferences convened at least 90 days prior to the child's third birthday remains consistent. Explanations were provided on the various reasons why the conferences did not occur.
- Thirty-five files documented that the agency cooperated and coordinated with other community service agencies in meeting child and family needs (FY 2002-2003, 100%, 2003-2004, 100%.)
- Seven regional agencies notified the regional office about changes in services to individual children on a client status sheet. (FY 2002-2003, 100%, FY 2003-2004, 100%.)
- Seven regional agencies where children were at transition age, there was documentation that families were made aware of the differences and similarities between Part C and Part B services (FY 2002-2003, 100%, 2003-2004, 100%.)

Child Count Report (618). Montana relies on data collected for OSEP’s Child Count Report (618) from each of the seven regional Part C agencies. Child Count Data for 2003-2004 is compared to the same data from previous Child Counts.

- Number and percentage of all children leaving Early Intervention Services **On or Before Their Third Birthday.**
 - 2001-2002
 - 149 (29%) of 521 children who left early intervention services demonstrated improved and sustained functional abilities at that time.
 - 2002-2003
 - 170 (30%) of 572 children who left early intervention services demonstrated improved and sustained functional abilities at that time.
 - 2003-2004
 - 198 (31%) of 636 children who left early intervention services demonstrated improved and sustained functional abilities at that time.

This data is included in the table below:

Infants and Toddlers Exiting Part C Services by Category for FFY 2002 - 2004

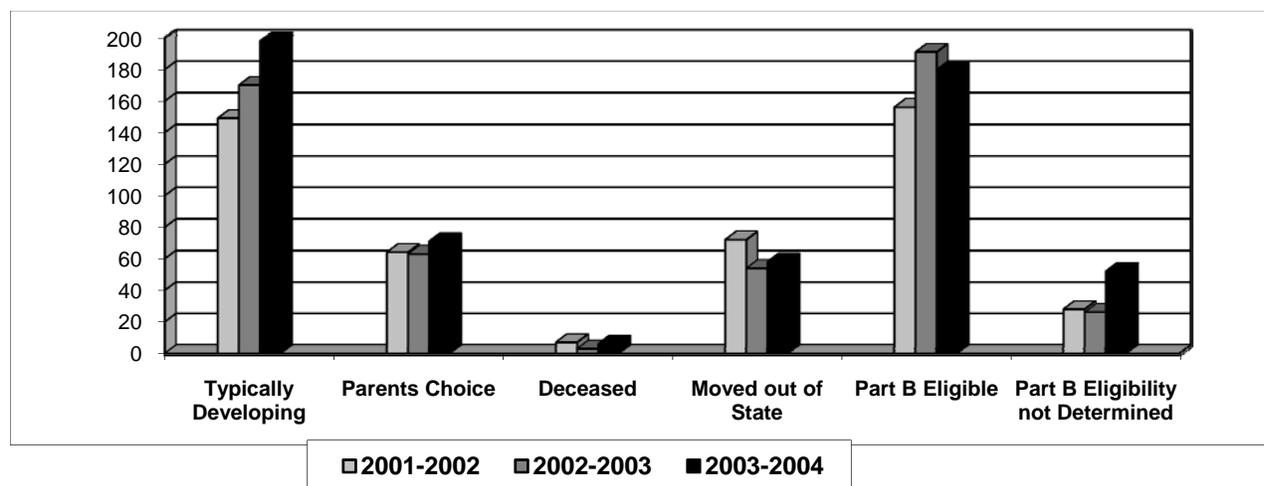


Table on the Number and Percentages of Infants and Toddlers Exiting Part C Services by Category for FFY 2002 -2004

Year	Typical Developing	Parent's Choice	Deceased	Moved	Part B Eligible	Part B Not Determined
2001-2002	149 (29%)	64 (12%)	7 (1%)	72 (14%)	156 (30%)	28 (5%)
2002-2003	170 (30%)	63 (11%)	3 (1%)	54 (9%)	191 (33%)	26 (5%)
2003-2004	198 (31%)	71 (11%)	6 (1%)	58 (9%)	180 (28%)	52 (8%)

FFY	Measurable and Rigorous Target
<p>2005 (2005-2006)</p>	<p>100 % of all children exiting Part C will receive timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including.</p> <ul style="list-style-type: none"> A. 100% IFSPs with transition steps and services B. 100% Notification to LEA, if child potentially eligible for Part B: and C. 100% Transition conference occurred, if child potentially eligible for Part B.
	<p>100 % of all children exiting Part C will receive timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including.</p> <ul style="list-style-type: none"> A. 100% IFSPs with transition steps and services B. 100%Notification to LEA, if child potentially eligible for Part B: and C. 100%Transition conference occurred, if child potentially eligible for Part B.
<p>2007 (2007-2008)</p>	<p>100 % of all children exiting Part C will receive timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including.</p> <ul style="list-style-type: none"> A. 100% IFSPs with transition steps and services B. 100% Notification to LEA, if child potentially eligible for Part B: and C. 100% Transition conference occurred, if child potentially eligible for Part B.
<p>2008 (2008-2009)</p>	<p>100 % of all children exiting Part C will receive timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including.</p> <ul style="list-style-type: none"> A. 100% IFSPs with transition steps and services B. 100% Notification to LEA, if child potentially eligible for Part B: and C. 100% Transition conference occurred, if child potentially eligible for Part B.
<p>2009 (2009-2010)</p>	<p>100 % of all children exiting Part C will receive timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including.</p>

	<p>A. 100% IFSPs with transition steps and services</p> <p>B. 100% Notification to LEA, if child potentially eligible for Part B: and</p> <p>C. 100%Transition conference occurred, if child potentially eligible for Part B.</p>
<p>2010 (2010-2011)</p>	<p>100 % of all children exiting Part C will receive timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including.</p> <p>A. 100% IFSPs with transition steps and services</p> <p>B. 100% Notification to LEA, if child potentially eligible for Part B: and</p> <p>C. 100%Transition conference occurred, if child potentially eligible for Part B.</p>

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
<p>1. Review and revise Part C and Part B Interagency Agreements to ensure a seamless and timely transition for children and families eligible for Part B services.</p>	<p>July 1, 2005 to January 16, 2006</p>	<p>Part C Coordinator and Part B 619 Coordinator.</p>
<p>2. Review and revise Part C transition policies and procedures to ensure compliance to the IDEA 2004</p>	<p>January 1, 2006 to December 31, 2006</p>	<p>Part C Coordinator, Part B 619 Coordinator, FSSAC.</p>
<p>3. Review and revise transition resource materials for FSSs.</p>	<p>January 1, 2006 to December 31, 2006</p>	<p>Part C Coordinator, Part B 619 Coordinator, regional Part C agency staff, and FSSAC.</p>
<p>4. Review and revise the transition section of parent and family information resources, including the First Steps document.</p>	<p>January 1, 2006 to April, 2007</p>	<p>Part C Coordinator, PLUK, Part B 619 Coordinator, regional Part C agency staff, and FSSAC.</p>
<p>5. Work with the Part B Coordinator to provide technical assistance and/or training on transition with providers</p>	<p>(1)July 1, 2006- June 30,2007</p> <p>(2)July 1, 2007- June 30,2008</p>	<p>Part C coordinator and Part B 619 Coordinator.</p>

<p>of Part C and School Districts.</p>	<p>(3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	
<p>6. Review and revise FSS competencies concerning transition to reflect IDEA 2004 and latest research based transition practices</p>	<p>January 1, 2006 to April 1, 2007</p>	<p>Part C Coordinator, regional Part C agency staff, and FSSAC.</p>
<p>7. General Enhancement Supervision Grant will assist Montana in identifying any additional transitional data that may improve documentation of transition of services and outcomes.</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>Part C Coordinator, Regional Part C agency Managers and supervisors, and Part C technical assistance and trainers.</p>
<p>8. Montana will continue to refine the tool, Montana’s Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State’s data collection process for this indicator.</p>	<p>January 1, 2006 to June 30, 2006</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>9. Train DDP monitoring staff on changes made on Montana’s Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State’s data collection process for this indicator.</p>	<p>January 1, 2006 to June 30, 2006</p>	<p>Part C Coordinator and DDP monitoring staff.</p>
<p>10. Based on annual transition data collected, provide training and technical assistance in areas that indicate possible transition problems.</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010</p>	<p>Part C Coordinator, Part B 619 Coordinator, and regional Part C Agencies.</p>

	(5)July 1, 2010- June 30,2011	
11. Montana’s Part C (DPHHS) and Part B (OPI) lead agencies are working on creating a universal form for transitioning to Part B services from Part C.	March 1, 2010- June 30, 2010 July 1, 2010 –June 30, 2011	Part C Coordinator, Part C technical assistance and trainers, Part B 619 Coordinator, and regional Part C Agencies.

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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:

- A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:
- # of findings of noncompliance made related to priority areas.
 - # of corrections completed as soon as possible but in no case later than one year from identification.
Percent = b divided by a times 100.
- For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.
- B. Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification:
- # of findings of noncompliance made related to such areas.
 - # of corrections completed as soon as possible but in no case later than one year from identification.
Percent = b divided by a times 100.
- For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.
- C. Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification:
- # of EIS programs in which noncompliance was identified through other mechanisms.
 - # of findings of noncompliance made.
 - # of corrections completed as soon as possible but in no case later than one year from identification.
Percent = c divided by b times 100.
- For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

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.

Changes to measurement of Indicator 9's language as of 04/09/10:

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 9 Worksheet” to report data for this indicator (see Attachment A).

Overview of Issue/Description of System or Process:**Overview Of Montana’s General Supervision Procedures:**

The Developmental Disabilities Program’s (DDP-Montana’s lead agency for Part C in the Department of Public Health and Human Services) general supervision monitoring process for Part C services promotes quality assurance and compliance to Part C requirements. The DDP contracts with seven regional Part C Child and Family Service Providers agencies in Montana’s five service regions. Each region has at least one Part C agency.

The State’s systems for compliance are based on the analysis and utilization of data from all available sources, including the following:

Montana’s Comprehensive Evaluation Process for Family Education and Support

Services: Montana has developed *one* comprehensive monitoring system for all DDP children’s services, including Part C services, utilizing *Montana’s Comprehensive Evaluation Process for Family Education and Support Services*. Each of Montana’s Child and Family Service Provider (Regional Part C agencies) agencies providing Part C services under go annual and ongoing monitoring by the DDP Quality Improvement Specialists (QIS) utilizing this tool. The QIS are specifically trained in this monitoring process and receive strong technical assistance and support from the Part C Coordinator in the implementation of this process. The QIS work out of DDP offices those are located in each of the five DDP service regions that cover the State of Montana.

The QIS in each region are responsible for gathering and reviewing quality assurance information for this process, including: 1) parent/consumer surveys, 2) desk reviews of administrative and compliance documents, 3) Part C file reviews of individual children and families, and 4) home visits with families who are being served in Part C. During home visits with Part C families, the QIS will ask questions that pertain to the services they are receiving and will follow-up with additional open-ended questions to be able to gain more of an understanding of the information provided by family members. The summary report and, when necessary, the development and implementation of a “Part C Enhancement Plan” that addresses corrective action of compliance issues represent the final product of the process with an individual regional Part C agency. If there are questions concerning compliance issues, the DDP and QIS will continue to monitor the corrective action through completion of the Part C Enhanced Plan.

This monitoring tool guides a comprehensive evaluation process, which includes the following steps:

- Continuous gathering and ongoing review of agency quality assurance documentation;
- Ongoing monitoring of direct services accomplished through Quality Improvement Specialists visits with families;
- Immediate follow up when the information or situation warrants quick actions;
- An annual desk review of all complied information;
- A periodic on-site file review to gather information which may still be needed (i.e., data and information that are not adequately documented by other quality assurance measures); and
- The creation of an annual summary report document, which synthesizes all quality assurance information regarding the agency. This document will focus on areas of accomplishment and

exemplary practice that the agency exhibits and on areas where the agency and Developmental Disabilities Program will work together to improve services.

- The development of a Part C Enhancement Plan, concerning corrective action of compliance and improvement issues. This is the final product of the process using this monitoring tool with an individual regional Part C agency and will be monitored by DDP to ensure the plan is completed appropriately. If there are further questions concerning compliance issues, the Developmental Disabilities Program and Quality Improvement Specialist will continue to monitor the corrective action through completion of the Part C Enhanced Plan.

This tool and process has been reviewed by OSEP in the past. In addition, the tool was revised in November of 2003, and will continue to be modified to make sure Montana is gathering appropriate planning and monitoring data and information about Part C Services. The tool will be updated to reflect the 2004 IDEA Part C statutes and rules and regulations (when finalized) as well as data needed for the other SPP Indicators. The tool in the monitoring process will be updated to reflect the data needed for the APR and to verify the data provided by the regional Part C agencies, concerning the APR for all indicators.

The evaluation process was developed as a means of ensuring quality assurance, and monitoring contract compliance concerning Federal and State service programs provided by Child Family Service Provider agencies across Montana.

Additional Procedures and Data Sources Used For General Supervision and Monitoring of Part C services:

- **Montana Part C Annual Performance Report Data Sheet:** is used on a quarterly basis to gather information on all children who have received Part C services and had a completed IFSP or exited services during the reporting period.
- **Montana's Qualified Provider Standards:** are to assure the provision of high quality, comprehensive, family-centered services in the disability system for Montana's children and families. The process is three-tiered, involving 1) completion of the application process, 2) initial qualification, and 3) ongoing monitoring of a qualified provider agency.
- **Agency Certification Process:** The regional Part C agencies in the past were required to hold and maintain National Accreditation from either the Accreditation Council on Services for People with Disabilities (AC) or the Rehabilitation Accreditation Council (CARF). All seven regional Part C agencies were accredited during this reporting period.
- **Family Support Specialist Certification Process:** All personnel working in Montana's early intervention system are required to attain full second level Certification for Family Support Specialist (FSS) within their first three years of employment. This process ensures that FSSs fully understand and can provide services according to Part C requirements.
- **Complaint Resolution System:** Parents who express concerns related to compliance are informed and supported to exercise options for resolution either by Impartial Due Process Procedure/Mediation for Resolving Individual Child Complaints or by Procedures for Resolving Formal Complaints.
- **Parent/Consumer Surveys:** DDP and regional Part C agencies conduct routine family/consumer satisfaction surveys with all Part C families. The surveys address service issues concerning the service components of Part C (e.g., evaluation/assessment, IFSP, specific services, procedural safeguards, due process/mediation).

Part C System Improvement Comprehensive Strategic Plan: The DDP, FSSAC and regional Part C agencies have established a Part C System Improvement Comprehensive Strategic Plan to direct improvement outcomes, objectives and activities across all facets of Part C services, including the activities listed for each Indicator in the SPP. The plan is routinely updated for the status of each outcome and objective, to make any additions or changes, and it is reviewed for input with the FSSAC, DDP and regional Part C agencies. The Part C Coordinator and Part C Work Group with

designated partners implement the objectives and activities for each outcome. This plan ensures that the various improvement strategies are coordinated and systemically tracked.

Baseline Data for FFY 2004 (2004-2005):

For the FFY 2004 reporting period, Montana did not have any noncompliance issues concerning:

- A. Noncompliance related to monitoring priority areas and indicators;
- B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; or
- C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).

Discussion of Baseline Data:

Data Related to Indicator 9:

Informal Complaints.

Each of the seven regional Part C agencies documented informal complaint(s) that they received for the FY 2004-2005. All seven regional Part C agencies did not receive a formal complaint. They documented how each informal complaint was resolved, by whom, how many days did it take to resolve the issue, and if there was documentation that the family was informed about mediation and due process.

Agencies	Number of Informal Complaints	Who Handled the complaints	Days in which it got resolved	Reasons	Documentation
Agency 1	2	Family Support Specialist Supervisor	3 days	Complaint about FSS, Resolved by switching staff	Yes, for both
Agency 2	2	Family Support Specialist	Less than 10 days		Yes, for both
Agency 3	3	Family Support Specialist Supervisor,	1 day, 5 days 8 days	Change of FSS Complaint about validity of the child's assessment summary. FSS over stepping their job duties.	Yes
Agency 4	0	NA	NA	NA	NA
Agency 5	0	NA	NA	NA	NA
Agency 6	3	Middle Management	Between 9 to 16 days	Change of FSSs	Yes, all three

Agency 7	2	Family Support Specialist Supervisor	Within 7 days Unable to make contact	Change of FSS Family choose to leave services when FSS was going to change	Yes
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At the State level there were two informal complaints for the FFY 2004 that were addressed by the Part C Coordinator. Both individuals were informed of their rights for mediation and due process. Each of the families chose to settle the complaint at the agency level.

Further discussion of Montana’s General Supervision System, the following is a brief outline of the monitoring and compliances procedures:

Montana’s Monitoring Policies and Procedures.

Each of the seven regional part C agencies is monitored on an annual bases using MONTANA’S COMPREHENSIVE EVALUATION PROCESS FOR FAMILY EDUCATION AND SUPPORT SERVICES TOOL. For the FY 2004-2005, all seven of the Part C agencies were found to be in compliance with priority areas for this monitoring period. If an agency were found to be in non-compliance in an area the following steps would occur.

- The DDP provides a written summary of all findings and recommendations to each provider. In the event the review indicates contractor noncompliance with the terms and conditions of the contract (including all requirements under Part C) the contractor must submit, within thirty (30) calendar days of receipt, a written improvement plan detailing actions and timelines for correcting the deficiencies. The DDP must respond in writing within fifteen (15) days of receipt of such plan, accepting or suggesting modifications to the plan and establishing a data to evaluate progress of the plan.
- Generally, if a review reveals a systemic/pervasive deficiency, it is necessary to investigate further to confirm the finding. This will usually mean expanding the sample size to determine whether the identified issues apply beyond the original sample. It is not necessary that there be many issues identified at a provider organization for a Corrective Action Plan to be requested. It is not necessary that a Quality Assurance Review be in progress for a Quality Improvement Specialist to submit a Quality Assurance Observation Sheet that requires a Corrective Action Plan.

Data from Montana’s Comprehensive Evaluation Process for Family Education and Support Services Tool.

The following data is from the monitoring of the seven regional Part C agencies for the FFY 2004:

- Thirty-five out of thirty-five (100%) files reviewed documented that agencies provided each family with a copy of its internal complaint procedure and/or procedure to appeal agency decisions. (FY 2002-2003, 100%, 2003-2004 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that families are informed of specific complaint and appeal processes for issues of eligibility, screening, and IFSP’s. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files documented that families received all information on services (including information on families’ rights and safeguards) in their native language or typical means of communication, and in language that is jargon-free. (FY 2002-2003, 100%, 2003-2004, 100%)

DDP Procedures for Identifying Noncompliance through Complaints:

If DDP discovered any noncompliance issues during the following procedures for resolving complaints, due process or mediation, the issue would be addressed through the procedures outlined for Montana's Comprehensive Evaluation Process for Family Education and Support.

Lead Agency Procedures for Resolving Formal Complaints.

Montana did not have a Formal Complaint for the FFY 2004, but if a Formal Complaint would have occurred the following process would have occurred:

The DDP has adopted written procedures for receiving and resolving any written complaint that any public agency or private service provider who receives Part C funds is violating a requirement of Part C. Parents are informed regarding these system complaint procedures at least annually at the time when IFSPs are routinely evaluated and rewritten. Those procedures include:

- A time limit of 60-days after the complaint is filed to carry out an independent on-site investigation, if the lead agency determines such an investigation is necessary, and to resolve the complaint. There may be an extension of this 60-day time limit only if exceptional circumstances exist with respect to a particular complaint.
- Give the complainant the opportunity to submit additional information, either orally or in writing, about allegations in the complaint.
- Review all relevant information and make an independent determination whether the public or private agency is violating a requirement of Part C of IDEA, a provision of the current State Plan for implementation of Part C of IDEA, or the regulations.
- Issue a written decision to the complainant that addresses each allegation in the complaint and contains:
 - Findings of fact and conclusions.
 - The reasons for the lead agency's final decision;
- Establish procedures for effective implementation of the lead agency's final decision, if needed, to include:
 - Technical assistance activities, which enable the public or private agency to comply with the lead agency's decision.
 - Negotiations between the parties to the complaint, which lead to mutually satisfactory resolution of the complaint.
 - Correction actions by the lead agency to ensure that the public or private agency achieves compliance with the decision.
- In resolving a complaint in which it finds a failure to provide appropriate services, a lead agency, pursuant to its general supervisory authority under Part C of IDEA, must address:
 - How to remedy the denial of those services, including, as appropriate, the awarding of monetary reimbursement or other corrective action appropriate to the needs of the child and the child's family.
 - Appropriate future provision of services for all infants and toddlers with disabilities and their families.

Montana's Impartial Procedures for Resolving Individual Child Complaints (Due Process).

Montana did not have any requests for impartial procedures (due process) in FFY 2004, but if there was a request for due process this is how it would proceed:

- The Department of Public Health and Human Services (DPHHS) Director is responsible for implementing written, impartial administrative procedures for complaints by any party concerning any matters.
- The Director of DPHHS will appoint an impartial person who is not an employee of any agency or other entity involved in the provision of early intervention services or the care of the child, to implement the part C impartial procedures for mediation and/or complaint resolution.
- DDP maintains a list of individuals who are qualified mediators and knowledgeable in laws and regulations relating to the provisions of Part C early intervention services, and who meet the qualifications.
- The state shall bear the cost of any mediation process, including the cost of meetings associated with the process of mediation.
- Any party aggrieved by the findings and decision regarding a Part C administrative complaint may appeal to a district court or may bring a civil action under 20 U.S.C 1480[1], section 680 [1] of the Act 9303.424).

Montana's Mediation Process in Early Intervention.

Montana did not have any requests for mediation in FFY 2004, but if there was a request for mediation this is how it would proceed:

- Requesting Mediation
 - A request for mediation may occur when parents and an agency reach an impasse after having made good faith efforts to resolve their differences. A request for mediation will most likely occur when parties are unable or unwilling to modify their positions without outside assistance. The parents or the agency or both may request mediation.
 - Mediation may occur on any issue considered appropriate for due process. Mediation may occur prior to or concurrent with a request for due process. However, it may not, in any way, interfere with the right to due process. Mediation is not a necessary step prior to due process. It is an optional alternative.
- Agreeing to Mediate
 - Unless both parties agree to mediation as a way to resolve their disagreement, a mediation session cannot be scheduled. Once the parents and the agency agree to mediation, the parent completes the Agreement to Mediate form. The agency completes the Mediation Agreement Request Form, and sends both documents to the Developmental Disabilities Program (DDP). The DDP makes arrangements for the mediation to occur.
- Appointment of a Mediator
 - The Developmental Disabilities Program will submit to the parties involved a list of three potential mediators with a brief biography for each. The parties will have five days to reach an agreement on one of the mediators. If the parties cannot come to an agreement, the DDP Director will appoint a mediator in the matter.
- Mediation Timeline
 - Once appointed, the mediator will contact the parties to set the date, time and location for the mediation session and determine who will participate in the session. At that time, the mediator will answer any questions about the process and may request additional information from the parties. The mediation date

should be as soon as possible, but no later than 30 days from the date of the request for mediation.

- Mediators
 - Individuals selected to serve as mediators have successfully completed a training program specifically designed for mediators. The Developmental Disabilities Program maintains a list of qualified mediators.
 - Mediators are selected on the basis of these qualifications:
 - Neutrality, both real and perceived;
 - Knowledge of early intervention;
 - Knowledge of the process of mediation; and
 - Appropriate personal communication skills.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	<p>100% noncompliance identified through general supervision system will be corrected as soon as possible but in no case later than one year from identification for each of the following:</p> <ul style="list-style-type: none"> A. Noncompliance related to monitoring priority arrears and indicators; B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; and C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).
2006 (2006-2007)	<p>100% noncompliance identified through general supervision system will be corrected as soon as possible but in no case later than one year from identification for each of the following:</p> <ul style="list-style-type: none"> A. Noncompliance related to monitoring priority arrears and indicators; B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; and C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).
2007 (2007-2008)	<p>100% noncompliance identified through general supervision system will be corrected as soon as possible but in no case later than one year from identification for each of the following:</p> <ul style="list-style-type: none"> A. Noncompliance related to monitoring priority arrears and indicators; B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; and

	C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).
2008 (2008-2009)	100% noncompliance identified through general supervision system will be corrected as soon as possible but in no case later than one year from identification for each of the following: A. Noncompliance related to monitoring priority arrears and indicators; B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; and C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).
2009 (2009-2010)	100% noncompliance identified through general supervision system will be corrected as soon as possible but in no case later than one year from identification for each of the following: A. Noncompliance related to monitoring priority arrears and indicators; B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; and C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).
2010 (2010-2011)	100% noncompliance identified through general supervision system will be corrected as soon as possible but in no case later than one year from identification for each of the following: A. Noncompliance related to monitoring priority arrears and indicators; B. Noncompliance related to areas not included in the above monitoring priority areas and indicators; and C. Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.).

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Montana will continue to refine the tool, Montana’s Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State’s data	January 1, 2006 to June 30, 2006	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.

SPP Template – Part C (3)

__Montana__

<p>collection process for this indicator.</p>		
<p>2. Provide initial and annual training for the Quality Improvement Specialists.</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>3. DDP will monitor programs for compliance with this indicator. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop and implement improvement Plan or Corrective Action.</p>	<p>(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>4. To update the information that is located in our handbook called FIRST STEPS, which is provided by Parents' Lets Unite for Kids (PLUK).</p>	<p>July 1, 2005 to June 30, 2006</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>
<p>5. Review, monitor and revise when necessary Montana's Part C Systems Improvement Comprehensive Strategic Plan.</p>	<p>July 1, 2005 to June 30, 2008</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

The Developmental Disabilities Program (DDP-Montana's lead agency for Part C in the Department of Public Health and Human Services) has adopted complaint policies, procedures and a statewide system to ensure that the requirements for filing and resolving complaints within the timelines (60 days) meet the IDEA Part C statutes, rules and regulations. Further, the DDP has engaged in dissemination (e.g., through interagency agreements, documents) of these complaint policies and procedures to parents through the regional Part C agencies and other agencies and programs associated with Part C services. In addition, DDP monitoring ensures that regional Part C agencies inform their parents of complaint procedures.

Seven Regional Part C agencies:

- Each agency has an informal process in place to handle complaints from families.
- Each agency disseminates and explains complaint information to families during each IFSP development period.

Lead Agency Procedures for resolving Formal Complaints.

- The DDP has adopted written procedures for receiving and resolving any written complaint that any public agency or private service provider who receives Part C funds is violating a requirement of Part C. Parents are informed regarding these system complaint procedures at least annually at the time when IFSPs are routinely evaluated and rewritten. Those procedures include:
 - A time limit of 60 days after the complaint is filed to carry out an independent on-site investigation, if the lead agency determines such an investigation is necessary, and to resolve the complaint. There may be an extension of this 60-day time limit only if exceptional circumstances exist with respect to a particular complaint.
 - Give the complainant the opportunity to submit additional information, either orally or in writing, about allegations in the complaint.
 - Review all relevant information and make an independent determination whether the public or private agency is violating a requirement of Part C of IDEA, a provision of the current State Plan for implementation of Part C of IDEA, or the regulations.
 - Issue a written decision to the complainant that addresses each allegation in the complaint and contains:
 - Findings or fact and conclusions.
 - The reasons for the lead agency's final decision;
- Establish procedures for effective implementation of the lead agency's final decision, if needed, to include:
 - Technical assistance activities, which enable the public or private agency to comply with the lead agency's decision.
 - Negotiations between the parties to the complaint, which lead to mutually satisfactory resolution of the complaint.
 - Correction actions by the lead agency to ensure that the public or private agency achieves compliance with the decision.

SPP Template – Part C (3)

__Montana__

- In resolving a complaint in which it finds a failure to provide appropriate services, a lead agency, pursuant to its general supervisory authority under Part C of IDEA, must address:
 - How to remedy the denial of those services, including, as appropriate, the awarding of monetary reimbursement or other corrective action appropriate to the needs of the child and the child’s family.
 - Appropriate future provision of services for all infants and toddlers with disabilities and their families.

Baseline Data for FFY 2004 (2004-2005):

For the FFY 2004 reporting period, Montana did not have any written complaints.

Discussion of Baseline Data:

Informal Complaints.

- Each of the seven regional Part C agencies documented formal or informal complaint that they received for the FY 2004-2005. All seven regional Part C agencies did not receive a formal complaint. They documented how each informal complaint was resolved, by whom, how many days did it take to resolve the issue, and if there was documentation that the family was informed about mediation and due process.

Agencies	Number of Informal Complaints	Who Handled the complaints	Days in which it got resolved	Reasons	Documentation
Agency 1	2	Family Support Specialist Supervisor	3 days	Complaint about FSS, Resolved by switching staff	Yes, for both
Agency 2	2	Family Support Specialist	Less than 10 days		Yes, for both
Agency 3	3	Family Support Specialist Supervisor,	1 day, 5 days 8 days	Change of FSS Complaint about validity of the child’s assessment summary. FSS over stepping their job duties.	Yes
Agency 4	0	NA	NA	NA	NA
Agency 5	0	NA	NA	NA	NA
Agency 6	3	Middle Management	Between 9 to 16 days	Change of FSSs	Yes, all three

SPP Template – Part C (3)

__Montana__

Agency 7	2	Family Support Specialist Supervisor	Within 7 days Unable to make contact	Change of FSS Family chose to leave services when FSS was going to change	Yes
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- At the State level there were two informal complaints for the FY 2004-2005 that were addressed by the Part C Coordinator. Both individuals were informed of complaint procedures and their rights for mediation and due process. Each family chose to settle the complaint at the agency level.

Data from Montana’s Comprehensive Evaluation Process for Family Education and Support Services Tool.

The following data is from the monitoring of the seven regional Part C agencies for the FY 2004-2005:

- Thirty-five out of thirty-five (100%) files reviewed documented that agencies provided each family with a copy of its internal complaint procedure an/or procedure to appeal agency decisions. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that families are informed of specific complaint and appeal processes for issues of eligibility, screening, and IFSP’s. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that parents have access to child and family records. (FY 2002-2003, 100%, FY 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files documented that families received all information on services (including information on families’ rights and safeguards) in their native language or typical means of communication, and in language that is jargon-free. (FY 2002-2003, 100%, 2003-2004, 100%)

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of signed written complaints will be resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2006 (2006-2007)	100% of signed written complaints will be resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2007 (2007-2008)	100% of signed written complaints will be resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2008 (2008-2009)	100% of signed written complaints will be resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2009 (2009-2010)	100% of signed written complaints will be resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.
2010 (2010-2011)	100% of signed written complaints will be resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
<p>1. Montana will continue to refine the tool, Montana’s Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State’s data collection process for this indicator (biannually).</p>	<p>(1) January 1, 2006- June 30, 2008 (2) July 1, 2008- June 30, 2010 (3) July 1, 2010- June 30, 2011</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>2. Provide initial and annual training for the Quality Improvement Specialists.</p>	<p>(1) July 1, 2006- June 30, 2007 (2) July 1, 2007- June 30, 2008 (3) July 1, 2008- June 30, 2009 (4) July 1, 2009- June 30, 2010 (5) July 1, 2010- June 30, 2011</p>	<p>FSSAC, regional Part C agency Directors and Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>3. Provide biannual training on formal written complaint procedures for regional Part C agency directors and managers and PLUK staff.</p>	<p>(1) July 1, 2006 – June 30, 2007 (2) July 1, 2008 – June 30, 2009 (3) July 1, 2010 – June 30, 2011</p>	<p>Part C Coordinator, FSSAC, regional Part C agency directors and managers, PLUK staff</p>
<p>4. DDP will monitor programs for compliance with this indicator. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop and implement improvement Plan or Corrective Action.</p>	<p>July 1, 2005 to June 30, 2011</p>	<p>FSSAC, regional Part C agency Directors and Managers, Part C technical assistance and trainers, and the Part C Coordinator.</p>
<p>5. To update the information that is located in our handbook called First Steps, which is provided by Parents’ Lets Unite for Kids</p>	<p>July 1, 2005 to June 30, 2006</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

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

Overview of Issue/Description of System or Process:

The Developmental Disabilities Program (DDP-Montana's lead agency for Part C in the Department of Public Health and Human Services) has adopted complaint policies, procedures and a statewide system to ensure that the requirements for filing and resolving complaints within the timelines (60 days) meet the IDEA Part C statutes, rules and regulations. Further, the DDP has engaged in dissemination (e.g., through interagency agreements, documents) of these complaint policies and procedures to parents through the regional Part C agencies and other agencies and programs associated with Part C services. In addition, DDP monitoring ensures that regional Part C agencies inform their parents of complaint procedures.

Lead Agency Impartial Procedures for Resolving Individual Child Complaints (Due Process).

Montana did not have any requests for impartial procedures (due process) in FFY 2004, but if there was a request for due process this is how it would proceed:

- The Department of Public Health and Human Services (DPHHS) Director is responsible for implementing written, impartial administrative procedures for complaints by any party concerning any matters.
- The Director of DPHHS will appoint an impartial person who is not an employee of any agency or other entity involved in the provision of early intervention services or the care of the child, to implement the part C impartial procedures for mediation and/or complaint resolution.
- DDP maintains a list of individuals who are qualified mediators and knowledgeable in laws and regulations relating to the provisions of Part C early intervention services, and who meet the qualifications.
- The state shall bear the cost of any mediation process, including the cost of meetings associated with the process of mediation.
- Any party aggrieved by the findings and decision regarding a Part C administrative complaint may appeal to a district court or may bring a civil action under 20 U.S.C 1480[1], section 680 [1] of the Act 9303.424).

Baseline Data for FFY 2004 (2004-2005):

For the FFY 2004-2005 reporting period Montana did not have any requests for due process.

Discussion of Baseline Data:

If there is a request for due process, DDP will follow the mediation policies and procedures listed above.

Data from Montana’s Comprehensive Evaluation Process for Family Education and Support Services Tool.

The following data is from the monitoring of the seven regional Part C agencies for the FY 2004-2005:

- Thirty-five out of thirty-five (100%) files reviewed documented that agencies provided each family with a copy of its internal complaint procedure an/or procedure to appeal agency decisions. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that families are informed of specific complaint and appeal processes for issues of eligibility, screening, and IFSP’s. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that parents have access to child and family records. (FY 2002-2003, 100%, FY 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files documented that families received all information on services (including information on families’ rights and safeguards) in their native language or typical means of communication, and in language that is jargon-free. (FY 2002-2003, 100%, 2003-2004, 100%)

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline.
2006 (2006-2007)	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline.
2007 (2007-2008)	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline.
2008 (2008-2009)	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline.
2009 (2009-2010)	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline.
2010 (2010-2011)	100% of fully adjudicated due process hearing requests will be fully adjudicated within

	the applicable timeline.
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Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Montana will continue to refine the tool, Montana’s Comprehensive Evaluation Process for Family Education and Support Services, to enhance the State’s data collection process for this indicator. (biannually)	(1)January 1, 2006- June 30, 2006 (2)July 1, 2008- June 30, 2010 (3)July 1, 2010- June 30, 2011	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.
2. Provide initial and annual training for the Quality Improvement Specialists.	(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.
3. Provide biannual training on due process and mediation for regional Part C agency directors and managers, and PLUK staff.	(1) July 1, 2006 – June 30, 2007 (2) July 1, 2008 – June 30, 2009 (3) July 1, 2010 – June 30, 2011	Part C Coordinator, FSSAC, regional Part C agency directors and managers PLUK staff
4. DDP will monitor programs for compliance with this indicator. When noncompliance is identified, Quality Improvement Specialists and Part C Coordinator will work with program to determine nature of noncompliance, develop and implement improvement Plan or Corrective Action.	(1)July 1, 2006- June 30,2007 (2)July 1, 2007- June 30,2008 (3)July 1, 2008- June 30,2009 (4)July 1, 2009- June 30,2010 (5)July 1, 2010- June 30,2011	FSSAC, Providers Managers, Part C technical assistance and trainers, and the Part C Coordinator.
5. Recruit new and provide training for impartial	(1) July 1, 2006 – June 30, 2007	FSSAC, Part C Coordinator, DDP legal counsel, and Impartial

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<p>persons for due process and mediation for child complaints once every three years or more frequently if necessary.</p>	<p>(2) July 1, 2009 – June 30, 2010</p>	<p>persons for due process and mediation.</p>
<p>6. To update the information that is located in our handbook called First Steps, which is provided by Parents' Lets Unite for Kids (PLUK).</p>	<p>July 1, 2005 to June 30, 2006</p>	<p>FSSAC, Providers Managers, Part C technical assistance and trainers, PLUK and the Part C Coordinator.</p>

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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.

Overview of Issue/Description of System or Process:

Montana Part C program has not adopted Montana's Part B due process system. Thus, the issues of resolution session agreements does not apply.

Baseline Data for FFY 2004 (2004-2005):

Discussion of Baseline Data:

FFY	Measurable and Rigorous Target
2005 (2005-2006)	This process is not applicable for Montana.
2006 (2006-2007)	
2007 (2007-2008)	
2008 (2008-2009)	
2009 (2009-2010)	
2010	

(2010-2011)	
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Improvement Activities/Timelines/Resources:

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:**

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

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.

Overview of Issue/Description of System or Process:

The Developmental Disabilities Program (DDP-Montana's lead agency for Part C in the Department of Public Health and Human Services) has adopted complaint policies, procedures and a statewide system to ensure that the requirements for filing and resolving complaints within the timelines (60 days) meet the IDEA Part C statutes, rules and regulations. Further, the DDP has engaged in dissemination (e.g., through interagency agreements, documents) of these complaint policies and procedures to parents through the regional Part C agencies and other agencies and programs associated with Part C services. In addition, DDP monitoring ensures that regional Part C agencies inform their parents of complaint procedures.

Montana's Mediation Process in Early Intervention.

Montana did not have any requests for mediation in FFY 2004, but if there was a request for mediation this is how it would proceed:

- Requesting Mediation
 - Parent(s) can request mediation at any time if they have concerns regarding early intervention services (e.g. evaluation, placements, or other service issues).
 - A request for mediation may occur when parents and an agency reach an impasse after having made good faith efforts to resolve their differences. A request for mediation will most likely occur when parties are unable or unwilling to modify their positions without outside assistance. The parents or the agency or both may request mediation.
 - Mediation may occur on any issue considered appropriate for due process. Mediation may occur prior to or concurrent with a request for due process. However, it may not, in any way, interfere with the right to due process. Mediation is not a necessary step prior to due process. It is an optional alternative.
- Agreeing to Mediate
 - Unless both parties agree to mediation as a way to resolve their disagreement, a mediation session cannot be scheduled. Once the parents and the agency agree to mediation, the parent completes the Agreement to Mediate form. The agency completes the Mediation Agreement Request Form, and sends both documents to the Developmental Disabilities Program (DDP). The DDP makes arrangements for the mediation to occur.

- Appointment of a Mediator
 - The Developmental Disabilities Program will submit to the parties involved a list of three potential mediators with a brief biography for each. The parties will have five days to reach an agreement on one of the mediators. If the parties cannot come to an agreement, the DDP Director will appoint a mediator in the matter.

- Mediation Timeline
 - Once appointed, the mediator will contact the parties to set the date, time and location for the mediation session and determine who will participate in the session. At that time, the mediator will answer any questions about the process and may request additional information from the parties. The mediation date should be as soon as possible, but no later than 30 days from the date of the request for mediation.

- Mediators
 - Individuals selected to serve as mediators have successfully completed a training program specifically designed for mediators. The Developmental Disabilities Program maintains a list of qualified mediators.

 - Mediators are selected on the basis of these qualifications:
 - Neutrality, both real and perceived;
 - Knowledge of early intervention;
 - Knowledge of the process of mediation; and

 - Appropriate personal communication skills.

Baseline Data for FFY 2004 (2004-2005):

Montana did not report any mediations for the FFY 2004, which follows the trend.

Discussion of Baseline Data:

Montana will establish a baseline when 10 or more mediations are brought to the State. If there is a request for mediation, DDP will follow the mediation policies and procedures listed above.

Data from Montana's Comprehensive Evaluation Process for Family Education and Support Services Tool.

The following data is from the monitoring of the seven regional Part C agencies for the FY 2004-2005:

- Thirty-five out of thirty-five (100%) files reviewed documented that agencies provided each family with a copy of its internal complaint procedure an/or procedure to appeal agency decisions. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that families are informed of specific complaint and appeal processes for issues of eligibility, screening, and IFSP's. (FY 2002-2003, 100%, 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files reviewed documented that parents have access to child and family records. (FY 2002-2003, 100%, FY 2003-2004, 100%)
- Thirty-five out of thirty-five (100%) files documented that families received all information on services (including information on families' rights and safeguards) in their native language or typical means of communication, and in language that is jargon-free. (FY 2002-2003, 100%, 2003-2004, 100%)

FFY	Measurable and Rigorous Target
<p>2005 (2005-2006)</p>	<p>Montana will set targets when 10 or more requests for mediations have occurred.</p>
<p>2006 (2006-2007)</p>	
<p>2007 (2007-2008)</p>	
<p>2008 (2008-2009)</p>	
<p>2009 (2009-2010)</p>	
<p>2010 (2010-2011)</p>	

Improvement Activities/Timelines/Resources:

Montana will establish improvement Activities/Timelines/Resources when 10 or more requests for mediations have occurred.

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

Overview of the State Performance Plan Development:

See Indicator 1 for a description of the State Performance Plan development.

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / General Supervision

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

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

Measurement:

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

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

Overview of Issue/Description of System or Process:

Montana has policies, procedures, guidelines and a monitoring process to ensure that Part C data for OSEP's 618 report, State Performance Plan (SPP) and Annual Performance Report (APR) are completed in accordance to the OSEP due dates and that the data is accurate. DDP Part C staff, FSSAC members, and technical assistance providers have participated in OSEP conferences, meetings and technical assistance conference calls that have specifically addressed the 618 reports, SPP and APR. DDP has a Part C General Supervision Enhancement Grant Project, which addresses early childhood and family outcomes, and the general supervision (monitoring) concerning those outcomes. In addition, the DDP has collaborated with The University of Montana Rural Institute's OSEP funded Dynamic Community Connections Project, one of six directed child find demonstration projects which included addressing data for Indicators 5 and 6 and other service provision indicators. Data for these reports are submitted from each regional Part C agency.

The DDP has developed guidelines and instructions for the collection of data for the 618, SPP and past APR reports. Further, the DDP has provided technical assistance and follow-up with each regional Part C agency to ensure that the agencies are collecting the data appropriately in accordance to the guidelines and instructions. DDP's Quality Improvement Specialist (QIS) in each regional DDP office completes annual monitoring (see Indicator 9 for a description of monitoring) to ensure compliance to Part C of the IDEA and review of various data reports (including 618, SPP and APR data reports). The Part C Coordinator compiles and analyzes all the data for these reports. If there are any concerns about the data reported by an agency for any report, the part C Coordinator will discuss the issue with the agency data manager for the specific data and agency management staff, to clarify that the data was collected and reported accurately, and if not, corrections that need to be made to resolve the problem.

While Montana is a large state geographically, an advantage in collecting and monitoring data is that there are only 600 – 700 infants and toddlers receiving Part C services at a point in time; there are only 5 DDP service regions, there are only 7 regional Part C agencies, and most DDP staff associated with Part C services and regional Part C agency directors have been in their jobs for many years. For instance, since the beginning of the then Part H Infant and Toddler Program, only one regional Part C agency director was not their agency's director or in a supervisory position in their

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agency. With fewer programs and staff involved in data collection and reporting for these reports, it is easier to provide training and technical assistance and monitor these activities in the regional Part C agencies. Further, even prior to Part C services, DDP required the routine reporting of detailed program data. Thus, there is a culture of collecting accurate data for the DDP's children and family services, including Part C.

Baseline Data for FFY 2004 (2004-2005):

100% compliance with reporting on time and accurately. State reported data for the 618 report and APR were both submitted:

- (a.) on time (618 report and APR), and
- (b.) with accurate data.

Discussion of Baseline Data:

According to the data collection, data analyses, and monitoring processes described in the Overview of Issue/Description of System or Process described above and the overall monitoring process described in that section for Indicator 9, the DDP developed the 618 and APR reports in a timely manner and submitted the reports to OSEP by the specific due dates. Further, the DDP reviewed and analyzed the data submitted to ensure accuracy of the data before completing the reports. Any data that might not appear accurate was addressed with the appropriate staff in the regional Part C agency and if needed, corrected.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% compliance for reporting on time and accurately.
2006 (2006-2007)	100% compliance for reporting on time and accurately.
2007 (2007-2008)	100% compliance for reporting on time and accurately.
2008 (2008-2009)	100% compliance for reporting on time and accurately.
2009 (2009-2010)	100% compliance for reporting on time and accurately.
2010 (2010-2011)	100% compliance for reporting on time and accurately.

Improvement Activities/Timelines/Resources:

Activities	Timelines	Resources
1. Annually review DDP data collection instructions,	(1) July 1, 2006- June 30, 2007	Part C Coordinator, regional Part C agency managers and staff,

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<p>procedures and monitoring activities for 618, SPP and APR reports to determine steps needed to improve data collection, analyses and verification efforts.</p>	<p>(2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>and DDP staff.</p>
<p>2. Annually provide a review, training, and/or technical assistance (for new DDP or regional Part C agency staff) concerning data requirements for the 618, SPP and APR reports</p>	<p>(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>Part C Coordinator, regional Part C agency managers and staff, and DDP staff.</p>
<p>3. Annually participate in OSEP’s training and technical assistance activities concerning the 618, SPP and APR reports, and make any necessary changes to DDP’s policies procedures for data collection and monitoring. Incorporate changes in the training and technical assistance noted in Activity 2 above.</p>	<p>(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009 (4) July 1, 2009- June 30,2010 (5) July 1, 2010- June 30,2011</p>	<p>Part C Coordinator, regional Part C agency managers and staff, and DDP staff.</p>
<p>4. Prior to submission, annually review the 618, SPP and APR with the DDP, regional Part C agencies, and FSSAC to determine if changes, additions or corrections are needed and make such modifications and obtain FSSAC approval for the SPP/APR to be submitted.</p>	<p>(1) November 1, 2006-February 1, 2007 (2) November 1, 2007-February 1, 2008 (3) November 1, 2008-February 1, 2009 (4) November 1, 2009-February 1, 2010 (5) November 1, 2010-February 1, 2011</p>	<p>Part C Coordinator, FSSAC, regional Part C agency managers and staff, and DDP staff.</p>
<p>5. Annually, the DDP accurately complete 618 and SPP/APR reports and submit according to OSEP due dates.</p>	<p>(1) July 1, 2006- June 30,2007 (2) July 1, 2007- June 30,2008 (3) July 1, 2008- June 30,2009</p>	<p>Part C Coordinator, FSSAC, regional Part C agency managers and staff, and DDP staff.</p>

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	(4) July 1, 2009- June 30, 2010	
	(5) July 1, 2010- June 30, 2011	